



# West Sussex Safeguarding Adults Board

## Annual Report 2017-2018





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# Foreword from the Independent Chair

## Annie Callanan



I have been the Independent Chair of the West Sussex Safeguarding Adult Board (SAB) since end of December 2017 and am pleased to introduce the Annual Report 2017 – 18. I am a qualified social worker and have operated in senior positions in Social Care and in Health at local and national level. I am, along with all agencies and partners, aware of the pressure on local services and the commitment of services to preventing abuse and responding effectively to adults who are at risk.

As a SAB, we constructively challenge and support each other and are working as partners to make real improvement across all services.

We held a Development Day in May 2018 facilitated by Professor Michael Preston Shoot, when we reviewed the structure to ensure it remains fit for purpose; set 2018/2019 priorities and reviewed our commitment to working in partnership. Building on achievements to date, we will focus on:

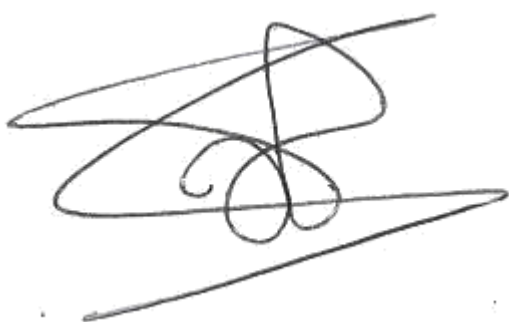
- Improving Governance and reviewing Membership of the SAB, ensuring all agencies are represented at a level that supports informed discussion and ensures decision are made and agreed at SAB Meetings;
- Write a Constitution for the SAB that identifies all agency responsibilities and the relationship between the SAB and other Boards across agencies in the County of West Sussex;
- Write Terms of Reference for the Board; the Sub Groups of the Board and ensure, through production of a Members Handbook, that all SAB and Sub Group Members are aware of their roles;
- Establish clear systems for identification of Safeguarding Adult Reviews (SARs) of serious cases involving serious injury or death, to ensure lessons are learnt and services improved;
- Establish a strong and coherent cross agency Quality Assurance Dashboard so that the SAB is assured about the safety of services across all partners, and aware of action to reduce identified risk as well as produce a Risk Register so that we are aware of risk in services;

- Make sure Training and Development proactively identifies how services are improving and can demonstrate how services are better for those who use them and their families and or friends/carers;
- Improve communication, between the SAB and other statutory bodies, such as the Safeguarding Children's Board and the Health and Well-Being Board, and partner agencies, so that we can constructively challenge and support improvement of services for those who use them and their families, carers and friends, and we reduce duplication.

As we move further towards continuous improvement of services to implement the Care Act 2014, we will need to review the capacity of the Safeguarding Adults Team to ensure we have the right skills and expertise to support the work of West Sussex Safeguarding Adults Board going forward.

We will, in the next year, appoint a Vice Chair for the Board and continue to make sure we communicate more effectively with those who use services and their carers, families and support networks, residents, professionals, partners and agencies through various ways to make sure that in all we do, we remain focused on improvement, year on year.

I look forward to working proactively with colleagues and all partners in West Sussex in this coming year.

A handwritten signature in black ink, consisting of several overlapping loops and a long horizontal stroke at the bottom.

Annie Callanan  
Independent Chair  
West Sussex Safeguarding Adults Board

# About West Sussex Safeguarding Adults Board

## What is a Safeguarding Adults Board?

West Sussex Safeguarding Adults Board (SAB) was established in its current form in 2011. It comprises of senior strategic leaders from a number of organisations which provide services in West Sussex and is led by Annie Callanan, our Independent Chair. From 1 April 2015 the Board became a statutory body with specific duties and functions. These requirements are set out in the Care Act 2014.

The Board leads the strategic oversight of adult safeguarding arrangements in West Sussex for adults with care and support needs that are at risk of abuse or neglect.

## The Board does this by:



## How we work

The Board has a core membership of statutory organisations, including West Sussex County Council (WSCC), the three Clinical Commissioning Groups (CCGs) and Sussex Police. There are a number of other partners who also form a part of the Board. The Board meets four times a year with most of its business delivered through its sub-groups.

# Our Aims

## Board's Aims

Sets the overall vision of the Board and the outcomes it wants to achieve for the citizens of West Sussex



## Strategic Aims

Establishes strategic aims and 3 year objectives required to achieve the Board's vision



## Annual Business Plan

Provides a detailed plan of specific key actions, and target timescales required to achieve the Board's Strategic Plan



## Annual Report

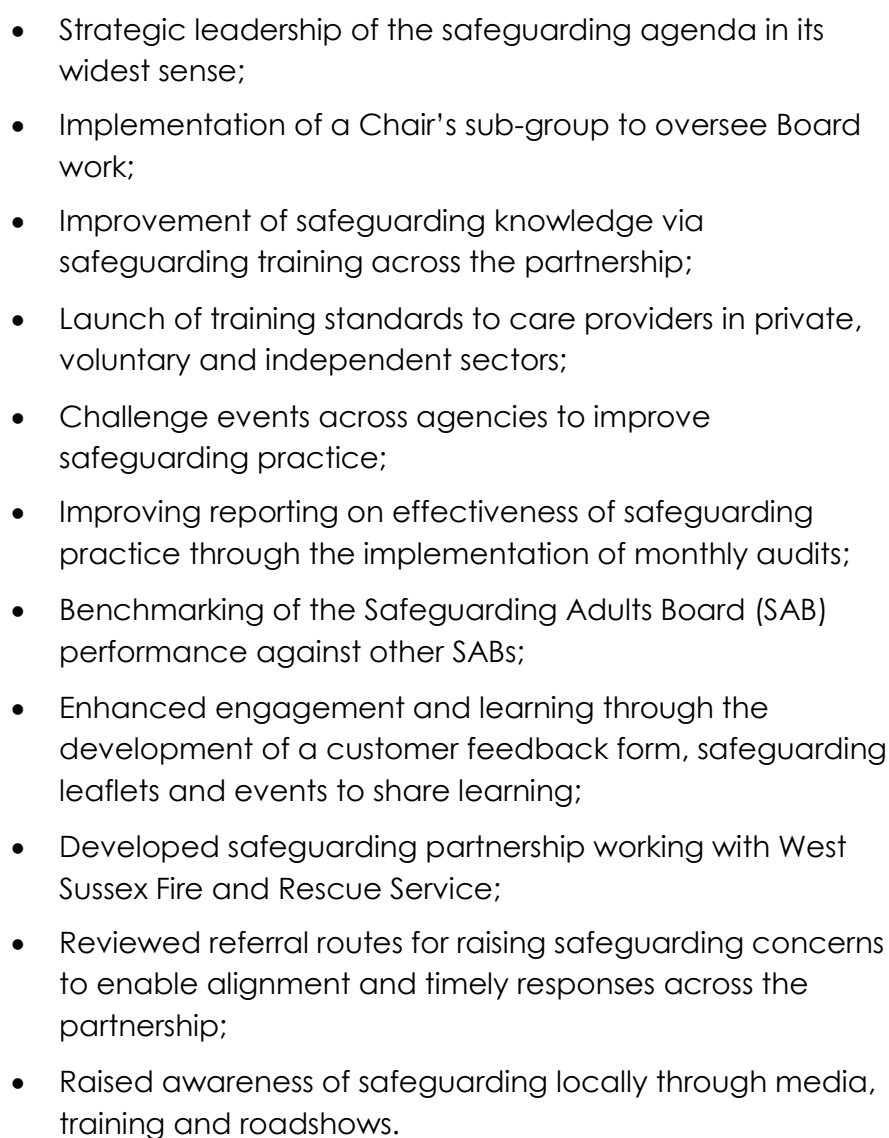
Reflects on the previous year's activity and reports progress towards the Strategic and Annual Business Plans



# Our Vision



# Our Achievements

- 
- Strategic leadership of the safeguarding agenda in its widest sense;
  - Implementation of a Chair's sub-group to oversee Board work;
  - Improvement of safeguarding knowledge via safeguarding training across the partnership;
  - Launch of training standards to care providers in private, voluntary and independent sectors;
  - Challenge events across agencies to improve safeguarding practice;
  - Improving reporting on effectiveness of safeguarding practice through the implementation of monthly audits;
  - Benchmarking of the Safeguarding Adults Board (SAB) performance against other SABs;
  - Enhanced engagement and learning through the development of a customer feedback form, safeguarding leaflets and events to share learning;
  - Developed safeguarding partnership working with West Sussex Fire and Rescue Service;
  - Reviewed referral routes for raising safeguarding concerns to enable alignment and timely responses across the partnership;
  - Raised awareness of safeguarding locally through media, training and roadshows.

We are pleased to report that in addition to our priorities being met, we have surpassed our expectations of the variety of initiatives progressed this year to improve practice and safety across the partnership.

Details of how our priorities have been met and the diverse safeguarding initiatives implemented are covered in the following sections of this report:

- What our sub-groups did in 2017-18
- How our Board Partners are making a difference

# What our sub-groups did in 2017-18

## The Chair's sub-group

The key role of this group was to ensure the sub-groups **worked collaboratively** and reduced duplication as well as to identify ways of reducing demand on partner agencies by working closely with neighbouring Safeguarding Adult Boards (SABs).

Our Independent Chair, Annie Callanan was able to meet with the Chair's sub-group in March 2018, to review key areas of work and allocate appropriate resources to the sub-groups.

Next year, the Chair's sub-group will have overall responsibility for informing the agenda of the SAB, sharing local risks, issues and safeguarding activity as well as identifying emerging trends comparative to national levels.

## Quality and Performance sub-group

The purpose of this group is to effectively monitor, report and evaluate safeguarding evidence across organisations.

Achievements:

- **An Annual Assurance** document was developed in partnership with East Sussex and Brighton and Hove Safeguarding Adults Boards (SABs) to give agencies an opportunity to evidence how they have been promoting safeguarding.
- **Challenge Events** took place to identify and share good practice across agencies; the findings of which were taken forward at strategic levels.
- **Safeguarding Adult Reviews (SARs)** were 'tested' by using multi-agency audits of work to ensure recommendations were actioned. See page 26 for further information.
- **Benchmarking** against other SABs around key information from statutory partners including: the number of concerns raised, preventative work undertaken by the Fire and Rescue Service and, referrals from Sussex Police and South East Coast Ambulance Service.



### Engagement sub-group

The purpose of this group was to raise safeguarding awareness by engaging with organisations across communities and to develop publications.

- **Safeguarding Week:** In collaborations with West Sussex Children Board and Community Safety team, a week of events in November 2017 was facilitated across a range of agencies in order to raise awareness. Given the success of the event, it will be replicated next year.
- **Elimination of Female Genital Mutilation Day:** A learning workshop for community groups and agencies was run to mark Elimination of Female Genital Mutilation (FGM) Day in February 2018.
- **Safeguarding Feedback:** Production of a feedback form for safeguarding service users who are supported by West Sussex County Council.
- **Safeguarding Leaflet:** Production of a safeguarding leaflet to be used across Sussex.

### Training sub-group

- The Training sub-group held **four roadshows** for care providers in private, voluntary and independent sectors in West Sussex. **Training standards** developed by the sub-group were shared with over 300 people who attended.
- To ensure safeguarding knowledge is developed and embedded in practice, staff across the partners including private, voluntary and independent sectors have attended a range of **courses** from basic awareness to specialist, investigative and management training, across all levels.

### Safeguarding Adults Review (SAR) sub-group

The Care Act 2014 demands that a SAR is considered when an adult at risk dies or suffers from serious harm and, there is an opportunity to promote multi-agency learning and improvement in practice.

The focus of the SAR sub-group has been to progress SAR referrals to the Board. See page 27.

# Case Study

## The Story of David

David is a 44 year old man who has a long history of significant mental ill-health including schizophrenia and a history of illicit substance misuse. He lives in a one bedroom flat in town with his partner and maintains contact with his father and brother who both live locally.

David is well known to mental health services, having accessed support from the Assertive Outreach Team for a number of years. He has previously been sectioned under Section 3 of the Mental Health Act and at the time of the concern, had a 'Community Treatment Order,' conditions of which were for him to engage with Community Mental Health services and to accept his Depot Medication.

Whilst under section in hospital, staff raised a concern that David was being exploited by people who were well known to the police. The number of people visiting David's flat at 'odd' times of the day meant that the Social Landlord had no choice but to commence procedures to evict David from his flat, due to him breaching his tenancy conditions.

Police raised concerns that David was the victim of 'Cuckooing,' a form of abuse where homes are taken over using coercion or force. It is understood that he was being targeted by drug dealers from out of the area in order to deal drugs from David's flat.

In line with Making Safeguarding Personal, when asked what he wanted to achieve, David conveyed that he wanted help to maintain his tenancy and to feel safe in his home.

The Police and Housing Departments worked closely with colleagues from local charities to put a Court Order in place which prevented anyone, other than professionals, entering his flat for a three month period. This was monitored by the police and anyone breaking this was at risk of a significant fine or prison sentence. The aim here was to break the cycle of the drug dealing and concurrent anti-social behaviour.

Further actions were identified as part of the safeguarding enquiry, which included the provision of a small support package to help David maintain his tenancy and the installation of a video intercom and alarm system so David was aware who he was letting into his flat. As a result, David felt that he could feel safe in his home. It was made clear to David that in order for the Housing Association not to take further action in relation to his tenancy, he needed to ensure that there were no further incidences of anti-social behaviour or of people using his flat.

David has since continued to work well with local professionals and agencies, including Housing Officers and has had his medication changed; he now feels safe in his home. The police continue to visit his flat on a regular basis as part of their assessment of risk of people who may be 'vulnerable to cuckooing.' David currently presents as having mental capacity in relation to decisions about his flat and housing and continues to live independently.

This case was reviewed as part of our Multi-Agency audit and was found to be 'Good', due to the level of engagement and multi-agency involvement in place to support David, consideration of wider risks to others, strong making safeguarding personal practice and the positive outcome for David.



# How board partners are making a difference

Board members have progressed numerous initiatives to improve efficiency, effectiveness and practice in safeguarding over the past year.

## West Sussex County Council - Adult Services

- timely responses to concerns by changing the pathway and also, developing a quality pathway to prevent issues being mistakenly processed via safeguarding
- all referrals from the Police are now triaged daily
- checking on the quality of practice through monthly safeguarding audits
- a targeted action plan improving timelines of enquiries by mental health teams

## Sussex Police

- improved identification of stalking by training Officers
- provided force-wide domestic abuse training, with Safe Lives, to around 2500 staff
- implemented Operation Cuckoo in response to drug dealers targeting vulnerable adults to take control of their homes to deal drugs
- specialist Prevention officers worked with communities to identify and tackle arising issues and provided support to vulnerable people via the introduction a Prevention Model
- reviewed and updated their adult Safeguarding policy
- developed Operation Rattle providing the framework for the Force's multi-agency response to Violence, Vulnerability and Exploitation

## West Sussex Clinical Commissioning Groups (WSCCGs)

- delivered sessions on West Sussex County Council's Safeguarding 'best practice' events and on the SAB 'Safeguarding Together' events
- continued to provide support for safeguarding enquiries in care homes via Safeguarding Adults Nurse Specialists
- monitored and supported GP involvement within SARs



### **West Sussex Fire and Rescue Service (WSFRS)**

- provided tailored services to households by making 6647 'All Safe and Well visits' and 4959 'High risk and safe and well visits'
- completed 50 joint visits with professionals to contribute to care planning
- implemented learning from a fatal fire SAR to improve referrals and the sharing of information with partners
- enhanced internal communication and learning from safeguarding cases

### **Western Sussex Hospitals NHS Foundation Trust (WSHFT)**

- shared learning from complaints, inquests, legal claims, clinical incidents, non-clinical patient incidents and safeguarding reviews via the implementation of a Triangulation committee
- developed a Prevent policy and delivered targeted Prevent WRAP training
- completed a self-assessment
- launched a safeguarding adults' concern form and NHS Safeguarding App
- hosted the 'Championing Safeguarding Together' event in July 2017 to develop making safeguarding personal for the Trust and care home providers

### **Sussex Community Foundation Trust (SCFT)**

- developed ability to report safeguarding and categories of abuse via an online incident reporting system directly to the Local Authority
- supported joint working with Coastal CCG who has been coordinating the Safeguarding Adult Review (SAR) health action
- participated in reviewing all SAR actions for community services and provided assurance of service delivery

### **Sussex Partnership Foundation NHS Trust (SPFT)**

- improved practice through training and support to staff on safeguarding and via a new Safeguarding Adults Liaison Practitioner post
- established a new Trust Adults and Children safeguarding team
- shared learning with staff following the scrutinising of Incident reports



## District and Borough Councils

Cross council partnership exists to prioritise and target safeguarding issues across the county. Our Districts and Boroughs have also progressed numerous actions to improve safeguarding including the following:

- designated Safeguarding Officer meetings to consider referrals and share learning
- safeguarding training for all volunteers, Dementia Friends and staff members
- created more rigorous local knowledge tests for prospective taxi drivers to ensure they are aware of adults at risk and the importance of safeguarding
- questions on safeguarding are now included in licensing requirements for Taxi Drivers
- training provided for taxi drivers on safeguarding and exploitation
- monthly street community meetings working with those at risk of being street homeless and/or having a negative impact on the community
- developed, with partners, a user-design approach for homelessness prevention
- promoted learning through a multi-agency Safeguarding Awareness Day for staff
- staff support provided via designated safeguarding officers

## Healthwatch West Sussex

Healthwatch West Sussex is an independent organisation that collects and analyses the experiences of people in West Sussex of local care to help shape local services. Local Healthwatch also signposts people to local health and social care services.

Over the past year, Healthwatch has been working with West Sussex County Council to develop a public feedback loop/evaluation mechanism for adults involved in safeguarding processes. Healthwatch's focus next year will be to pursue this agreement.



### **West Sussex Partners in Care**

West Sussex Partners in Care facilitated 'Safeguarding Together' events through a 'person-centred safeguarding' training programme.

### **Independent Lives**

Independent Lives has developed a quick reporting system for support workers in the community whereby concerns regarding an individual's safety or mental capacity can be raised at the time of visit.

### **Surrey and Sussex NHS Healthcare Trust**

Surrey and Sussex NHS Healthcare Trust has had monthly meetings, run by senior nurses of the Emergency Department to review patients' notes in order to ensure appropriate safeguarding referrals were being made.

### **National Probation Services**

National Probation Services have provided support, guidance and advocacy in relation to health, housing and other key areas where restricted access to services can impact on well-being and increase vulnerability.

### **Kent, Surrey and Sussex Community Rehabilitation Company**

Kent, Surrey and Sussex Community Rehabilitation Company launched a Women's Strategy given women's higher likelihood of both sentencing for non-violent crimes and being victims of domestic abuse. The Safeguarding Lead is also raising awareness, identifying areas for support and swift interventions to manage concerns.

### **Aspire Sussex**

**Aspire Sussex** has continued to train all members of staff, including tutors, who are mostly likely to experience initial safeguarding disclosures.





# Our data



## WEST SUSSEX STATISTICS<sup>1</sup>

In **2019** it is estimated that **864,653** people live in West Sussex.  
This is predicted to increase to **997,684** by **2039**

It is estimated that **201,547** people will be over **65** in **2019**

In West Sussex **84,393** people provide unpaid care.  
This is about **1 in 10** people in West Sussex<sup>2</sup>



Almost **20 per cent** of the above unpaid family and friend carers<sup>3</sup>  
provide **over 50 hours** a week of care<sup>4</sup>

It is estimated that **3,160** people have a **moderate or severe** learning disability in West Sussex

**1,990** people with a learning disability are provided with a social care

<sup>1</sup> The statistics for this chapter are taken from a variety of sources, including: West Sussex Life 2017-19; NICHE (Police database); West Sussex Fire and Rescue; Performance and Insight Teams from both Sussex Police and West Sussex County Council; Hospital Episode Statistics (HES), Health and Social Care Information Centre (HSCIC) and Skills for Care.

<sup>2</sup> West Sussex Life 2017-19.

<sup>3</sup> An unpaid family or friend carer is a person who gives any help or support to their friend or family member who are, for example, living with a person with a life-limiting condition, a disability, a terminal condition or issues related to old age. Family and friend carers are critical to people in their care.

<sup>4</sup> West Sussex Life 2017-19.



## Care settings<sup>5</sup>, workforce and services



**9058** people live in medical or care establishments in West Sussex.

**4494** people live in residential and nursing care settings.

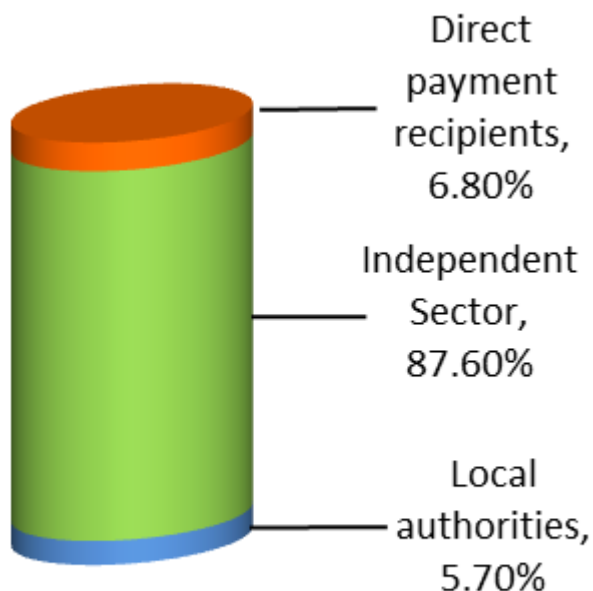
**122** supported living accommodation based services for people with learning disabilities.

**9** extra care housing services.

**100+** daycare organisations and groups providing day activities for older people.

There are **105** specialist services for people with physical and/or learning disabilities.

There are **92** GP practices in West Sussex<sup>6</sup>.



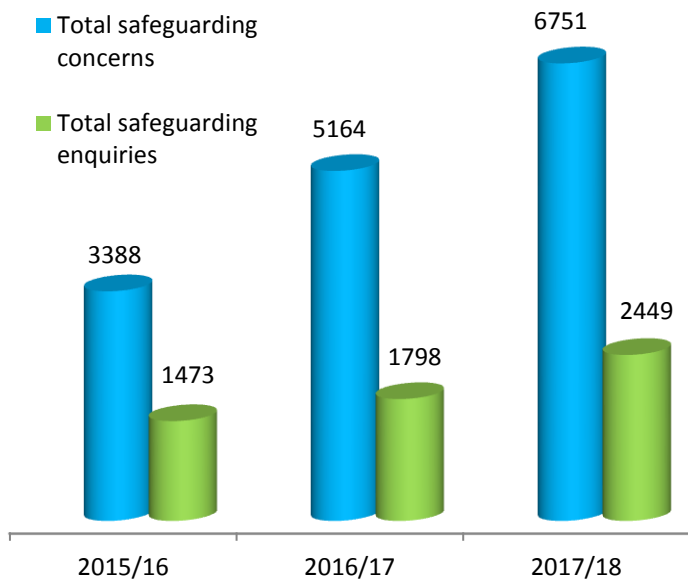
In **2016/17** there were an estimated **24,500** jobs in adult social care in West Sussex, **(5.7%)** local authorities, **(87.6%)** independent sector providers, **(6.8%)** direct payment recipients.

The majority **(79%)** of the workforce in West Sussex were **female** and the average age was **43** years old.

<sup>5</sup> West Sussex Life 2017-19.

<sup>6</sup> Figure accumulated from: <http://www.nhs.uk/Services>.

## Safeguarding Concerns



**6751** safeguarding concerns were raised. This is the highest number received in West Sussex and a 23.5% increase in the number of safeguarding Concerns raised compared to the previous financial year.

From the 6751 concerns, **2449** enquiries ensued of which, **2021** enquiries were concluded by the year end.

**Figure 1: Safeguarding concerns versus safeguarding enquiries**

Increased levels of concerns and enquiries could indicate an improving awareness of safeguarding from website, publications and media.

### Type of alleged abuse

Neglect and Acts of Omission, with 969 cases (**47.7%**), and physical abuse, with 529 cases (**26%**), were the most highly reported allegations of abuse. These types of abuse represent over **70%** of all safeguarding enquiries and account for the majority of abuse enquiries over the past 3 years.

West Sussex evidences a higher proportion of Neglect and Acts of Omission compared to National data, which identifies it as the most common type of risk in enquiries concluded in the year accounting for 32.1% of risks.

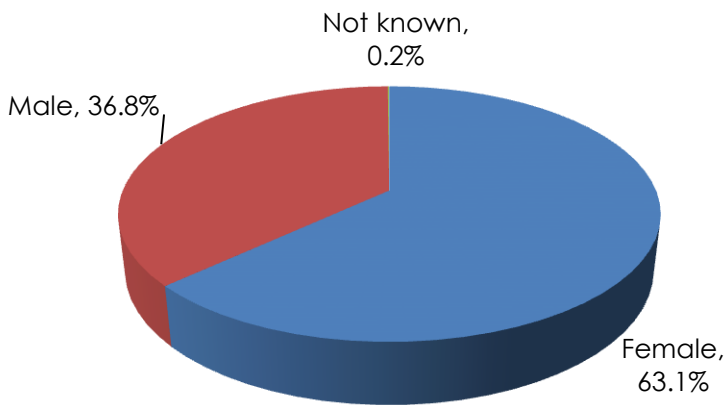
Type of abuse	2017/18	
Physical abuse	529	(26%)
Sexual abuse	90	(4.4%)
Psychological abuse	118	(5.81%)
Financial or material abuse	218	(10.7%)
Discriminatory abuse	9	(0.44%)
Organisational abuse	21	(1.03%)
Neglect and acts of omission	969	(47.7%)
Domestic abuse	46	(2.3%)
Sexual exploitation	0	(0%)
Modern slavery	0	(0%)
Self-neglect	31	(1.53%)
<b>TOTAL</b>	<b>2031</b>	

**Figure 2: Nature of alleged abuse for safeguarding enquiries**

\*The total number of types of abuse recorded is higher than the completed enquiries figure given as more than one type of abuse can be recorded for each enquiry.



## Demographics - Gender

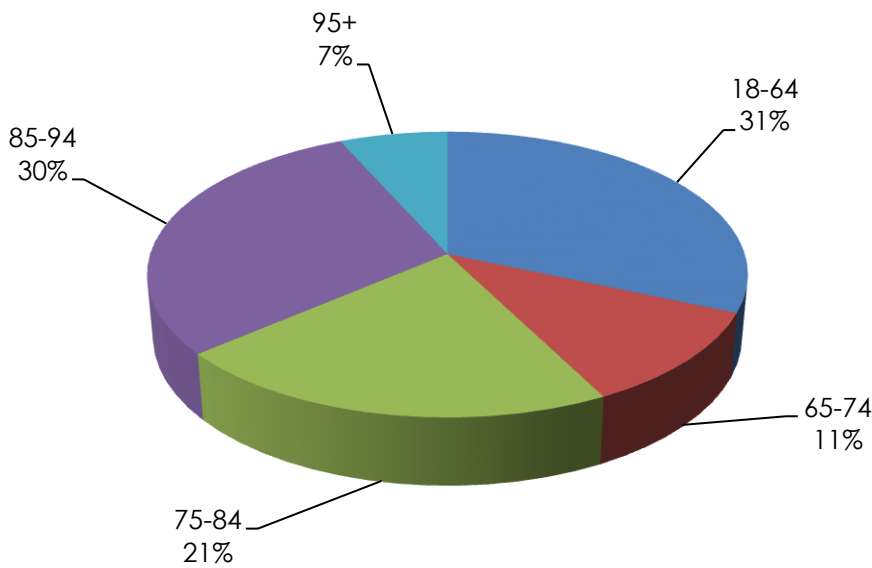


The gender difference for concerns is similar to 2016/17 with significantly more women, **63.1%**, being referred.

There is a significant improvement in non-recording of gender from 1% in 2016/17 to **0.2%** in 2017/18.

**Figure 3: Individuals by gender involved in Section 42 safeguarding enquiries 2017/18.**

## Demographics – Age



Nationally, older people are much more likely to be the subject of an enquiry; one in every 43 adults aged 85 and above, compared to one in every 862 adults aged 18-64.

In West Sussex, the number of enquiries across age bands indicates that it is older adults who mostly required safeguarding enquiries; they account for **69%** of all enquiries of which **37%** (660 adults) are over 85 years old.

**Figure 4: Age of people with safeguarding referral enquiries in 2017/18.**

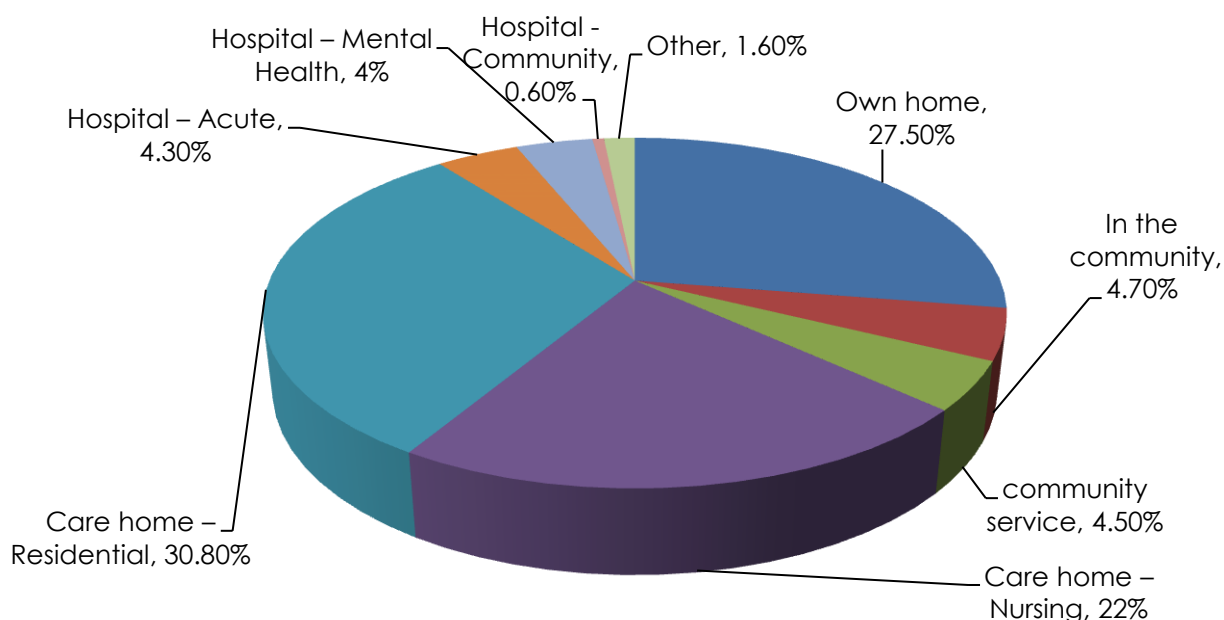
## Location of alleged abuse at enquiry stage

There was an increase of safeguarding enquiries based in people's homes, accounting for **27.5%** of enquiries.

However, the vast majority of enquiries were in care homes which, accounted for **52.8%** of all enquiries.

This is different to national data which identifies the most common location of risk to be people's homes (43.5% of enquiries). The SAB will look at identifying why these figures are different to the national trends and work as a partnership to implement any changes required.

Overall, care homes, acute and mental health hospitals all had a decrease in the share of safeguarding enquiries.



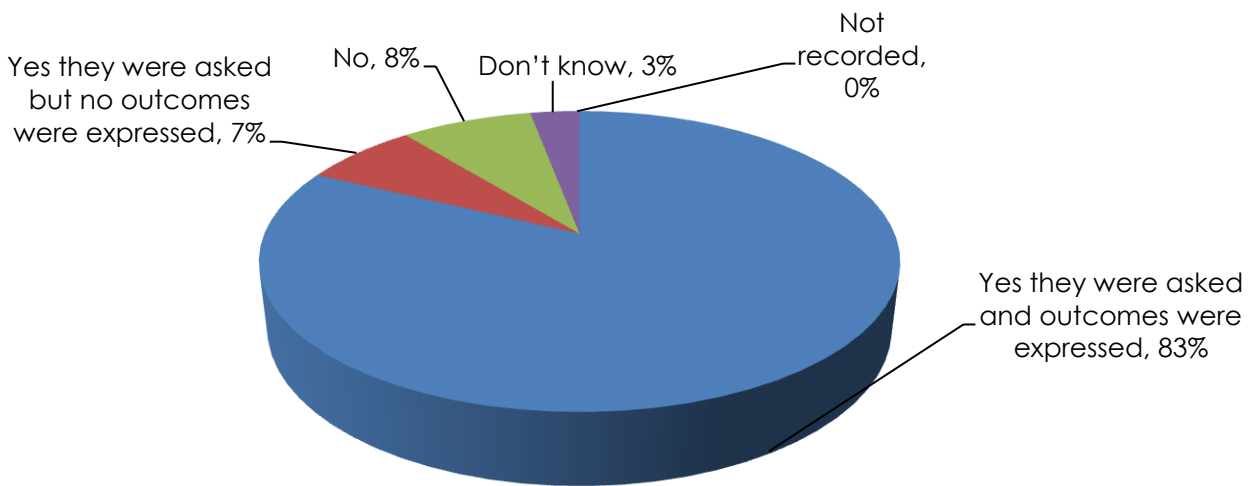
**Figure 5: Location of enquiries for 2017/18.**



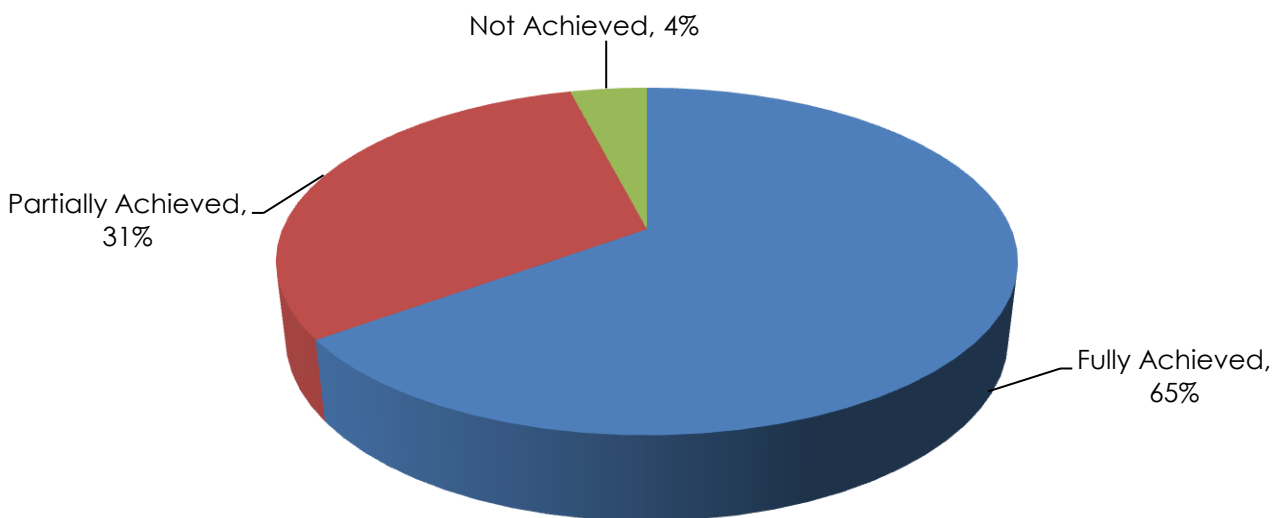
## Case outcomes

Making Safeguarding Personal demands that adults are fully involved in the safeguarding process and are asked what outcomes they want to achieve. Further work is needed to develop measurable outcomes to understand what adults are looking to achieve.

**90%** of adults were asked what outcomes they wanted to achieve of which **83%** expressed their views. Of this 83%, **65%** had their outcomes fully achieved, **31%** partially achieved and **4%** not achieved.



**Figure 6: Percentage of Adults asked of what outcomes they wanted to achieve.**



**Figure 7: Percentage of adults having their outcomes achieved.**

## Deprivation of Liberty Safeguards Information

The Deprivation of Liberty Safeguards (DoLS), is an amendment to the Mental Capacity Act 2005, which allows restraint and restrictions that amount to a deprivation of liberty to be used in hospitals and care homes if they are in a person's best interests. To deprive a person of their liberty, care homes and hospitals must request standard authorisations from a local authority.

During the 2017-18 reporting year, **3,745** requests were received, which is a 6% increase from last year.

There were a total of **3,390** completed applications\* and a total of **3,470** outstanding cases\* that were not completed in 2017-18.

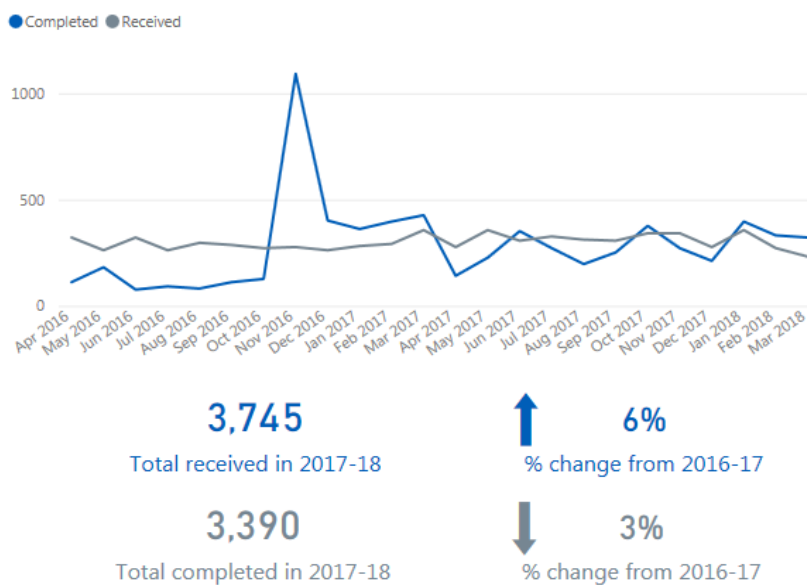
\*Please note that these cases are not necessarily the same cohort as the 3,745 requests received in the 2017-2018 year; these cases may have been received prior to 2017-2018.

### Comparative data

At the end of 2017-18 there were 3,470 cases not completed.

Nationally, West Sussex receive a lower than average number of DoLS Applications per year but are recognised as an outlier for the number of applications outstanding (not yet completed) and the length of time it takes to complete outstanding cases.

This is a concern for the SAB who will monitor the process next year.



**Figure 8: Number of received and completed applications by month across 2016-17 and 2017-18**

# SAB Learning and Learning from Safeguarding Adults Reviews

The Safeguarding Adults Board has the responsibility to ensure that all agencies working with Adults in West Sussex continue to learn and develop the best Safeguarding Practice. We do this by reflecting on practice through audits, and Best Practice events/conferences with staff.

This year the Safeguarding Adults Board held two 'Challenge and Support events'; one in partnership with East Sussex and Brighton and Hove Safeguarding Adults Boards for partners working across all three of those localities, and one for partners working solely within West Sussex.

## What did we learn?

- NHS providers have good and clear levels of training and professional development for all their staff, and there are opportunities that this can be shared with other agencies.
- The introduction of the Care Certificate could give the Safeguarding Adults Board opportunity to develop a framework for providers of care and support. This was shared with providers as part of our Safeguarding Adults Board roadshows.
- Agencies are facing challenge in relation to finance and resources. This is not just in West Sussex but is a national issue. We are hoping to help our agencies work in smarter ways to reduce the impact of this reduction in funding on safeguarding. This can be done by working collaboratively with our partnering Boards in East Sussex and Brighton and Hove.
- A continued focus required on the Mental Capacity Act in terms of understanding and implementation, with the need for some agencies to develop a communications plan to support and embed staffs' understanding and resources available.
- Making Safeguarding Personal is not always being captured and recorded in a way that is meaningful for the person or the organisation. The Safeguarding Adults Board will look at national assessment tools and systems being used and see how we can apply this closely within West Sussex.
- Opportunities were identified to share and adopt tried and tested methods of auditing; the extent to which the Making Safeguarding Personal (MSP) approaches are embedded in practice. The Safeguarding Adults Board will plan to test this as part of a Multi-Agency Audit theme in 2018-19.



## Multi-Agency Safeguarding Audits

The SAB undertook a large multi-agency audit, looking at how people who used substances were supported during safeguarding events that impacted on their day-to-day lives.

31 Cases were provided by partners including Sussex Police; Worthing Churches Homeless Project; Change, Grow, Live; West Sussex County Council and Sussex Partnership Foundation NHS Trust. Areas of focus for this audit included cuckooing and modern slavery as well as rough sleeping and domestic abuse.

Quality standards and thresholds were applied to these cases to measure how people had been listened to, how they had been supported to identify outcomes to make themselves safer, and how these outcomes had then been applied to remove or reduce the level of risk in that safeguarding concern.



### What did we learn?

- Cuckooing is being widely considered by front-line workers across a variety of agencies – this is a highly complex area due to several factors including scale of criminal activity involved, rapid fluctuations in capacity and identifying whether someone is being cuckooed, or if they are facilitating the criminal activity for their own benefit.
- In cases where agencies were working well together there was a clear evidence trail of communication and professional curiosity in terms of safeguarding especially where the person at the centre of the concern was reluctant to engage.
- Agencies need to ensure they have a clear understanding of the terminology 'Care and Support Needs' in relation to the Care Act 2014.
- Individuals identified as 'rough sleepers' had frequently experienced their safeguarding concern being closed, due to 'not being able to contact' the adult. Front line agencies may hold information as to the whereabouts of these individuals to help progress cases. This has now been included as part of initial information-gathering parts of a safeguarding concern.

## Our Priorities for 2018-2019

As a Board we will continue to work together to deliver on our vision to keep people in West Sussex safe from abuse and neglect.

Our priorities for the next year are detailed by our Chair, Annie Callanan, in the foreword, at the beginning of this report.



### Safeguarding Adults Reviews (SARs)

A SAR is a legal duty under the Care Act 2014. The purpose of the review is to learn from cases to prevent similar incidents occurring. The aim is not to apportion blame on an organisation or individuals for any failings that may be discovered.

During 2017-18, West Sussex Safeguarding Adults Board (WSSAB) worked closely with neighbouring Boards to ensure that we applied the threshold for SARs consistently.

WSSAB SAR sub-group received nine referrals in 2017-18. Of these, two met the threshold for a SAR (Adult G and Adult H) and one case was completed as a Learning Review (Adult J).

Adult F (referred in 2016-17), and Adults C and D (referred in 2015-16) are yet to be finalised and a summary will be detailed in the next year's annual report 2018-19.

Adult Bea (referred in 2015-16) is awaiting publication due to parallel process.



# SAR Summary for Adult E

**West Sussex Safeguarding Adults Board published a SAR for 'Adult E' on the 6 February 2018.**

This SAR was referred to the SAR sub-group in 2016/17. Adult E was an independent woman in her late 70s who lived alone, with no known relatives. Neighbours alerted police when they had not seen her for some time. As a result, police attended and were concerned to find that Adult E may have had a stroke.

Police contacted paramedics who, on arrival, recommended Adult E should go to hospital but Adult E declined this. Instead, she accepted an alternative suggestion by paramedics to see her GP.

The GP also advised Adult E to go to hospital but again, she declined to do this. The GP then made a referral to the Proactive Care Team.

A number of days later, neighbours once again contacted the police concerned about Adult E's wellbeing. When Police attended, they found Adult E on the floor in a poor state. She was taken to hospital by ambulance, but unfortunately passed away.

The review found that a range of agencies and individuals had made attempts to provide Adult E with support but she had declined these offers. Her ability to make decisions (i.e. her mental capacity) was assumed through every interaction.

## **What did we learn?**

- Professionals are faced with challenging decisions when an adult has mental capacity and has chosen to make a single or a series of "unwise decisions". If an adult at risk has mental capacity and is reluctant or refuses to accept support, they have the right to decline.
- Identifying and recording factors that may contribute to a person's vulnerability can be an important step to ensuring that the person receives the necessary support or that reasons for refusal are noted. Where an adult refuses support, this should be respected but an accurate and chronological record of the support offered and reasons for the adult's refusal should be recorded. These decisions should be kept under review and ongoing support offered where possible.
- West Sussex County Council needed to develop proportionate feedback to originating agencies of the receipt and progress of referrals, with particular regard to safeguarding concerns. The person or organisation that raised the safeguarding concern should always be informed by the local authority that it has been received and where appropriate how the concern is being progressed.

**Published reports can be found on the Safeguarding Adults Board website [here](#)**

# Board Governance structure

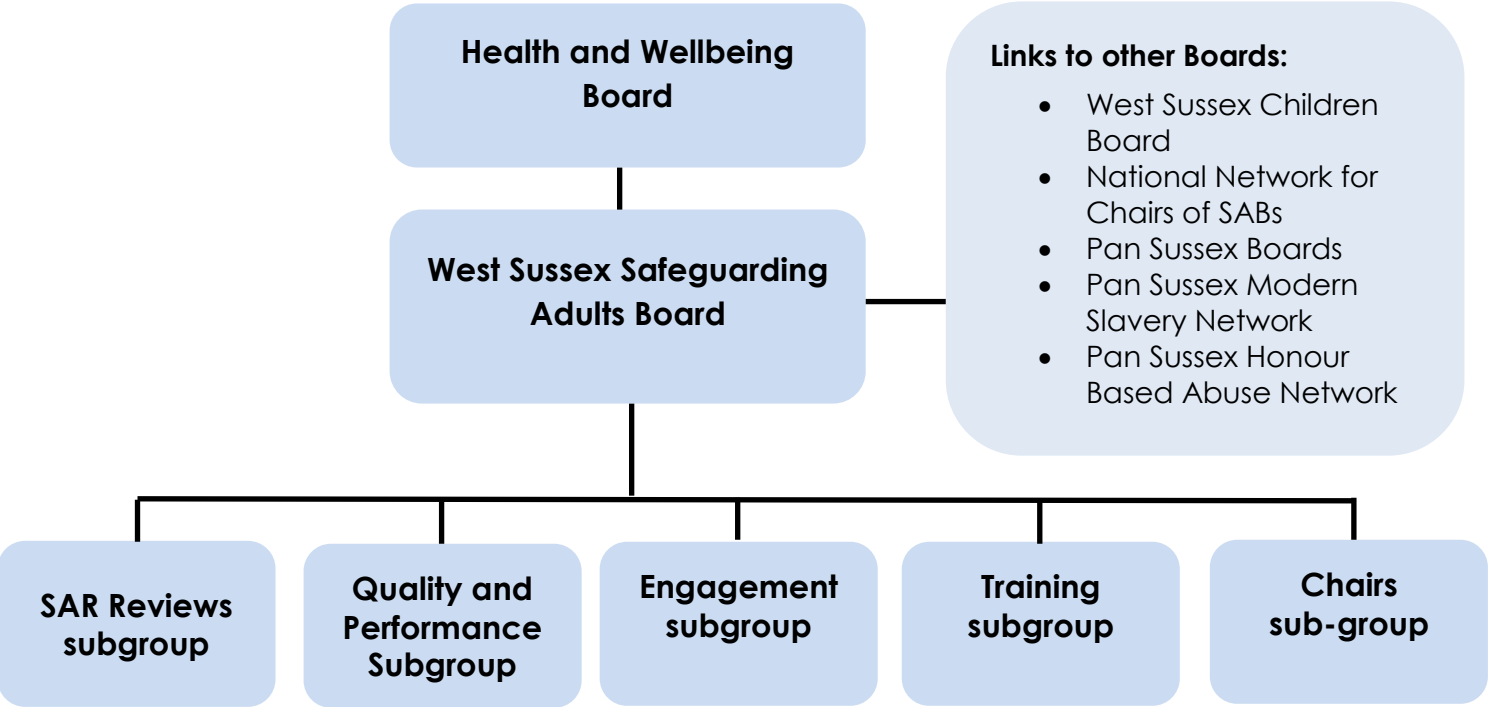


Figure 9: Board Governance structure



# Our Board Membership

<b>Independent Chair</b>
<b>Senior Adviser, West Sussex County Council WSCC</b>
<b>Executive Director, WSCC</b>
<b>Principal Manager Adults Safeguarding, WSCC</b>
<b>Cabinet Member, WSCC</b>
<b>Director of Adult Operations (DASS), WSCC</b>
<b>Principal Manager – Community Safety &amp; Wellbeing WSCC</b>
<b>Head of Safeguarding WSCC</b>
<b>Head of Quality and Nursing, Coastal WS Clinical Commissioning Group</b>
<b>Designated Nurse Safeguarding Adults, Coastal West Sussex CCG, Crawley CCG, Horsham &amp; Mid Sussex CCGs (Chair of Safeguarding Adult Review sub-group)</b>
<b>Clinical GP Lead for Safeguarding Adults, Coastal WS Clinical Commissioning Group</b>
<b>Detective Superintendent, Sussex Police, Deputy DCI</b>
<b>Safeguarding/H&amp;S Manager, Aspire</b>
<b>Nurse Director, Brighton &amp; Sussex Hospitals Trust</b>
<b>Carers Services Manager, Carers Support</b>
<b>Chief Executive, Arun District Council, District &amp; Borough Councils</b>
<b>Intervention &amp; Prevention Manager, Fire and Rescue WSCC</b>
<b>Healthwatch (Chair of Engagement sub-group)</b>
<b>Head of Residence, Safety &amp; Equalities, HMP Ford Prison</b>
<b>Head of Services, KSS CRC Ltd</b>
<b>Senior Probation Officer, National Probation to March 2017</b>
<b>Director of Nursing &amp; Quality, Queen Victoria Hospital</b>
<b>Chair, West Sussex Partners in Care (Chair of Training sub-group)</b>
<b>Interim Chief Nurse &amp; Director of Quality &amp; Safety from January 2017, South East Coast Ambulance NHS Trust</b>
<b>Supporting Community based Solutions (representing a number of voluntary organisations) Independent Lives deputy</b>
<b>Deputy Chief Nurse, Surrey and Sussex NHS Healthcare Trust SASH</b>
<b>Head of Safeguarding, Sussex Community Foundation Trust</b>
<b>Executive Director of Nursing and Patient Experience, Sussex Partnership NHS Foundation Trust</b>
<b>Nursing Director/Trust Senior Lead for Safeguarding Adults, Western Sussex Hospitals NHS Foundation Trust</b>
<b>Care Quality Commission</b>
<b>NHS England</b>

# Contact Points

## Reporting a safeguarding concern

If you are concerned that someone is abusing you or someone you know:

Please contact the Police on 999 if you think the person is at immediate risk of harm.

Otherwise please contact:

- West Sussex Adults' CarePoint on 01243 642121, or
- email: [socialcare@westsussex.gov.uk](mailto:socialcare@westsussex.gov.uk), or
- fill in a safeguarding concern form online at [www.westsussex.gov.uk/reportadultabuse](http://www.westsussex.gov.uk/reportadultabuse)
- Typetalk: 018001 01243 642121

Please also use the above contacts if you have queries regarding the Deprivation of Liberty Safeguards (DoLS).

## Safeguarding training

If you would like to access the Council's safeguarding training programme or would like more information on safeguarding training in general, please visit:

[www.westsussexcpd.co.uk](http://www.westsussexcpd.co.uk)

## Questions about this report

If you would like to find out more about this report or the work of the SAB please e-mail [safeguardingadultsboard@westsussex.gov.uk](mailto:safeguardingadultsboard@westsussex.gov.uk)

Electronic copies of our Annual Report are available at [www.westsussexsab.org.uk](http://www.westsussexsab.org.uk)