



**Lancashire
SAFEGUARDING ADULTS BOARD
DRAFT Annual Report 2020-21**

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FOREWORD

This annual report provides a summary of the work undertaken by the Safeguarding Adults Board in Lancashire over the last year.

The period covered by this report was of course dominated by the ongoing Covid-19 pandemic. Over the course of the year there were restrictions in place on everyone, and this included a number of 'lockdowns' and restrictions. All the agencies and organisations that are engaged in protecting our most vulnerable citizens were under immense pressure. I think we will all reflect on the work they have done and be impressed with the commitment and professionalism shown.

As part of the government response to the pandemic the Lancashire Resilience Forum (LRF) was put in place. Over the year there was considerable support provided and coordinated through the forum. One of the sub-groups of the LRF dealt specifically with adult safeguarding and this group was led by the three Directors of Adult Services (DAS), and chaired by the DAS for Lancashire County Council. The group continues to meet as an adult and health system responding to Covid-19 and driving transformational change to support people to stay safe and independent. Health organisations, the Police, third sector organisations and Public Health worked closely together to coordinate their response to the pandemic. This ensured that the most vulnerable received food and medical treatment and that care homes were able to function effectively. I have spent 40 years working in the public sector and I have never seen such an efficient and coordinated response to a crisis. We all owe a huge debt of gratitude to the work of the forum and those that implemented emergency plans, especially the army of volunteers that stepped forward.

It was clear that the work of the LRF was the priority in terms of safeguarding and as such much of the work of the safeguarding adult board was suspended. Sub-groups dealing with specific issues were put on hold to give professionals the time to concentrate on their front-line responsibilities. The Board did remain in place to ensure that its statutory functions were fulfilled. Consequently, this year's annual report may not fully reflect the huge amount of work undertaken.

This report describes the structures that are in place and our priorities as we move forward. It provides considerable detail about the level of safeguarding need over the year. At this point we cannot be entirely clear how prolonged 'lockdowns' and restrictions may impact on services moving forward. This is an area that the Board will focus on this year. We do know for instance, that the effect of the pandemic on health care and the care home sector will stretch long into the future.

I would like to finish by thanking all of those that have worked so hard to maintain our high levels of safeguarding. The board is now fully functioning, and I look forward to driving forward new initiatives and focussing on our priorities over the coming months.

Stephen Ashley

Independent Chair, Lancashire Safeguarding Adult Board

1. THE BOARD

1.1 Purpose of the Board

The Care Act 2014 requires a local authority to establish a Safeguarding Adults Board (SAB), which aims to help and protect individuals who it believes to have care and support needs and who are at risk of neglect and abuse and are unable to protect themselves, and to promote their wellbeing. Section 43 (3) sets out how the SAB should seek to achieve its objective, through the co-ordination of members' activities in relation to safeguarding and ensuring the effectiveness of what those members do for safeguarding purposes. An SAB may undertake any lawful activity which may help it achieve its objective. Section 43 (4) sets out the functions which a SAB can exercise in pursuit of its objective are those of its members. Section 43 (5) Schedule 2 includes provision about the membership, funding and other resources, strategy and annual report of a SAB. Section 43 (6) acknowledges that two or more local authorities may establish a SAB for their combined geographical area of responsibility. <https://www.legislation.gov.uk/ukpga/2014/23/section/43>

Six principles set out in the Care Act:

Empowerment

Protection

Prevention

Partnership

Proportionality

Accountability

The Board has three core duties under the Care Act 2014:



1.2 Partnership Structure

The Safeguarding Adults Board is supported by an Independent Chair to oversee the work of the Board, to provide leadership, offer constructive challenge, and ensure independence. The day-to-day work of the Board is undertaken by the Sub-Groups and the Safeguarding Business Unit. The Business Unit supports the operational running of these arrangements and manages the Board on behalf of the multiagency partnership. The Board facilitate joint working, ensure effective safeguarding work across the region, and provide consistency for our partners who work across Pan Lancashire.

2. WHAT DOES ADULT SAFEGUARDING LOOK LIKE IN LANCASHIRE

Local Context and Background

The ceremonial county of Lancashire is in the North West of England and consists of the shire county of Lancashire and the "2 unitary authority areas" of Blackburn with Darwen and Blackpool. The shire county¹ area is a "2-tier authority", meaning it is controlled by a county council (Lancashire County Council), and 12 local government district councils. In contrast Blackburn with Darwen and Blackpool, each have just "1 unitary tier" of local government, which provides all local services.

The following information intends to provide a brief overview of the local demographic context for Lancashire, Blackburn with Darwen and Blackpool. Information provided for each upper tier council area (Lancashire County Council, Blackburn with Darwen council and Blackpool council) unless otherwise stated.

2.1 Population

2020 Mid-year population estimates² indicate that Lancashire (Lancs-14) has a population of 1,515,487, 80.9% of the population are estimated to reside within the Lancashire County Council area, 9.9% within Blackburn with Darwen and 9.1% Blackpool.

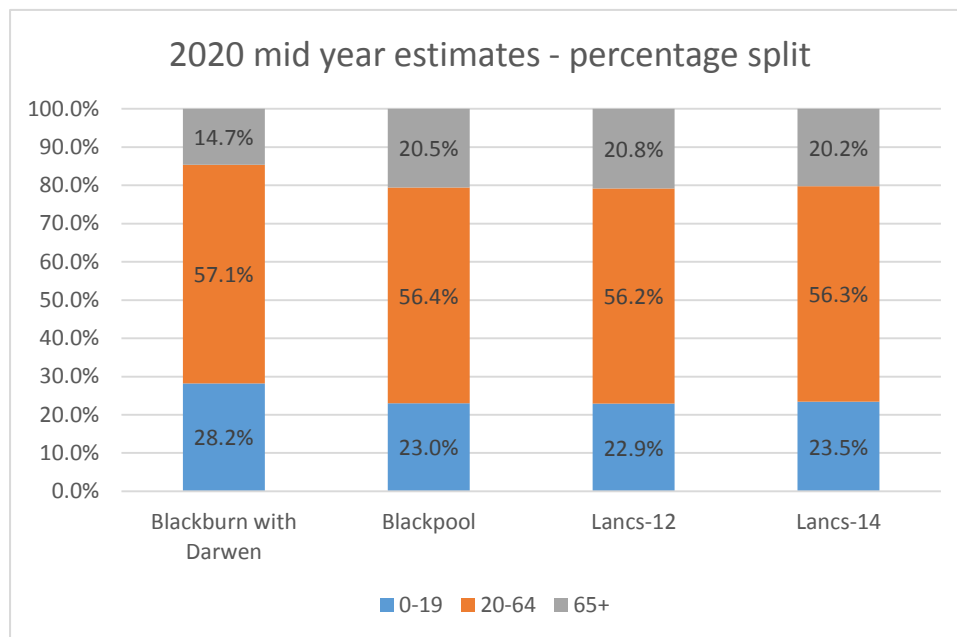
Approximately 2.7% of the English population and 20.6% of the North West population reside in the Lancashire-14 area.

Indicator	No.	Blackburn with Darwen	Blackpool	Lancs-12	Lancs-14
2020 mid-year estimates	All age	150,030	138,381	1,227,076	1,515,487
All Age	%	9.9%	9.1%	81%	100%

¹ The shire county area of Lancashire includes the 12 districts of Burnley, Chorley, Fylde, Hyndburn, Lancaster, Pendle, Preston, Ribble Valley, Rossendale, South Ribble, West Lancashire and Wyre

² 2020 mid-year population estimates most recently available data

In terms of age breakdown, data for the Lancashire-14 footprint indicates that almost one quarter (23.5%) of the population is aged 0-19. 56.3% are aged 20-64 and 20.2% are aged 65+.



Figures for Blackpool Council area and Lancashire County Council mirror this percentage split, however as shown by the graph to the left Blackburn with Darwen Council area has a lower percentage of older residents (14.7% aged 65+),

Data indicates that the population in the Lancashire-14 area has grown by approximately 0.4% compared with the previous year's mid-year estimate and there has been an increase in births and fewer deaths occurring, which indicates a natural positive population change.

In the 12 months to mid-2020, Ribble Valley district grew the most, whilst Blackpool had the slowest level of growth. It is important to note that Blackpool's opportunity for future population growth is limited since the population density is already high.

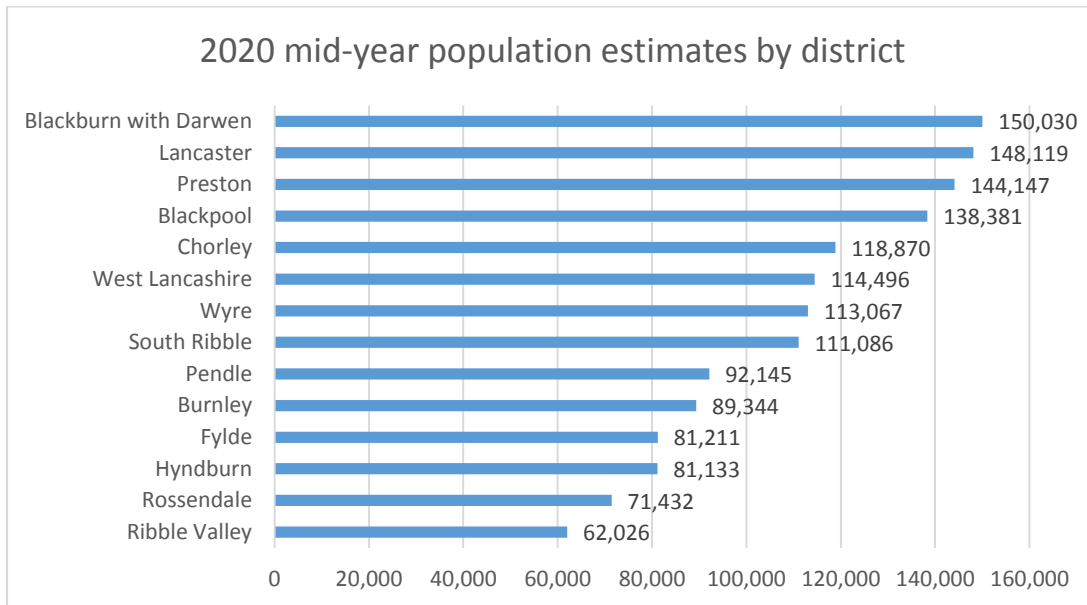
The over-65 age group saw a growth rate of 1.58%, which is much higher than growth at other ages (growth rate of under 18's was 0.6% and 18-64 was 0.5%), this suggests that we continue to have an ageing population within Lancashire.

As mentioned above, the unitary authority areas, which neighbour the Lancashire County Council geography, have much smaller estimated populations. Mid-year 2020 population data indicates that Blackburn with Darwen has an all-age population of 150,030 and Blackpool 138,381. This means that the unitary areas are each roughly 1/8th – 1/9th of the size of the Lancashire-12 geographical footprint.

Each of the 14 districts of Lancashire is diverse and has significant differences in terms of population, demography, geography, ethnic composition and levels of deprivation.

As the bar chart below shows, the populations of each district within Lancashire varies. Blackburn with Darwen is the largest district in terms of population, whilst the largest district geographically speaking is Ribble Valley, which inevitably means that each district has a different population density. Lancaster has the largest population in the Lancashire County Council jurisdiction (148,119), closely followed by Preston (144,147), both districts have Cities and a University population. The districts with the lowest populations are Rossendale (71,432)

and Ribble Valley (32,026). Rossendale is a small district, whilst Ribble Valley is predominantly rural communities.

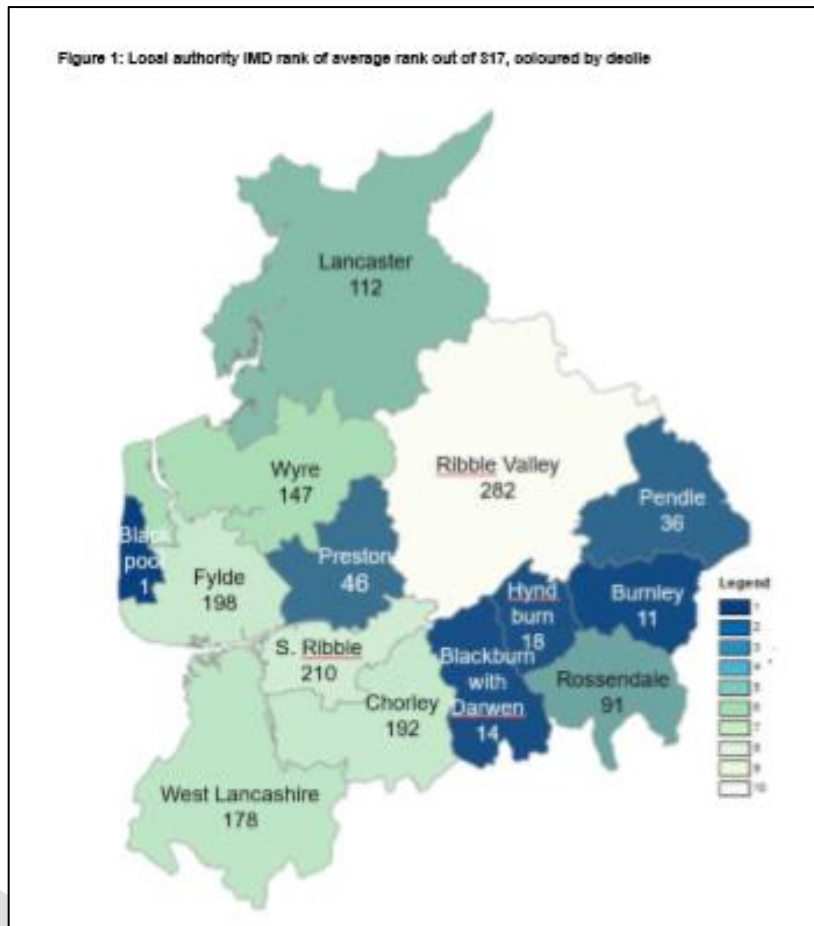


2.2 Deprivation

The Indices of Multiple Deprivation (IMD) was updated in 2019. The results of the IMD (updated approximately every 3 years), are used by agencies to help us understand local issues, and to address problems identified within different areas of Lancashire, the IMD is based on 7 domains of deprivation, each considered and contributes to the overall index score.

As mentioned above, each district within Lancashire is unique and one major reason for this is the level of deprivation; within Lancashire, there are districts known to be very deprived, whilst others considered affluent.

Each local authority in the country is given a ranking between 1 and 317 where, 1 is the most deprived and 317 is the least deprived. The map to the right³ illustrates the local authority IMD rank for each district of Lancashire. Those districts coloured in the darker shades of blue are the most deprived, whilst the lighter shaded ones are least deprived.



Blackpool (1st), Burnley (11th), Blackburn with Darwen (14th) and Hyndburn (18th) are in the top 10% most deprived areas in the country. Pendle (36th) and Preston (46th) are in the most deprived 20%. In contrast, Ribble Valley is ranked 282nd which puts the district in the least deprived 20% in England.

IMD information is also available broken down to Lower Support Output Area. This information illustrates that within a district there will be vast differences in deprivation; this is especially true for those districts such as Lancaster that have a mixture of City/Town areas and rural ward areas.

Further information regarding area profiles, population projection, deprivation and community safety is on the [Lancashire Insight](#) webpage.

³ Map image sourced from Lancashire Insight webpage

2.3 Safeguarding Adults Section 42 Enquiries

Counts of Safeguarding Activity	2019/20	2020/21
Total Number of Safeguarding Concerns	20438	9148
Total Number of Section 42 Safeguarding Enquiries	10391	4323
Total Number of Other Safeguarding Enquiries	0	0

Abuse Type Description	2019/20	2020/21
Physical	2766	2283
Sexual	581	520
Emotional/Psychological	3738	3114
Financial and Material	2329	2003
Discriminatory	84	61
Organisational	198	97
Neglect and Acts of Omission	5651	4121
Domestic Abuse	1491	1625
Sexual Exploitation	61	29
Modern Slavery	25	22
Self-neglect	496	554

Following a redesign of adults safeguarding within Lancashire it was concluded that the recording of how we would meet the definitions of enquiries and concerns within the Safeguarding Adults Collection would change for the 2019/20 submission. Concerns were switched from all cases that were passed through and worked on by the Multi Agency Safeguarding Hub (MASH) to all contacts indicating safeguarding issues. Enquiries were recorded as all cases that went to MASH rather than just those that were then stepped up for further investigation by the Safeguarding Enquiry Service. Prior to submitting the 2020/21 following discussions with management it was decided that the previous way of recording was more in line with comparator authorities and as a result we switched back.

3. THE ROLE AND ACHIEVEMENTS OF THE SUB-GROUPS

During the reporting period significant changes were made which resulted in a single central joint partnership business unit (JPBU) to support the 3 Safeguarding Adult Boards across Blackburn with Darwen, Blackpool and Lancashire.

The Covid-19 pandemic has caused disruption during the reporting period and the commitment of Board Partners to attend meetings was impacted due to prioritising emergency service provision, particularly those in Health and Social care. The Partners agreed to suspend all sub-groups during the reporting period until the pandemic had settled. The sub-groups re-convened after the reporting period and have merged into 'single' sub-groups to function across the three Safeguarding Adult Board areas, rather than separate sub-groups in all 3 areas. The exception to this, are Safeguarding Adult Reviews, as each SAR would be linked to their individual Safeguarding Adult Board. 'Single' sub-groups ensure consistency, improved communication and information sharing, showcase best practice, address common challenges and identify mutual priorities.

The function of the 3 Safeguarding Adult Boards includes developing a safeguarding culture that focuses on the personalised outcomes desired by people with care and support needs who may have been abused, harmed or neglected. This is a key operational and strategic goal. An overview of the purpose and functions of the new sub-groups to address the strategic priorities as identified in the strategic plan is provided below. At the time of writing this report, work plans for the sub-groups were in development.

3.1 COMPLEX VULNERABILITIES SUB-GROUP

The purpose of the Complex Vulnerabilities Sub-group aims:

- To act on behalf of the three Safeguarding Adult Boards to ensure a robust, transparent and consistent approach to Complex Safeguarding Vulnerabilities.
- To monitor the delivery of its statutory duties in relation to Complex Safeguarding Vulnerabilities
- Improve collaborative work across the partnership to provide a consistent approach to support people experiencing complex vulnerabilities.
- Ensure approaches to complex vulnerabilities are meaningfully implemented and embedded in practice by all partners, and that its effectiveness is measured to give confidence.

The function and key objectives of the 'Complex Vulnerabilities' Sub-group are:

- To ensure an effective mechanism is in place to tackle the complexities associated with safeguarding adults in line with the 'prevention' principle of the Care Act 2014.
- To develop a mechanism to support those individuals that do not meet the thresholds of statutory criteria to access support from statutory services.
- To provide oversight and direction to Partners to ensure appropriate approaches to complex safeguarding are embedded within practice and partner systems, policies, processes and identified training needs.

The Blackburn with Darwen, Blackpool and Lancashire SABs, can play a role in developing an approach to 'complex safeguarding' across agencies by establishing and developing the following areas:

- Consider emerging themes such as domestic abuse, suicides, self-neglect, homelessness, adult exploitation and discrimination linked to vulnerability.
- Consider how Partners can engage with individuals who disengage with services
- Encourage a joined-up approach between agencies to support people with complex vulnerabilities
- A focus on outcomes for those with complex vulnerabilities
- Person-centred approaches to working with varied risk and vulnerabilities
- Policies and procedures that are in line with a personalised safeguarding approach
- Strategies to enable practitioners to work more effectively with the skills and support needed to help those with complex vulnerabilities.

The 'Complex Vulnerabilities' Sub-group will link to other SAB Sub-groups where they have an important role to play in matters such as:

- Sharing learning and development needs identified through the Complex Vulnerabilities sub-group with the Performance, Assurance and Impact, Learning and Development Sub-groups.
- Sharing any communication and public interest matters on complex issues from SARS to ensure that partners are aware of any implications for their organisations.
- There will be links to Community Safety Partnerships, Health and Wellbeing boards, Local Criminal Justice Boards (LCJB), Violence Reduction Network (VRN) and Pan Lancashire anti-slavery partnership (PLASP) to ensure consistency, eliminate duplication and to capture the governance arrangements, to ensure clarity of responsibilities and the Safeguarding Board's role to seek assurances of the above.

3.2 'VOICE' MAKING SAFEGUARDING PERSONAL (MSP) SUB-GROUP

The purpose of 'Voice' Making Safeguarding Personal (MSP) Sub-group aims:

- To act on behalf of the three Safeguarding Adult Boards to ensure a robust, transparent and consistent approach to MSP
- To monitor the delivery of its statutory duties in relation to embedding person centred approaches through Making Safeguarding Personal (MSP)
- Improve the use across the partnership of qualitative information on people's experience of the safeguarding system
- Ensure MSP is meaningfully implemented and embedded in practice by all partners, and that its effectiveness is measured to give confidence

The function and key objectives of Voice' Making Safeguarding Personal (MSP) Sub-group are:

- To ensure an effective mechanism is in place to capture the 'voice' of the adult in line with requirements of The Care Act 2014.
- To provide oversight and direction to Partners to ensure person centred approaches to safeguarding are embedded within practice.
- To ensure 'engagement' at the ground level is included in strategic decision-making processes when reviewing partner systems, policies, processes and to identify training needs.

The Blackburn with Darwen, Blackpool and Lancashire SABs, can play a role in embedding the 'Making Safeguarding Personal' approach across agencies by establishing and developing:

- A broader participation strategy
- Accessible information to support participation of people in safeguarding support
- A focus on qualitative reporting on outcomes as well as quantitative measures
- Advocacy
- Person-centred approaches to working with risk
- Policies and procedures that are in line with a personalised safeguarding approach
- Strategies to enable practitioners to work in this way, by looking at the skills they need and the support they are getting to enable this shift in culture.

The 'Voice'/ MSP Sub-group will link to other SAB Sub-groups where they have an important role to play in matters such as:

- Sharing learning and development needs identified through the Voice/ MSP sub-group with the Performance, Quality Assurance and Learning and Development Sub-groups.
- Communicate with Partners and the Safeguarding Adult Review Sub-group and ensure publication of SARS on the SAB website(s) is promoted
- Sharing any communication and public interest matters on MSP related issues from SARS to ensure that partners are aware of any implications for their organisations.

3.3 MENTAL CAPACITY ACT (MCA)/DEPRIVATION OF LIBERTY (DOLS), LIBERTY PROTECTION SAFEGUARDS (LPS) SUB-GROUP

The group will advise the Safeguarding Adult Boards on processes, procedures, and outcomes in relation to the implementation of the Mental Capacity Act (MCA) 2005 and Deprivation of Liberty Safeguards (DoLS) 2009, including progress of how the Act is embedded in practice across the multiagency/ multicultural partnerships. The Mental Capacity (Amendment) Act 2019 introduced the Liberty Protection Safeguards (LPS) and will replace the current DoLS in April 2022. The LPS will deliver improved outcomes for people who are deprived of their liberty.

The purpose of the MCA/DoLS/LPS sub-group aims:

- To develop and lead on a multi-agency implementation work plan against the recommendations outlined from the House of Lords 2014 report into the implementation of MCA and MCA/DoLS/LPS and the Supreme Court Ruling 2014 as well as the MCA (Amendment) Act 2019 and ongoing case law developments.
- To act on behalf of the three Safeguarding Adult Boards to ensure a robust, transparent and consistent approach to MCA/DoLS/LPS.
- To monitor the delivery of its statutory duties with regard to carrying out MCA/DoLS/LPS.
- Improve collaborative work across the partnership to provide a consistent approach to support MCA/DoLS/LPS.
- Ensure approaches to MCA/DoLS/LPS are meaningfully implemented and embedded in practice by all partners, and that its effectiveness is measured to give confidence.

- Adopt a shared learning approach identifying good practice and relevant quality standards in MCA/DoLS/LPS and be instrumental in supporting and developing best practice across the Safeguarding Adult Boards.
- Identify potential barriers to best practice or areas of risk regarding implementation for MCA/DoLS/LPS, with a view to identifying strategies to address them and standardise where possible.
- Develop systems to ensure best practice information is available for service users, families/carers, and the public about MCA/DoLS/LPS and promote the rights of individuals who may lack capacity to consent, incorporating service user views into practice development initiatives where appropriate.
- Practice development initiatives based on identified themes and trends within agencies and learning from reviews to be shared through the Safeguarding Adult Boards and appropriate sub-groups for relevant action.

The functions and key objectives of the MCA/DoLS/LPS Sub-group are:

- To ensure an effective mechanism is in place to tackle the complexities associated with safeguarding adults in line with the 'prevention' principle of the Care Act 2014.
- To develop a mechanism to support those individuals that do not meet the thresholds of statutory criteria to access support from statutory services.
- To provide oversight and direction to Partners to ensure appropriate approaches to MCA/DoLS/LPS are embedded within practice and partner systems, policies, processes and identified training needs.

The MCA/DoLS/LPS Sub-group will link to other SAB Sub-groups where they have an important role to play in matters such as:

- Sharing learning and development needs identified through the MCA/DoLS/LPS sub-group with the Performance, Assurance & Impact, and Learning and Development Sub-groups.
- Sharing any communication and public interest matters on complex issues from SARs to ensure that partners are aware of any implications for their organisations.
- There will be links to Community Safety Partnerships, Health and Wellbeing boards, Local Criminal Justice Boards (LCJB), Violence Reduction Network (VRN) and Pan-Lancashire anti-slavery partnership (PLASP) to ensure consistency, eliminate duplication and to capture the governance arrangements, to ensure clarity of responsibilities and the Safeguarding Board's role to seek assurances of the above.
- Where appropriate, the Sub-Group will also make links with other local authority areas, such as South Cumbria, where partner agencies work across geographical boundaries.

3.4 LEARNING AND DEVELOPMENT SUB-GROUP

The purpose of the learning and development sub-group aims:

- To act on behalf of the three Safeguarding Adult Boards to ensure a robust and consistent approach to learning and development in stakeholder agencies.
- To monitor the delivery of the training programme.
- Ensure safeguarding messages are implemented and embedded in practice by all partners, and that its effectiveness is measured to give confidence.

The functions and key objectives of the learning and development Sub-group are:

- To facilitate an integrated approach to safeguarding learning and development across Blackburn with Darwen, Blackpool and Lancashire.
- To ensure 'engagement' at the ground level is included in strategic decision-making processes when reviewing partner systems, policies, processes and to identify training needs.
- Develop an annual safeguarding adult workforce development plan alongside an operational plan in line with the Boards priorities.
- Development of multi-agency training resources
- Quality assure and approve any learning being delivered. The Sub-group may establish task and finish group with co-opted members from partner organisations to undertake specific activities such as quality assurance of current training material and newly commissioned courses.
- Drive forward the recommendations of safeguarding adult reviews, domestic homicide reviews and learning reviews across the partnership and seek assurance that learning is embedded within practice

The learning and development sub-group will link to other SAB Sub-groups where they have an important role to play in matters such as:

- Sharing learning and development needs identified through the sub-group with the Performance, Quality Assurance and MSP Sub-groups.
- Communicate with Partners and the Safeguarding Adult Review Sub-group and ensure publication of SARS on the SAB website(s) is promoted
- Sharing any communication and public interest matters on safeguarding related issues from SARS to ensure that partners are aware of any implications for their organisations

During this reporting period and the ongoing challenges due to the Covid-19 pandemic, the main priority has been to ensure all training was accessible to both the adults and children's workforce, with the majority of training sessions made available in a virtual format using platforms such as Microsoft teams, as a new way of working. Many work streams were placed on hold or transferred to virtual meetings due to the restrictions, which has resulted in exploring different ways of working. All learning and development is currently held on the Inspire Learning Management System (LMS) which has continued to be procured whilst new systems are explored, there is a hope that we are able to find a system that is able to meet the wider demand as the business unit expands its remit across the wider area and offers more automated functions for a more streamlined process.

All training courses are now aligned to the core programme and priorities of the Children's Safeguarding Assurance Partnership and the Safeguarding Adult Boards. Courses included, Child Neglect, Multi agency approaches to the impact of Domestic Abuse focusing from an Adult and Child perspective. Hope4Justice support the delivery of Modern-day slavery and Human trafficking awareness sessions. A new session is planned around managing disclosures and have hosted the Violence reduction unit (VRN) with their Trauma informed practitioner sessions. Training has continued to be delivered by a mix of external trainers and the multi-agency practitioner training pool. Focusing on the key adult priorities, a new course titled 'a multi-agency approach to Domestic Abuse on adults' has been co-developed and co-delivered by a wider group of professionals from across the three areas of Blackburn with Darwen, Blackpool and Lancashire. A training session on the impact of Domestic abuse on older people was commissioned and well received.

Learning and Development Priorities:

- **Improvement and maintenance** of the present training availability through the safeguarding partnerships
- **Respond to and adapt to new opportunities** for Learning and Development for an all-age workforce and throughout the transition to new CSAP arrangements
- **Platforms and delivery methods** reactive to meet changing expectations, whether its face to face, virtual or a hybrid model. Look at talking heads, animations and extended 7MB offer
- **Transition to a new system** upgrade for delivery of an e-learning and learning management system
- **Continue to respond to identified need** from Children's Safeguarding Practice Reviews (CSPRs), Safeguarding Adult Reviews (SARs) and national and local agendas to deliver evidence based, responsive, effective and cost-efficient learning and development opportunities to Lancashire safeguarding practitioners.

3.5 PERFORMANCE, ASSURANCE AND IMPACT SUB-GROUP

The purpose of Performance, Assurance and Impact sub-group aims:

- To act on behalf of the three Safeguarding Adult Boards to ensure a robust, transparent and consistent approach to multi-agency Performance, Assurance and measuring Impact.
- To seek assurance from multi-agency partners with services for adults with care and support needs across Lancashire are safe, continually improving and aspiring to be of high quality.
- To challenge agencies regarding the impact of their safeguarding activity and establish how the safeguarding partnership can be assured that it is making a difference.
- To seek assurance that agencies have sufficient performance information and appropriate analysis available to evidence their safeguarding activity.

The function and key objectives of Performance, Assurance and Impact Sub-group are to oversee activities in respect of Performance, Assurance and Impact, including:

- To develop, implement and deliver a programme of multi-agency audit activity, to be based on board priorities.
- To seek assurance regarding actions and learning from Safeguarding Adults Reviews.
- To have oversight of themes and learning arising from single agency audit activity and to challenge any quality issues that may emerge.
- Agencies to complete an annual compliance audit, providing assurance to the sub-group that they are compliant with minimum safeguarding standards as specified in the Care Act. Returns to be analysed with challenge as appropriate.
- To provide a multi-agency forum where safeguarding quality assurance issues can be discussed, resolved and shared.
- Provision of regular, timely, meaningful performance data with single agency analysis to accompany the quantitative information.

The Performance, Assurance and Impact Sub-group will link to other SAB Sub-groups where there are cross-cutting themes, including matters such as:

- Sharing learning identified through audit activity with the Learning and Development Sub-groups.

- Communicating with the SAR sub-group regarding completion of SAR action plans and measuring the impact of review activity.
- Working alongside the 'Voice' sub-group to ensure that the views of service users and incorporated in quality assurance activity
- The Performance, Assurance and Impact Sub-group may be required to liaise with the CSAP Scrutiny function on some key theme areas.

The Performance, Assurance and Impact Sub-Group reformed in September 2021, having not met during the height of the Covid-19 pandemic. The group now meets quarterly (currently via MS Teams) and is attended by statutory partners from across the 3 Local Authority areas of Lancashire.

The primary purpose of the group is to ensure a robust and consistent approach to measuring multi-agency performance, assurance and impact from across the various layers of the partnership.

The group will do this implementing a new approach; the 4 Pillars model of assurance. The 4 Pillars model has been developed by the Joint Partnership Business Unit across the Children's Safeguarding Assurance Partnership and the Safeguarding Adult Boards and aims to:

- Ensure consistent focus on performance and assurance in respect of multi-agency safeguarding
- Consider how agencies work together in respect of safeguarding at a strategic level
- Promote a greater awareness and consideration of risk
- Gain assurance in respect of the Safeguarding Adult Review process
- Measure impact by listening to and engaging with practitioners, service users and their families

The group will oversee strategic annual activity to gain assurance that agencies are working together to fulfil their safeguarding responsibilities, this information will be a useful tool to reflect upon in future Annual Reports. Assurance activity of a qualitative and quantitative nature will be established in respect of the Board priorities and mechanisms will be put in place to better mitigate risks.

Furthermore, reflective assurance activity will take place within the Joint Business Partnership Unit, which will see a closer focus paid to our Safeguarding Adult Review processes; seeking to establish the impact of the case reviews undertaken and to satisfy the Board that the right reviews are being undertaken and that learning is being effectively disseminated.

Aspirationally, we hope to better listen to the voice of service users and their families to establish what impact they feel the Boards and key agencies have had on their safeguarding experience.

3.6 SAFEGUARDING ADULTS REVIEW (SAR) STRATEGIC SUB-GROUP

The Safeguarding Adults Review (SAR) Strategic Sub-group is one of the structures through which the three Safeguarding Adult Boards across Blackburn with Darwen, Blackpool and Lancashire will deliver their vision.

Section 44 - Care Act 2014 requires a Safeguarding Adult Board to carry out a Safeguarding Adult Review in the circumstances described. Statutory Guidance (section 14.133 onwards) sets this out in more detail. More specific supporting information on SARs can be found in the Pan-Lancashire Multiagency Safeguarding Policy and Procedures and the individual Safeguarding Adult Board's own protocol and process documents.

The purpose of SAR Strategic sub-group aims:

- To act on behalf of the three Safeguarding Adult Boards to ensure a robust, transparent and consistent approach to the SAR process.
- To monitor the delivery of its statutory duties with regard to carrying out Safeguarding Adult Reviews (SARs)
- To ensure regular audits of selected cases are undertaken including, where necessary, safeguarding adult reviews (SARs)
- To ensure that the lessons from reviews are widely disseminated and the learning to improve frontline practice is embedded across all member agencies.

The functions and key objectives of SAR Strategic Sub-group are:

- To ensure an effective SAR process is in place and in line with the Pan-Lancashire Multi-agency Safeguarding Policy and compliant with requirements of The Care Act 2014.
- To provide oversight, direction and ensure quality control mechanisms for the SAR process, including but not limited to referrals and timelines.

The functions of the 3 Safeguarding Adult Boards at local authority level include:

- Receive SAR referrals (via the Joint Partnership Business Unit)
- Hold local SAR case consideration meetings
- Make recommendations to the relevant SAB with regard to SAR referrals.
- Commission SAR reviewers, identify stakeholders/ partners to be involved in the SAR, agree the terms of reference and costs associated with each SAR.
- Receive updates on SAR progress and consider the final SAR report and recommendations before submitting this for sign off to the relevant SAB.
- Ensure that all SARDS are published on the website, submitted to the National SAR Library project and reported on in the annual report.
- Co-ordinate and update actions taken in relation to SAR learnings from all partners.

The SAR Strategic Sub-group will maintain a relationship and link to the other SAB Sub-groups where they have an important role to play in matters such as:

- Sharing learning and development needs identified through SARDS with the Performance, Assurance, Impact and Learning and Development Sub-groups.
- Communicate with Partners and the 'Voice' Sub-group and ensure publication of SARDS on the SAB website(s).
- Sharing any communication and public interest matters from SARs to ensure that partners are aware of any implications for their organisations.

Lancashire SAR Activity

Lancashire completed three Safeguarding Adult Reviews (SARs) during the reporting period:

Adult K - An 80year old adult was admitted to Hospital in a poor state of health, dehydrated, malnourished and there was evidence of self-neglect. The publication of this report was delayed due to an ongoing Coronial process.

Adult L – This involved an assault from a service user in rest home. Missed opportunities were identified to safeguard Adult L and place the perpetrator in a suitable placement. The publication of this report was delayed due to an ongoing Coronial process.

Adult M & alleged perpetrator – This case involved supported shared accommodation with two other men, one presented with mental ill health (Alleged perpetrator) who set fire to his own clothing. Adult M died due to smoke inhalation.

The recommendations from the SAR reports were being translated into actions at the time of writing this report.

The following SARs commenced during the reporting period and learning will be reported in next year's annual report.

Adult O - This case involved complex mental health needs, displayed self-neglect, and evident that agencies did not communicate.

Adult P - Displayed self-neglect, there was a delay in the referral being made and the body was found decomposed.

4. PARTNER ACTIVITY

Lancashire Constabulary

The Constabulary's role is to collaborate with partners to uphold the 6 principles of safeguarding. Our mission and purpose is "To keep people safe and feeling safe and when needed, we can be trusted to Consistently deliver a Competent and Compassionate service 24/7."

Key Achievements in 2020-22

- DA awareness during Covid-19 pandemic
- Specific operations aimed at preventing Adult abuse:
 - Op Provide, Op Jackal and Op Wolf. They are distinct operations but lots of overlaps as they are looking at diversion tactics and enforcement against those targeting vulnerable adults either through financial abuse (Wolf) or Home Invasion (Jackal) typically for drug abuse and County Lines bases. Op Provide proactively seeks to identify and interact with historic, and present high-risk victims of domestic abuse
- Increase the service level provisions to victims of domestic abuse to increase the effectiveness of DA responses, thereby maximising the likelihood of preventing future abuse.
- MARAC – ongoing commitment to improve our response to high-risk DA
- Trauma Informed Approach incorporated into Force Learning and Development
- Media campaigns through the LRF and pan-Lancashire multi-agency networks e.g. No Excuse for Abuse; Fraud and Vulnerable Adults with Action Fraud

Lancashire and South Cumbria Clinical Commissioning Groups (CCG)

Lancashire and South Cumbria CCGs have a statutory duty to ensure that arrangements are made to safeguard and promote the welfare of children, young people and adults to protect

them from abuse or the risk of abuse. The CCGs are required to take account of the principles within the Mental Capacity Act and to ensure that health providers from whom they commission services have comprehensive policies relating to the application of MCA (2005) and if appropriate MCA Deprivation of Liberty Safeguards (2009).

As commissioners of local health services CCGs are required to assure themselves that the organisations from which they commission have effective safeguarding arrangements in place; including independent providers and voluntary, community and faith sector, to ensure that all service users are protected from abuse and the risk of abuse.

The CCGs need to demonstrate that their Designated Lead Professionals for Adults, Children and Children in Care are embedded in the clinical decision-making of the organisation, with the authority to work within local health economies to influence local thinking, practice development and continuous safeguarding improvement.

Designated Lead Professionals for Safeguarding are experts within the field and strategic leaders. They are integral in all parts of the CCGs commissioning cycle, from procurement to quality assurance and in the delivery, development, and review of services to ensure that the views and wishes of adults and children are clearly sought and respected.

Key Achievements in 2020-21

- The 8 CCGs across the Lancashire and South Cumbria footprint were awarded the Health Service Journal award for NHS Safeguarding Initiative in recognition of the work undertaken to develop a new safeguarding model. The approach has allowed us to create a single voice for health partners in key issues and produced stronger governance arrangements.
- The Covid-19 response has been a high challenge for all of health and social care. The CCG's have focused on supporting and enabling a multi-agency response to many of the challenges this has created for our vulnerable population. This has including reviewing our system assurance models, adopting a more robust reactive safeguarding offer, and working closely with local authority partners on patient safety issues. Specifically support in to care homes and the wider regulated care market and support in outbreak management has been supported by CCG Safeguarding teams.
- Expertise for workforce has continued to be a focus for the CCGs, and with the recurring challenges seen in application of the Mental Capacity Act there has been extensive work to support this element of practice. This has included the development of MCA grab sheets and guidance for vaccinations as well as significant work in preparing for the introduction of the Liberty Protection Safeguards.
- As a wider health system, we have acknowledged that we continue to see the same themes and trends coming from Safeguarding Adult reviews. In response we have established an NHS Health Learning Forum which is focussed on new ways of embedding learning, adopting a positive risk management approach, and recognising the need to learn from positive practice as well as from incidents and reviews.

Lancashire County Council (LCC) – Adult Services

The Local Authority safeguarding responsibilities and functions are defined within the Care Act 2014 which states Adults have the right to live life free from harm and abuse and with dignity and respect. It is important that all agencies who work with adults who may be at risk from abuse are involved in the prevention of abuse.

The local authority retains the responsibility for overseeing a safeguarding enquiry and ensuring that any investigation satisfies its duty under Section 42 to decide what action (if any) is necessary to help and protect the adult, and to ensure that such action is taken when necessary. The Care Act 2014 has introduced the requirement to record additional categories of abuse such as Female Genital Mutilation, Modern Slavery, Self-neglect, so called Honour Based Violence and Domestic Abuse. It should be noted that these categories may be seen within other categories of abuse. The Care Act 2014 sets out a clear legal framework for how local authorities and other parts of the system should protect adults at risk of abuse or neglect.

Some of LCC's Key Achievements include:

During 2021 the unprecedented circumstance of the Covid-19 pandemic required the council to prioritise our response so that those at risk of harm and abuse continue to be protected.

The achievements realised during this period include:

- A whole system safeguarding redesign project resulted in a comprehensive proposal for a new model to providing a 'One Service' safeguarding approach removing functional and geographical barriers to improve service delivery. Key principles of the model are detailed below. It was necessary to pause work on the Safeguarding Redesign in 2019/2020 with a re-start commencing in September 2021 and will be fully operational by April 2022.
 - ✓ The volume of referrals will be reduced and the quality of referral will increase as only concerns that are appropriate are routed into the service
 - ✓ Changes in demand can be responded to flexibly through the virtual triage function, with minimal adjustments in the workforce across the service.
 - ✓ Providers take a greater role in safeguarding persons within their care
 - ✓ Social workers will have greater capacity and ability to make decisions and intervene on the most appropriate course of action to support persons with care and support needs.
 - ✓ The role of Safeguarding will be to have lead oversight, provide guidance and support to promote good Safeguarding practice, intervene as appropriate providing proportionate responses agreed with the vulnerable adult and underpinned by making safeguarding personal principles
- Developed a comprehensive and multi-agency procedures and practice to respond to provider failure/multiple provider failure
- All staff were enabled to work from home during lockdowns and government measures so that footfall in to care homes and individual's own homes reduced transmission rates
- Enhanced levels of support were provided to regulated services in Lancashire this included:
 - Sourcing and provision of PPE
 - Supporting residents, Service Users and staff with testing and vaccination. Furthermore, LCC mandated testing for the Council's social care employees to help prevent transmission of the virus to vulnerable adults in care homes and community settings
 - Established provider webinars weekly to support domiciliary, supported living and residential providers
 - We distributed financial grants to support providers with infection prevention and control regimes

- We established the Lancashire Temporary Staffing Agency to support providers struggling with maintaining their staff rotas
- We commissioned "My Home Life" to provide trauma /bereavement support to residential care providers who had been significantly affected by loss of life due to Covid-19
- A capacity tracker was developed to enable the council and its partners to direct its support where the risks were greatest and needed most
- During the pandemic safeguarding alerts in respect of domestic abuse increased and the safeguarding service directed increased resources to ensure that risk was mitigated
- From late 2019 and throughout 2020 Care homes in Lancashire who were experiencing the most extreme difficulties arising from COVID-19 were supported 7 days a week, sometimes with twice daily meetings, using a multi-disciplinary approach with health and social care professionals coming together to support Providers. This included infection prevention and control advice and practical assistance to respond to their challenging often changing needs and circumstances This also included supplying staff from the Lancashire Temporary Staffing Agency to cover gaps in Care home rotas so that the needs of residents continued to be met.

Case Study

A Safeguarding alert was raised by son with concerns for the safety of his mother due to allegations of Domestic Abuse by his Father. The son's mother and Father live together and are both frail and elderly.

The son's father had recently been diagnosed with dementia and his mother was really struggling with this. Furthermore, his father's driving license had been revoked and this, along with Covid-19 restrictions, meant that he couldn't get out and about and the situation at home was becoming more intense.

Father was becoming increasingly agitated and shouting at Mother (records evidenced a history of this but was now escalating) and the Police had been called to the family home on a number of occasions.

The Safeguarding worker and colleague visited the couple and spoke to them separately. Both had Mental capacity to make decisions regarding their care and welfare. The Mother wanted to leave her husband but the family did not want this.

Multi agency working was co-ordinated by the safeguarding social worker including the following referrals and actions at a risk assessment and planning meeting:

- *Referral to Adult Social Care for urgent assessment for both parties and also asked for lifeline 'Tele care' to be fitted as Mother has no access to phone and she needed support with personal care. Crisis care commissioned to provide home support.*
- *Discussion with GP to share concerns and obtain clinical views/input*
- *Support secured for older adult intervention team*
- *Awareness raised with and support obtained from the Police*
- *Alzheimer's society contacted for support*
- *Risk Assessment and safeguarding plan implemented*

Outcome of the case – Mother is currently safe and living with sone. Sone is supporting her with a move to her own property. Father remains in the family home, supported by family and active workers.

Lancashire and South Cumbria Foundation Trust (LSCFT)

LSCFT provide health and wellbeing services across Lancashire and South Cumbria including:

- Secondary mental health services
- Perinatal mental health services
- Forensic services including low and medium secure care
- Inpatient child and adolescent mental health services
- Physical health and wellbeing services

The Trust employs approximately 7,000 members of staff who are based at more than 400 sites.

Our strategic approach to safeguarding is linked to our agreed Safeguarding Vision. This links to the Trust Safeguarding Policies and Procedures. LSCFT takes a Think Family approach to safeguarding practice. Our Safeguarding Vision takes account of the updated priorities and business plans of the Safeguarding Boards and Partnerships, our commissioned safeguarding specifications and updated safeguarding multi-agency systems and processes across the County. Our Safeguarding Vision aims to ensure our services protect and prevent harm, abuse or neglect for service users and their families.

Our Trust Safeguarding Vision aligns the national and key local priorities to improve safeguarding outcomes in LSCFT. It provides a framework to base measurements and assurances of safeguarding practice and describes our plans to have robust safeguarding arrangements across the Organisation that are integrated into the delivery of our Strategic Plan, Trust priorities and our Quality plans. This vision aims to embed safeguarding at the heart of everything we do; ensure that the Trust, via the Safeguarding Team, has effective safeguarding structures and accountability; ensure we promote learning through experience; develop competence, knowledge and a skill base in safeguarding and Mental Capacity Act (MCA) across the Trust; and engage with the service users and patients in strengthening participation in line with Making Safeguarding Personal.

The Safeguarding team has led the implementation of the priorities within the Trust Safeguarding Vision and through analysis of the impact of delivery of the six core priority areas, triangulating this with dissemination of learning from SARs and DHRs.

Delivery of our priorities is monitored and reviewed via the Safeguarding Team portfolio groups which include: Training, MCA/LPS, Prevent, Looked After Children, Domestic Abuse, Self-Neglect, Learning Lessons, Safeguarding Risks Outside the Home (Contextual Safeguarding), Hidden Harm within the Home, Violence Reduction and Health Partnership System Improvement and Reform.

Key Achievements in 2020–2021

- We have strengthened safeguarding practice & systems to sustain compliance with revised statutory Safeguarding, MCA and Prevent Guidance and responsibilities.
- Significant activity has taken place to strengthen collaboration within Local Authority MASH and Safeguarding Enquiry services inclusive of Mental health within Lancashire

seeing an increase in contribution within MASH/ Safeguarding Enquiry Service (SES) screening processes information sharing and ensuring appropriate clinical contribution in Section 42 referrals. We have reviewed the role of the health practitioner in adult MASH, ensuring timely information is available for the LA in relation to Section 42 enquiries.

- We have carried out significant activity to raise awareness of the Domestic Abuse agenda by developing a Domestic Abuse and Think Family webinars, connecting safeguarding adults with the safeguarding children agenda. The webinars have ensured that key safeguarding messages have continued to be shared across the organisation within the restraints of the pandemic.
- We have also developed training in relation to:
 - Domestic Abuse
 - HBA/Forced marriage and FGM,
 - DASH (Domestic Abuse, Stalking and Honour Based Violence) Assessments
 - MARAC
 - Raise awareness about the role of the IDVA (Independent Domestic Violence Advocate)
 - Domestic abuse in the context of young people perpetrated within Family contexts.
 - A focus on perpetrators.
- We have continued to engage with multi agency partners to co deliver training, ensure a co-ordinated approach to domestic abuse and actively strengthened internal processes for MARAC. We continue to actively support the MARAC redesign across Lancashire.
- We raised the profile of contextual safeguarding, trauma-informed care and Think Family. We have worked with our adult facing services to further embed Think Family and contextual safeguarding into practice.
- A webinar was developed with the Lancashire PREVENT team and this has been rolled out to staff across LSCFT and the wider health economy.
- We are working with UCLAN to conduct a piece of research into LSCFT's staff's perception of the current PREVENT/Channel training. It is hoped that the research findings will enable us to develop more appropriate training for frontline staff.

Case study

Email received from GP concerned about a patient who had not been seen for over 1 month and could not make contact with. This patient has a known history of domestic abuse and discussed several times at the MARAC. It was known her partner was very controlling, would check her phone and prevent access to health/other services.

There had been a period of engagement following MARAC where agreement for a multi-agency response was required to keep the patient safe and opened to adult social care. The patient has a significant mental health history compounded by substance misuse although during the period of engagement she made good progress with regards to this. Unfortunately, after leaving supported accommodation she "disappeared" from services.

Specialist Safeguarding Practitioner (SSP) contacted adult MASH who confirmed that the patient was closed to social care due to non-engagement with social worker and on reviewing health records, she had been referred and discharged by various mental health services for the same reason. Discussed with MASH practitioner a new referral given concerns about the level of high-risk domestic abuse and not accessing any support. It was agreed a referral would be accepted and escalated without consent.

Contacted CMHT and discussed the risks and agreed to accept an urgent referral from the GP which could be rung through directly to team leader for allocation.

Team leader provided assurance that the engagement policy would be followed and all attempts to make contact made including unannounced home visit which if unsuccessful would trigger for a police welfare check.

Subsequent follow up with the team leader confirmed that the team had successfully made contact with the patient who is now accessing and engaging with support from the CMHT at present.

The service user was also contacted by adult social care for additional support.

Blackpool Teaching Hospitals (BTH)

BTH is dedicated to identifying and safeguarding adults at risk. Safeguarding advice and support is provided across the Trust by an in-house safeguarding adults team comprising of nurses, social workers, Independent Domestic Violence Advisors (IDVA) and Independent Sexual Violence Advisors (ISVA).

BTH is responsible for identifying safeguarding concerns in relation to adults at risk, raising appropriate safeguarding referrals and contributing and implementing appropriate safeguarding plans. A dedicated Violence Against Women Team is in place, supporting both staff and patients experiencing Domestic and Sexual Abuse.

BTH Adult Safeguarding Team provide advice and support in relation to all areas of safeguarding adults and Mental Capacity Act. The Team are committed to supporting the embedding of MCA and DoLS into practice across the organisation. The Team provides quality assurance of capacity assessments, DoLS applications and DoLS care plans within the Trust. To ensure capacity and restrictions remain necessary and proportionate, the team completes a review of each DoLS patient every 7 days. Support is also offered and provided at complex Best Interest Meetings across the Trust.

BTH support and complete Section 42 safeguarding enquiries and offer health input to professional or strategy meetings. BTH Safeguarding Adult Team oversees all Section 42 safeguarding investigations involving the Trust and ensures appropriate action is taken in response to substantiated safeguarding concerns.

BTH Safeguarding Adults Team provides Levels 1-3 Safeguarding Training in line with the Intercollegiate Document (2018) which incorporates MCA/DoLS and Prevent.

BTH is an active member of the Blackpool and Lancashire Safeguarding Adult Boards and participates in a number of pan-Lancashire SAB sub-groups.

Key Achievements in 2020/21

- BTH has implemented Emergency Department (ED) Navigators to review patients attending due to violence, in support of the Violence Reduction Unit's (VRU) work across Lancashire. ED Navigators are trained exploitation and health staff who may engage with anyone, but are particularly interested in people aged 10-39 years old who attend hospital with violence related presentations and injuries to listen, support, and signpost to relevant

services. BTH are now supporting to embed ED Navigators in Hospitals across Lancashire.

- BTH implemented Operation Provide at the beginning of the Covid-19 pandemic. This was in response to the national lockdown which reduced opportunities for victims of Domestic Abuse and Violence to attend health settings and also impacted on face-to-face support offered by other agencies. BTH therefore joined forces with Lancashire Police providing health staff to attend with police to provide an immediate safeguarding response to victims of domestic abuse. Operation Provide has now seen over 1,000 victims and with the team providing support at Blackpool, Lancaster and Morecambe.
- Adult Level 3 Training compliance increased by 62%, which is above the trajectory of the Trusts Training Recover Plan.

Case Study

Patient attended the department the day after the assault. He attended due to increased swelling and pain to his face and head. He stated to staff he had not reported the incident to police and didn't wish to.

- *Contact made with patient by telephone to offer support. Discussion with patient about his attendance at ED. Patient denies any concerns with drug debts, stated he was out and was jumped but didn't know who they were. Patient denied any concerns but was advised he can contact ED Navigator should he need support.*
- *Patient contacted ED Navigator the next day advising that he wanted to speak about the support offered. Patient advised it was regarding a cannabis debt and he owed £200 by tomorrow to the same people. Patient advised he has tried to get a job to pay it off but has been unsuccessful.*
- *ED Navigator provided regular support to the patient to offer:*
 - *Emotional support.*
 - *Help with his CV to make it more custom to the jobs he was wanting to apply to – Construction.*
 - *Assisted in looking for flats available to rent locally.*
 - *Referral accepted for Drugs counselling service.*
 - *Referral accepted for Divert to support with accommodation, employment and training.*
 - *Supported to contact a friend who has a local boxing gym to start attending boxing sessions.*
- *Patient has now been successful in obtaining a full-time job with a local building company which is going well.*
- *Patient has not used cannabis for several weeks; he is back training at the gym and looking to enter boxing competitions.*
- *Patient was viewing a flat in a nearby town to rent himself.*

Lancashire Teaching Hospitals NHS Foundation Trust (LTHTR)

Lancashire Teaching Hospitals is an acute trust providing services to an estimated 390,000 people in the Preston and Chorley areas and a range of specialist regional and tertiary services including Neurology and Neurosurgery, Cancer, Renal, Vascular and Major Trauma.

The Trust integrated Safeguarding Team comprises of adult and child safeguarding, Mental Health, Learning Disability, Autism and Dementia and includes nurses and social workers who support patients with additional vulnerabilities covering all aspects of the Care Act (2014) and

Mental Capacity Act (2005). The team ensure recognition, timely response and supportive decision making around care and treatment.

Our responsibility to work in a multi-agency supportive model ensures seamless and continued care delivery and supports transition and longer-term planning on discharge. Core functions of the team include responsibility for the management of S42 allegations against the Trust, participation in MARAC, support for complex case management in relation to MCA legislation, representation at SAR and DHR's and management of PiPoT for the organisation.

The organisation has the relevant governance structure in place to seek assurance that safeguarding functions are robust and effective. This includes a monthly Trust Safeguarding Board in which representatives from the CCG attend.

Key Achievements in 2020/21

- Improved compliance with MCA/DoLS and preparation for the implementation of Liberty Protection Safeguards.
- Risk maturity in relation to MASH Pilot Section 42 incident management processes ensuring a more timely response to incidents.
- Sustained period of Trust wide compliance across all levels of Adult Safeguarding/MCA/DoLS and Prevent training.
- Additional roles generated within the Safeguarding Team including Health Independent Sexual Violence Advocate and Emergency Department Violence Reduction Navigator to support victims of violence and violent crimes across Lancashire.
- Additional training for ward managers to improve quality of report writing for S42's
- Ensured statutory safeguarding functions continued during the COVID-19 pandemic.

Case Study

Patient with known Muscular Dystrophy attended hospital with extensive bruising to face, neck, forearm and legs- reported to appear to be of different ages. Patient stated that these were a result of the COVID-19 vaccinations however doctors stated that there is no evidence or research to corroborate this view. Investigations were undertaken and no clinical reasoning was found for the cause of the bruising. Doctors were concerned that they were non-accidental injuries as patient was bed bound with no history of a fall/injury.

The police and Lancashire County Council adult safeguarding had previously visited the patient to discuss the nature of the bruising and were not able to progress as the patient was denying any physical abuse was taking place. In light of the evidence available and concern from doctors, the LTHTR safeguarding team made contact with LCC to challenge their assessment that NFA would be taken and requested an urgent risk assessment and planning meeting (LCC safeguarding meeting). The meeting involved ward management and doctors, care agency, LTHTR and LCC safeguarding teams. The meeting revealed other risk factors such as patient's partner's grandson (witnessed to exhibit aggressive behaviours although not to patient) visiting the property. It also revealed detailed previous safeguarding referrals and actions from a domestic abuse perspective. An action was set for the police to revisit the patient based on new information and for LCC safeguarding to further visit the patient. LTHTR requested that LCC refer for an advocate as NOK was the alleged perpetrator and that SALT assess his communication needs due to concerns around mental capacity. All agreed that patient would require place of safety to pursue a safeguarding investigation.

A further 2 RAP meetings took place. The police revisited based on new information however were unable to progress with an investigation due to insufficient evidence of a crime. In the third RAP meeting, LTHTR safeguarding team challenged on the direction of the case as police had closed the file. LTHTR safeguarding team impressed the need to be clear on the

reasons for discharging to a place of safety following closure by police. LTHTR safeguarding team supported the ward manager in assessing capacity re safeguarding concerns and decision on discharge accommodation. The outcome was that the patient lacked capacity and a recommendation was made for the ward to hold a best interest meeting involving the safeguarding team and IMCA. Outcome of the BI meeting was for patient to go into short term nursing placement allowing time for further safeguarding investigation and to meet nursing needs.

Southport and Ormskirk NHS Trust

Southport and Ormskirk NHS Trust safeguarding team is responsible for ensuring that robust and effective systems are in place to support the Trust in working effectively to safeguard adults who are at risk of abuse or neglect.

The safeguarding team is a multi-functional team providing both operational and corporate responsibilities across the hospital sites, with the adult's team based at Southport. The team work closely with both Sefton Council and Lancashire County Council and support the work of the Local Safeguarding Boards for Merseyside and Lancashire.

Key Achievements in 2020–2021

- Development of a Memorandum of Understanding (MoU) with Sefton Local Authority in relation to safeguarding concerns raised against the Trust
- Development and delivery of Safeguarding Ambassadors enhanced training
- 26.5% increase in DoLS applications
- Development of an MCA and DoLS Portal
- Safeguarding ambassadors – launched in January 2022 across the trust to support the sharing of information and dissemination of training/lessons learned

Case Study

Situation

An adult male presented at AED from the West Midlands area. He had travelled to Southport via taxi stating he was fleeing domestic abuse citing his parents as perpetrators. He had Asperger's and severe OCD and was a very vulnerable young man.

Following several phone calls to services in the West Midlands including the police and his social worker, a different picture emerged of a family in crisis, in which he was cited as the perpetrator of abuse against his parents.

He was finding the current Covid-19 restrictions extremely difficult which exacerbated his anxiety and OCD. As a result of the Covid-19 restrictions in place in West Midlands he had been left without an accurate assessment of his needs, both from a mental health and social care perspective. He had previously been sectioned under the Mental Health Act and was subject to Section 117 for after care.

Safeguarding input

The safeguarding team were alerted to this patient when he was refusing to return to the West Midlands, and initial plans to discharge him would have rendered him homeless and vulnerable in an unfamiliar location. The Safeguarding team were instrumental in ensuring multi-agency working between the two Local Authorities and Mental Health services.

The Safeguarding team also challenged and escalated accordingly as discharge plans were being made. The safeguarding team arranged strategy meetings, supported the ward to

manage his challenging behaviour, and accompanied him off the ward for walks during the day. The safeguarding team provided lines of communication between the patient, his family and agencies involved in supporting him.

Despite his Asperger's and OCD, a 2-stage capacity assessment determined that he had capacity to decide his own discharge destination, but it was recognised by the safeguarding team that he did not have the executive function to maintain his own safety, and to meet his basic care needs in the community. To further support the patient, the safeguarding team facilitated an escorted visit to a supported living establishment, in the Sefton area.

Due to an exacerbation of his OCD and inability to tolerate the stresses invoked by an in-patient stay the patient absconded on two occasions. As a result, the safeguarding team were instrumental in devising and sharing a management plan, to ensure that the patient would be supported appropriately should he return to either locality. This plan was agreed between the two Local Authorities and his local health care provider. Throughout his month long stay the safeguarding team were always on hand, even providing support out of hours to ensure that staff were able to meet his needs.

Outcome / Result

The patient was safely transferred to his local AED where he was met by his Mental health social worker to arrange appropriate accommodation and support.

MerseyCare NHS Foundation Trust

Mersey Care provides both physical health and mental health services across the North West. We offer specialist inpatient and community services that support physical and mental health and specialist inpatient mental health, learning disability, addiction, and brain injury services as well as high secure mental health facilities. Safeguarding Adults is a key feature in all the business of the Trust. All staff, Service Users, Patients, Volunteers have responsibilities to ensure we discharge our safeguarding duties effectively. The Trust has a dedicated Safeguarding Adult service who support staff and guide them through safeguarding processes. We provide specialist training in adult safeguarding which is compliant with national guidance (Intercollegiate Doc) and bespoke targeted training for our more specialist services. We quality assure all aspect of safeguarding practice to drive up standards of care and to ensure a safe delivery of services. We are fully committed to support the work of the Safeguarding Adult Boards across our footprint and are engaged with the multi-agency partnership in the undertaking of Safeguarding Adult Reviews.

Key Achievements in 2020-21

In 2020/21 the Trust maintained full-service delivery of safeguarding support during the year of the Covid-19 pandemic. This year saw significant change in how the safeguarding team functioned in the move to agile working and re-prioritisation of activity to ensure our most vulnerable service users were supported. Working with partners and commissioners we closely monitored our activity to understand emerging themes/trends. As such we increased our training and contact with services to uplift our offer on training in domestic awareness and neglect of adults at risk.

In November 2020 our Medium Secure Unit at Whalley closed and the 56 service users transferred to a new build, Rowan View, situated on our Maghull Health Park site.

NHS England and NHS Improvement (North West)

NHSE/I ensures the principles and duties of safeguarding are applied. NHSE has several policies in place to discharge its statutory requirement and appropriate accountability for safeguarding.

The National Safeguarding Steering Group (NASSG) leads the assurance of the NHS safeguarding system and offers strategic leadership across NHSE and the health economy. NHSE/I convenes regular safeguarding regional networks to ensure communication around learning from serious case reviews, safeguarding adult reviews and domestic homicide reviews.

During 2020/21 NHSE/I has supported the Lancashire and South Cumbria ICS and the safeguarding network to embed the transformational model of safeguarding. NHSE/I has continued to gain assurance of the safeguarding arrangements in place for CCGs and providers of health care as well contributing to the development of adult safeguarding during the reporting period. This has been undertaken in various forms such as sharing regional and national updates; monitoring serious incidents and lessons learned from these, providing monthly assurance updates to the regional safeguarding team; attendance at ICS meetings including the Safeguarding Health Executive; Safeguarding System Leaders Business Meeting; Designated Safeguarding Leads and Designated Professionals meetings.

North West Ambulance Service (NWAS)

The [NWAS Safeguarding Annual Report](#) provides an overview of safeguarding activity for NWAS during 2021-21 and assurance relating to the scoping, development and implementation of safeguarding related processes.

Safeguarding activity has fluctuated during 2020-21, this is largely attributed to the Covid-19 pandemic. A decrease in concerns raised was seen during April 2020, since then concerns have continued to steadily grow.

Key Achievements in 2020-21

- Child Protection Information Sharing (CP-IS) was implemented across the Clinical Hub in January 2021. This ensures that all of our most vulnerable children are flagged to Social Care if they have contact with the Clinical Hub.
- Licences to the virtual machine were granted for all of the Safeguarding Team which means the team have been able to access Redbox remotely. Redbox is the system used to record all telephone communications coming into and out of the Trust, and calls to the NWAS 111 service.
- It has been agreed that the safeguarding agenda for NWAS 111 will fall under the corporate safeguarding team, and funding has been made available for a 4th Safeguarding Practitioner who amongst other responsibilities will assist with the safeguarding agenda within NWAS 111. This post is expected to be recruited to in Q2 of 2021.
- The work of the Safeguarding Team has not been affected by the Covid-19 pandemic and a high level of work has continued whilst the team have worked from home.
- The Trust is committed to the safeguarding of adults with learning disabilities and are engaged with the LeDeR programme which makes all deaths involving adults with learning disabilities notifiable. The learning disabilities mortality review aims to make improvements to the lives of people with learning disabilities. The LeDeR programme was set up following a recommendation from the CIPOLD, funded by the Department of Health, to investigate the premature deaths of people with learning disabilities.

Lancashire Fire and Rescue Service (LFRS)

LFRS not only identifies potential safeguarding concerns whilst attending emergencies but also during the delivery of a wide range of community safety activities, such as our Home Fire Safety Check offer and youth engagement activities. Whilst our staff do not support service users and carers individually in a 'case-work' sense, they often work in a multi-agency setting where a co-ordinated approach is necessary e.g. self-neglect.

Key Achievements in 2020/21

- Continued to expand training and increase awareness of safeguarding across all LFRS groups
- Quality Assurance Checks completed on all referrals to identify relevant issues/trends and to inform/develop staff as appropriate.
- Enhanced strategic visibility via detailed performance reporting to continually drive awareness and enhance quality of referrals.
- Commissioned Lancashire County Council to undertake Safeguarding Audit. The Jan 21 report concluded, "We can provide an opinion of substantial assurance that the framework of control is adequately designed and effectively operated overall."

Case Study

LFRS was asked to visit a household following fire safety concerns raised by a PCSO about the 63-year-old single male occupier. Whilst the initial Home Fire Safety Check (Safe & Well Visit) lessened the immediate fire risk, the underlying issues were found to include alcohol use, self-neglect, hoarding and concerns over electrical safety. A safeguarding referral was therefore made by LFRS.

To ensure more sustained risk reduction, the case was then sent for direct allocation as a high priority.

A social worker was allocated, and a range of actions initiated through partnership working. The occupier agreed to have the hoarding level reduced, new furniture was sourced, the electrical issues resolved via housing teams and the PCSO visited regularly thereafter.

The occupier became better supported generally, including with clothes and food, and consented to a referral to an alcohol support agency

District Councils

There are 12 District Councils within the geographical footprint of Lancashire. Chorley and South Ribble Council represent the voice of the districts on the Board.

Chorley Council

As a provider of public services, Chorley Council fully accepts its legal and moral obligations to provide a duty of care and will take all reasonable steps to protect all vulnerable adults using Council services or working with the Council from harm, discrimination or degrading treatment and respect their rights, wishes and feelings.

The welfare of adults at risk is paramount and is always the primary concern of Chorley Council. Everyone has the right to protection from abuse whatever their age, culture, ability, gender, ethnicity, or sexuality.

The Council is committed to the following principles and actions:

- The Council will ensure that a protective safeguarding culture is in place and is actively promoted within the organisation and will work together with other agencies to safeguard adults at risk.
- The Council will implement procedures to safeguard adults at risk and take all reasonable steps to protect them from harm, discrimination and degrading treatment and to respect their rights, wishes and feelings.
- All representatives of Chorley Council who work with adults at risk will be recruited with regard to their suitability for that responsibility.
- All staff/volunteers will be required to adopt and abide by the Council's Code of Conduct and this policy and its procedures and will be provided with supervision, guidance and/or training in good practice.

Key Achievements in 2020–2021

- Developed new safeguarding training through a new learning platform for staff (The Learning Hub), and include in refresh of mandatory courses
- Supported vulnerable residents through the pandemic, and adapting processes to ensure safeguarding concerns continued to be addressed
- Started refresh of Safeguarding Policies and Processes across the council, to reflect changes from pandemic
- Move to a virtual setting for the Council Corporate Safeguarding Group to ensure reported incidents are scrutinised

Case Study

A family with a number of young children was flagged up by community groups administering food parcels. The issues were complex, but the adult parents were struggling with finances, and causing anti-social behaviour, and children were going without essential food and items, and were being left unsupervised. Through support across agencies including social landlord, housing team, Citizens Advice and Children's Services, the benefits were reviewed, and budgeting put in place. Support from the Food and Essentials fund supported white goods to be acquired, and risks to the children were reduced through regular contact with the family so that needs were being fully met.

South Ribble Borough Council

As a provider of public services, South Ribble Borough Council fully accepts its legal and moral obligations to provide a duty of care and will take all reasonable steps to protect all vulnerable adults using Council services or working with the Council from harm, discrimination or degrading treatment and respect their rights, wishes and feelings.

The welfare of persons at risk is paramount and is always the primary concern of South Ribble Borough Council. Everyone has the right to protection from abuse whatever their age, culture, ability, gender, ethnicity, or sexuality.

The Council is committed to the following principles and actions:

- Safeguarding is and will remain a priority for everyone across South Ribble Borough Council, strategically and operationally;
- Safeguarding is everyone's responsibility;
- The welfare of children, young people and adults is of paramount importance and will be our primary consideration at all times.

Key Achievements in 2020–2021

- Developed new safeguarding training through a new learning platform for staff (the learning Hub). Corporately we have amended our mandatory training, ensuring safeguarding and 'Prevent' are refreshed as a priority.
- Supported Vulnerable residents through the pandemic, and adapted processes to ensure safeguarding concerns continued to be addressed.
- Developed a Partnership Network during the pandemic to ensure easy access to services for vulnerable residents to support early intervention to reduce safeguarding concern/escalation
- Developed in-house online referral system for all safeguarding concerns with clearer guidance for staff and training developed for all stages of safeguarding concerns from early intervention and prevention right through to high-risk referrals.

Case Study

Our community hub referred an elderly gentleman into our SRIT Team for early intervention support. He was living alone with his dog, the rent on his property was too high for him to manage so he was not eating properly, using the little money he had left after his bills to provide food for his dog. He was also being withdrawn from social situations and was becoming isolated and overwhelmed, he was becoming teary when we interacted with him, he had little hope for the future but had mentioned a desire to do more his local community. SRBC community hub supported him with food and essentials for himself and his dog. CAB provided a benefit check and budgeting support. SRBC's housing options team identified help through their homeless prevention programme and initially sought help for him in the form of a discretionary housing payment to top up his rent and within a few weeks they had found him a more affordable property. ASC identified his care needs and provided him with a social worker who was able to link him in with some local volunteering and reduce his isolation. Mental Health Services referred him for support in the form of local community groups. Our SRIT Team checked in with him once all interventions were in place and he had moved, and he was so happy with the help he had received he felt like his life was very much improved and he was glad to be giving back to the community.

Probation Service (PS)

The Probation Service (PS) protects the public by working with service users to reduce reoffending and harm. It works jointly with other public and voluntary services to identify, assess and manage the risk in the community of service users who have the potential to do harm. The PS also has a remit to be involved with victims of serious sexual and other violent crimes. PS are also responsible for all Court assessments and pre-sentence reports as well as the management of all Approved Premises. In addition, we deliver Unpaid Work which allows people to make reparation to their communities and Accredited Programmes which support people to change their thinking and behaviour.

The PS shares information and works with other agencies such as Police, Local Authorities, Health Services and Third Sector organisations, including those led by people with lived experience of using services themselves. We are a statutory partner, along with Police and Prisons, in Multi Agency Public Protection Arrangements (MAPPA) whereby we have a clear framework to share information and plan how we work together manage risk from our most serious nominals.

Although the focus of the Probation Service is on those who cause harm, it is also in a position to identify service users who are themselves at risk from abuse and to take steps to reduce this. We also recognise the impact of previous trauma on the health, wellbeing and behaviour of people on probation and our staff are being trained in trauma informed approaches.

Our internal assessment process (OASys) also supports practitioners to identify needs and vulnerabilities to prompt relevant referrals.

Key Achievements in 2020–2021

- Strong partnership working during the Covid-19 pandemic enabled us to identify people requiring additional assistance and make appropriate referrals for support. Probation representation at Lancashire Resilience Forum sub-groups and work with the Local Authorities contributed to agencies being aware of the needs of people being released from custody during the national lockdown.
- Staff seconded to the Violence Reduction Unit and delivering multi agency training in trauma informed practice. This is being implemented across Lancashire.
- Following reunification all staff will have completed/ refreshed Adult Safeguarding training by December 2021
- Partnerships manager has briefed staff on Trauma informed practice, autism, MDT and Learning Disabilities.
- The regional Health and Justice group have promoted suicide awareness.

Her Majesty's Prison and Probation Service: Lancashire Prisons

Prison Service Instruction 16/2015 sets out HMPPS responsibilities for Adult Safeguarding in Prison. Lancashire Prisons all produce local safeguarding policies in line with this instruction. Adult safeguarding in prisons means keeping prisoners safe and protecting them from abuse and neglect. This is underpinned by six key principles of the Care Act.

Prison staff have a common law duty of care to prisoners that includes taking appropriate action to protect them. Prisons have a range of processes in place to ensure that this duty is met. These also ensure that prisoners who are unable to protect themselves as a result of care and support needs are provided with a level of protection that is equivalent to that provided in the community. Definitions of abuse and neglect are based on those used in the Care and Support Statutory Guidance issued by the Department of Health in October 2014.

There are 5 prisons within the Lancashire area with a total operational capacity of around 3,960 prisoners, as follows:

- HMP Preston, Reception and Resettlement - 750

- HMP Garth, Category B High Security Estate - 850
- HMP Wymott, Category C Training Prison - 1170
- HMP Lancaster farms, Resettlement Prison – 560
- HMP Kirkham, Open Prison – 630

Key Achievements in 2020/21

During this reporting period we experienced the Covid-19 pandemic and the whole Prison Service has been in emergency command mode throughout.

- Ensure that all prisoners and staff were protected from the Covid-19 virus, including maximising vaccination programme and testing regimes
- Organising prisoners into cohorts, in order to manage them separately, according to their vulnerability and other characteristics.
- Reduction in self-harm, violence and debt
- Safe purposeful and sufficient prison regimes, that balance the risks of safely managing a pandemic, with those of disorder
- Developed comprehensive communication strategies under a Gold (HQ), Silver (Regional) and Bronze (Prison establishment) command structure including:
 - Governor-led daily operational briefings.
 - Enhanced briefing opportunities in residential and office areas.
 - Staff, Prisoner and Visitor notices and bulletins
 - Maintenance of Prisoner Information Desk essential work
 - Functional mailboxes and safeguarding reporting lines, to facilitate public and family contact.
 - Prisoners allowed additional phone credit and opportunity to send photos to families at key time such as Christmas and Eid.
- Throughout the pandemic extra efforts have been made to enable prisoners to air their views, compliments and concerns. Where possible, this has been through face to face and group meetings, including the Prison Council, Wing-based community meetings, reintroduction of Diversity and Inclusion group meetings for those with protected characteristics.

Active Lancashire

Active Lancashire's responsibilities include

- Promote a consistent approach to safeguarding across the sport and physical activity sector in Lancashire for the benefit of sports & physical activity organisations, employees / volunteers,
- Provide advice and guidance on safeguarding to partner organisations
- Act as an advocate for good safeguarding practice, and promote the adoption of the guidance within this document, or similar, across the wider partnership
- Accept the moral and legal responsibility to implement procedures to provide a duty of care for adults, safeguard their wellbeing and protect them from abuse
- Respect and promote the rights, wishes and feelings of all adults
- Recruit, train and supervise its employees and volunteers to adopt best practice to safeguard and protect adults from abuse and themselves against allegations
- Require employees / volunteers to adopt and abide by the Safeguarding Policy and Good Practice Guidelines (at induction)
- Require employees / volunteers to adopt and abide by Active Lancashire Code of Conduct (at induction)

- Respond to allegations appropriately and implement the appropriate disciplinary and appeals procedures
- Ensure that its partnership, funding or commissioning criteria reference the requirement to address safeguarding within the relevant organisation(s)
- Monitor and evaluate the policy every three years, in response to any changes in the role of the Partnership or in relevant legislation or following a significant incident.

Key Achievements in 2020/21

- Development of Digital Safeguarding Policy
- Review of disciplinary procedures ensuring in line with safeguarding procedures and all staff updated
- Completing Ann Craft Trust Adult Safeguarding Audit based against new Framework from ACT
- New Adult Specific Safeguarding Action plan – this had previously been a joint action plan with children and Young People

Healthwatch Lancashire

Healthwatch Lancashire is the consumer champion for people who use health and social care services in Lancashire. We engage with the public and use their voice to share insight, challenge, and recommendations with strategic partners across the health and social care sector.

This includes:

- Engaging with people who have been through the safeguarding adults process
- Undertaking 'enter and views', an independent visit to services funded by health and social care, to gather people's experiences of using those services. Highlight good practice and make recommendations where improvements can be made.
- Holding a seat on Lancashire Safeguarding Adults Board and supporting with a number of the subgroups.

Key Achievements in 2020-21

Healthwatch Lancashire is incredibly proud of our continuity of service throughout 2020/21 when engaging with the public during the pandemic restrictions was challenging. We adapted and flexed to meet the needs of the public we serve to ensure they continued to have a voice in key strategic decisions including proposed changes to Accident and Emergency services.

Our Healthwatch Lancashire team also supported an urgent response project for people with learning disabilities and autistic people to support them to understand coronavirus restrictions, access health and social care services and other community support e.g. befriending and help to collect prescriptions.

Case Study

During the Covid-19 pandemic, Healthwatch Lancashire received a number of calls from a gentleman who was struggling to manage his mental health, he was feeling isolated, depressed, and anxious and could not see the end of this. He contacted Healthwatch Lancashire and shared how he was feeling. The Healthwatch Engagement Officer greeted his initial call with kindness, compassion, and respect. They provided him with information on where he could get support for his mental health challenges including talking to his GP.

A week later the gentleman called again. He had not been able to access his GP stating that the receptionist would “not let” him talk to a doctor. His low mood had increased and he had decided he wanted to end his life. He described how he found it difficult to look after his home, cook his own meals and access the community. He disclosed to the Healthwatch Engagement Officer he had taken steps to end his life. The Healthwatch Engagement Officer thanked the gentleman for being honest, offered him reassurance but alerted him to the fact she would need to seek emergency medical attention for him. He reluctantly agreed. The Healthwatch Engagement Officer called for an ambulance then telephoned the gentleman back and stayed on the telephone with him until the paramedics arrived.

The Healthwatch Engagement Officer gained consent to refer the gentleman to Adult Social Care for a care and support needs assessment, to independent advocacy for support to engage in the assessment and to help the gentleman access mental health support.

Lancashire Women

Lancashire Women have a responsibility to identify, report and refer on safeguarding cases as they present within our services. If identified as a safeguarding issue This duty nearly always constitutes in a referral to a statutory service.

Key Achievements in 2020/21

- We set up an internal safeguarding group to review process, policy and procedure.
- We have established weekly reports on safeguarding cases, ongoing audits and annual report tot eh board of trustees
- A safeguarding rota with a 3-tier escalation process was established for use in the pandemic and is now being maintained
- We have set up Trauma Informed Suicide awareness and Safeguarding Training

Case Study

This case study represents a fairly familiar scenario where we may liaise with statutory service on behalf of a client or independently of them for the best outcome:

Client D presented last week as chaotic, with a black eye. Having said she had fallen but was also needing a food parcel, which was supported.

Later she then contacted to say she was upset wasn't eating and didn't want to be here and knew taking tablets would be easier, on asking if she had plans to commit suicide, she said she wasn't sure, and she had no credit to phone her doctors as it kept using it all while she waited.

We asked if she wanted us to contact GP she said yes - we contacted them and d is well known to them and a telephone call was arranged for later, when we tried to ring back the phone was off and another call was made saying she had had enough. As we couldn't find out where she was at, we made a welfare check call with police - who checked and confirmed she was ok but also made a mental health referral and the GP spoke to her that day, on a follow up session this week the client said she was that day at her worse point but the help from LW that someone cares and now the GP is reviewing her medication and referring additional support she feels less likely to harm herself.

Progress Housing Group (PHG)

As well as being a large provider of social housing in Lancashire, PHG is also one of the largest providers of supported housing accommodation in the country, helping people with a learning disability and /or /long term mental health conditions and autism live independently in their own home with support. PHG is a landlord and as such has a significant role to play in the lives of people who live in our properties.

PHG has a key safeguarding role to play in keeping people safe, alongside colleagues in social care, health and the police as we are well placed to identify people with care and support needs, share information and work in partnership to co-ordinate responses. PHG also delivers Lifeline, telecare and emergency responder services across Lancashire keeping people safe and enabling them to live independently in their own homes.

PHG is a representative on the Board for all housing providers and as such communicates out key messages from the Board.

Key Achievements in 2020/21

- Achieved an average of 96.6% compliance (above target) in safeguarding adults and children mandatory training.
- Increased number of safeguarding referrals on previous year (92 referrals in 20/21 compared to 84 in 19/20).
- Set up a new website for our refuges and webchat service to support women and children escaping domestic abuse.
- Intranet articles and posts during the year raising awareness of safeguarding
- Staff are trained in safeguarding and work with a number of agencies to offer joint support when required, such as through MARAC and other multi agency Forums

5. BOARD PRIORITIES 2021-22

- Covid-19 – Restoration and Recovery (Short term)
- Mental Health
- Domestic Abuse
- Self-neglect
- ‘Voice’ Making Safeguarding Personal (MSP)