

Shropshire and Telford & Wrekin
Safeguarding Adults Board
Annual Report 2012-13



**No
more
secrets.**

‘Keeping people safe from harm’

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FOREWORD

Welcome to the Shropshire and Telford & Wrekin Safeguarding Adults Board, Annual Report 2012/13.

The Board is a voluntary arrangement of statutory and non-statutory agencies that work together with the shared vision of making Shropshire and Telford & Wrekin a place where adults at risk are protected from abuse, and the rights of people who are unable to make decisions for themselves are promoted and safeguarded.

This Annual Report provides an overview of the Board, its member organisations, its work-streams and achievements over the last 12 months.

I am pleased to be able to highlight achievements across our areas of responsibility:

- the adoption of the pan-West Midlands Policy and Procedure
- the level of training available and delivered
- the signing of the information sharing protocol

The Annual Report provides more detail about the range of achievements of the Board collectively and also of individual agencies. Whilst recognising what we have achieved as a Board, we are very aware of the need to ensure that we continue to progress. There is more to be achieved and we continue to be committed to working collectively to take forward and deliver our responsibilities to vulnerable adults.

Karen Kalinowski
Joint Chair

SUMMARY OF ACHIEVEMENTS AND TRENDS FOR THE YEAR 2012-13

New Adult Safeguarding Policy and Procedure

The most important development for the Board over the last year was the resolution to replace our existing adult safeguarding arrangements, based on the Multi-Agency Adult Protection Policy and Procedure, which had served the Board area well for more than a decade with an entirely new approach, based on a pan-West Midlands model. Based in turn on an approach which has enabled all the London Boroughs to share the same adult safeguarding procedural arrangements, the proposed policy and procedure will be implemented across 11 of the 12 Board areas in our region.

The policy document is hosted on the Social Care Institute of Excellence website at:

<http://www.scie.org.uk/publications/reports/report60/files/report60.pdf>

The new process is based upon 7 key stages, each of which are subject to defined timescales

- 1 Alert
- 2 Referral
- 3 Strategy discussion
- 4 Investigation
- 5 Case conference
- 6 Review
- 7 Closure

The beneficial features of the new arrangements include

- A renewed focus on the sound assessment of risk and the planning of actions in response
- Means by which matters can leave the process in an accountable way at any stage in appropriate circumstances
- More proportionate safeguarding responses to concerns raised.
- The facilitation of more straightforward regional benchmarking for the future

The new arrangements were ready for implementation in Shropshire at the year end, though local technical difficulties resulted in a delay until June 2013.

Referrals for the year – a summary

During the year, both local authorities reported a substantial increase in the number of referrals received. In Telford & Wrekin the increase was from 439 to 503, a rise of 14.6%, while in Shropshire the total went up from 412 to 547, representing an increase of 32.8 % over 2011-12. (See Appendix 1 for further details)

It is no easier to interpret this increase than it was to account for the decreases which were reported in previous years. A tentative suggestion is that the increases for both local authority areas point to a high level awareness of safeguarding and of how to respond to concerns. Given the high level of referrals from the social care sector, this in turn suggests that the safeguarding awareness training which is delivered by Shropshire Partners in Care across the independent care sector is effective and beneficial.

The institutional abuse investigations that have taken place over the year may well provide a further reason why the number of referrals has increased so sharply.

Under the heading of abuse in institutional settings, it was recognised that there had been a rise in the number of referrals from both the Royal Shrewsbury Hospital and the Princess Royal Hospital. A rise in the overall number of referrals is to be welcomed but in this case the concerns indicated a pattern of similar concerns which needed addressing. Senior representatives from both authorities and both hospitals were able to meet and subsequently complete an action plan to minimise the repeat concerns that had been raised.

There has also been a sustained focus by both authorities on their responsibilities following the findings of the Winterbourne View enquiry. To this end, a series of multi-agency meetings have taken place, to ensure that the risks to service users placed by Shropshire and Telford and Wrekin with providers out of the county borders are minimised, and that suitable and regular reviews of that placement take place by our own staff.

New sub-committee structure for the Board

In order to make its work manageable and efficient, the Board has delegated certain functions to subgroups, some of which operate in respect of specific issues on a task-and-finish basis, while others will have an ongoing and continuing role.

Performance subgroup

The group has met for single sessions in between full Board meetings. Meetings during the year have focussed on agreeing terms of reference, developing useful additional values for reporting by each local authority on a quarterly basis, themed audits of case records where a concern about financial abuse had been raised and identification of other sources of safeguarding intelligence, notably Trading Standards (who later made a presentation to the Board).

The Performance subgroup plays a central role in providing the Board with evidenced assurance that safeguarding systems across the partnership are sound and effective, or in highlighting areas which require attention if the Board is to meet its objectives. For this aspiration to be realised going forward, commitment and consistent contributions will be required, as well as clear steerage from the Board in regard to priorities.

□ Dignity Network

The Dignity Network met bi-monthly throughout the year. The group aims to raise the profile of Dignity, as a key concept which underpins both safeguarding and personalisation.

The network's achievements during the year included the completion of a Dignity Survey of the local health and social care sector, in order to gauge the extent awareness of dignity issues and how they are promoted. A drive to recruit more Dignity Champions has continued through the year, but the most prominent achievement was a 10 mile Dignity Walk from Haughmond Hill to the Wrekin by network members, which achieved publicity for the cause in the local press and radio.

□ Training subgroup

Although the training of staff in a range of safeguarding areas has continued across the sector throughout the year (see figures presented by both Shropshire Partners in Care and the respective training leads from the two local authorities, elsewhere in this report) the Training subgroup, as a formal body reporting to the Board, has not met consistently. This will need to be addressed for the year to come in order to ensure that the Board is able to be accurately informed both of what training and development opportunities are made available, but also to create a means by which any gaps or deficits are tracked and responded to.

□ Procedure and Protocol group

Over the year the Procedure and Protocol Group's principal task was to oversee and preparations for the implementation of the new regional Adult Safeguarding Policy and Procedure. As described elsewhere this radical overhaul of our safeguarding arrangements is based on a regional model of adult safeguarding, which will be shared with 11 other Safeguarding Board areas in the West Midlands.

The Lead Professional in Telford was a member of the regional editorial panel. In addition to the completion of the high-level procedure document, the new arrangements have the required the group to work on a range of implementation guides which create the fit between the procedure and the local organisational landscape within the Board's area. The task of training and briefing staff across the sector on the changes, as well designing new forms, both electronic and manual, had been largely completed by the end of the year.

Further work will be necessary in the year to come to develop and seek approval for terms of reference and work programmes for each subgroup

In the year(s) to come, with the adoption of a new adult safeguarding policy and procedure and a new approach to the process, there are likely to be difficulties in making direct statistical comparisons between data gathered up to now and from 2013-14 onwards. In particular the introduction of an initial 'alert' stage, is likely to reduce the number of cases which enter the process as full referrals.

Institutional abuse investigations / large scale enquiries

Within the Multi-Agency Adult Protection Procedure, the Institutional Abuse process has been invoked in circumstances where serious safeguarding concerns arising from a provider indicated that something was fundamentally wrong with the service and that a radical response was called for. The process is extremely expensive of staffing resources, which have to be devoted to detailed investigation and reviews, and is not entered lightly. Exit from the institutional abuse is on the basis of a multi-agency judgement that the level of risk to vulnerable people in the setting has been reduced to an acceptable level.

In Telford & Wrekin, 7 institutional investigations were carried out over the year, in the following settings

- 4 large residential/nursing homes
- 1 small residential home
- 2 domiciliary care agencies

In Shropshire there have been 5 investigations that have been recorded as being institutional investigations.

They were all in large residential/nursing homes.

Over the last 12 months it has become the policy of Shropshire Council to be more robust with providers who consistently refuse, or who are very slow to raise standards or to implement changes when requested to do so. The suspension of new referrals and ultimately the complete withdrawal of contracting with that particular business has been necessary in order to ensure the safety of the residents.

Serious Case Reviews

A single request was made for a Serious Case Review during the year, and this will be the subject of investigation during 2013-14. This is only the second such request for review since the adult safeguarding process was inaugurated in 2001.

The guidance on Serious Case Reviews originates from the Association of Directors of Adult Social Services and specifies the following circumstances which a Serious Case Review should be established

- A vulnerable adult dies (including death by suicide) and abuse or neglect is known or suspected to be a factor in their death. In such circumstances the Board should always conduct a review into the involvement of agencies and professionals associated with the vulnerable adult.
- A vulnerable adult has sustained a potentially life-threatening injury through abuse or neglect, serious sexual abuse, or sustained serious and permanent impairment of health or development through abuse or neglect, and the case gives rise to concerns about the way in which local professionals and services work together to safeguard vulnerable adults
- Serious abuse takes place in an institution or when multiple abusers are involved, the same principles of review apply. Such reviews are, however, likely to be more complex, on a larger scale, and may require more time. Terms of reference need to be carefully constructed to explore the issues relevant to each specific case.

PUBLIC AWARENESS AND PREVENTION

A six month project was started in 2012 to see if there was a better way of delivering the 'Safeguarding' message to a wide variety of community groups throughout the County.

The aim was to raise the profile of safeguarding as a whole across Shropshire and to promote safeguarding within community groups. To this aim a presenter from Shropshire's Joint Training team was employed to deliver briefings to the wider community; the areas targeted were community organisations, volunteer groups, church and faith groups, women's institute's, farming organisations etc. and on to as many areas of the community as possible in order to ensure that the widest available audience receives this basic knowledge of safeguarding and can recognise abuse and know what to do about it.

The areas of safeguarding that will be covered are;

- Adults at risk
- Children
- Domestic Violence and Hate Crime.

The presenter was also to liaise with the new GP's, surgery staff, patient advisory groups, and Shropshire CINCH to promote safeguarding in the areas where the most at risk people are being cared for.

Initially the take-up of the offers for the briefing was slow, but with the persistence of the trainer and 'word of mouth' recommendations after the first briefings have been delivered, a steady flow of requests was beginning to be received several months into the project.

The Safeguarding Briefing has been delivered to 71 health staff as a refresher / update with signposting to more in depth training for identified roles. Delivery of this Safeguarding training for the above church groups commences in early June 2013

End of Initial Project observations:

We are only now beginning to see a take up in this training offer due to the long term planning that these groups appear to have in place, coupled with fairly infrequent meetings.

Additional resources to accommodate this training would ensure the longevity of the provision of this valuable learning option which will support community capacity building alongside promoting the Safeguarding Agenda and protection of adults at risk.

Talks are currently on-going to explore ways of continuing this project and expanding it over a wider area.

During 2012/13 a website for the Safeguarding Adults Board has been inaugurated and it can be accessed at;

<http://www.stw-sab.org.uk/>

Information for access by members of the public and professionals is available on this site. From this modest beginning, it is hoped that the website will develop into a valuable local tool for the widespread dissemination of news and information about adult safeguarding for practitioners, managers and anyone else with an interest in safeguarding.

ACTIVITY AND PERFORMANCE

Vulnerable Adults Safeguarding Board combined (both Authorities) statistics

1. Total referrals received to date by each Authority; (by year to previous 4 years)

Period	2008/9	2009/10	2010/11	2011/12	2012/13
Number of Referrals	774	1040	948	851	1062

2. Combined referral data 2012/13

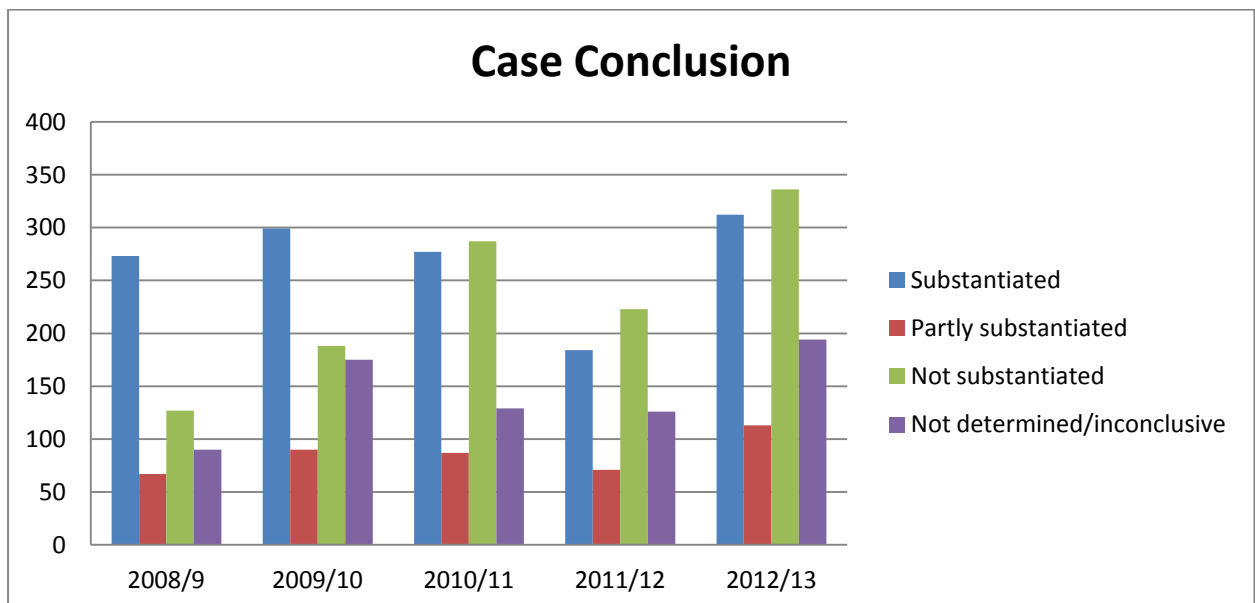
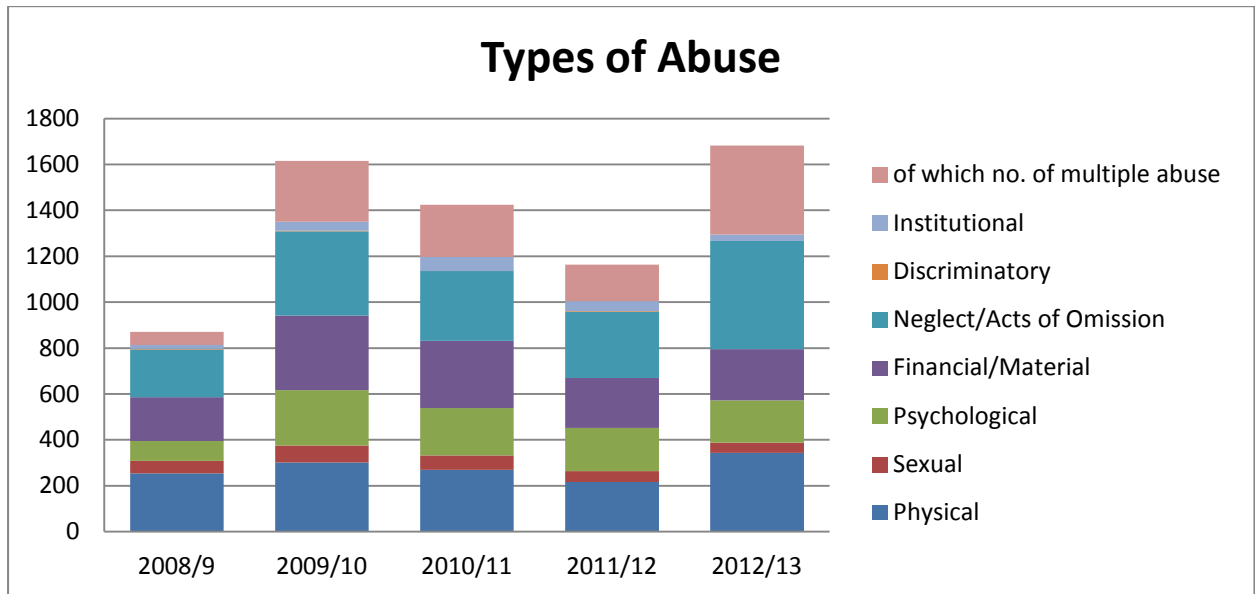
Source Of Referral	Total
Vulnerable Adult	19
Vulnerable Adults Family	98
Friend/ Neighbour	14
Other Service User	0
Social Care - Domiciliary Staff	90
Social Care - Residential Care Staff	234
Social Care - Day Care Staff	24
Social Care - Social Worker/ Care Manager	107
Social Care - Self Directed Care Staff	4
Social Care - Other	119
NHS - Primary/ Community Health Staff	98
NHS - Secondary Health Staff	97
NHS - Mental Health Staff	15
Care Quality Commission	38
Housing	17
Education/ Training/ Workplace	9
Police	14
Other	67

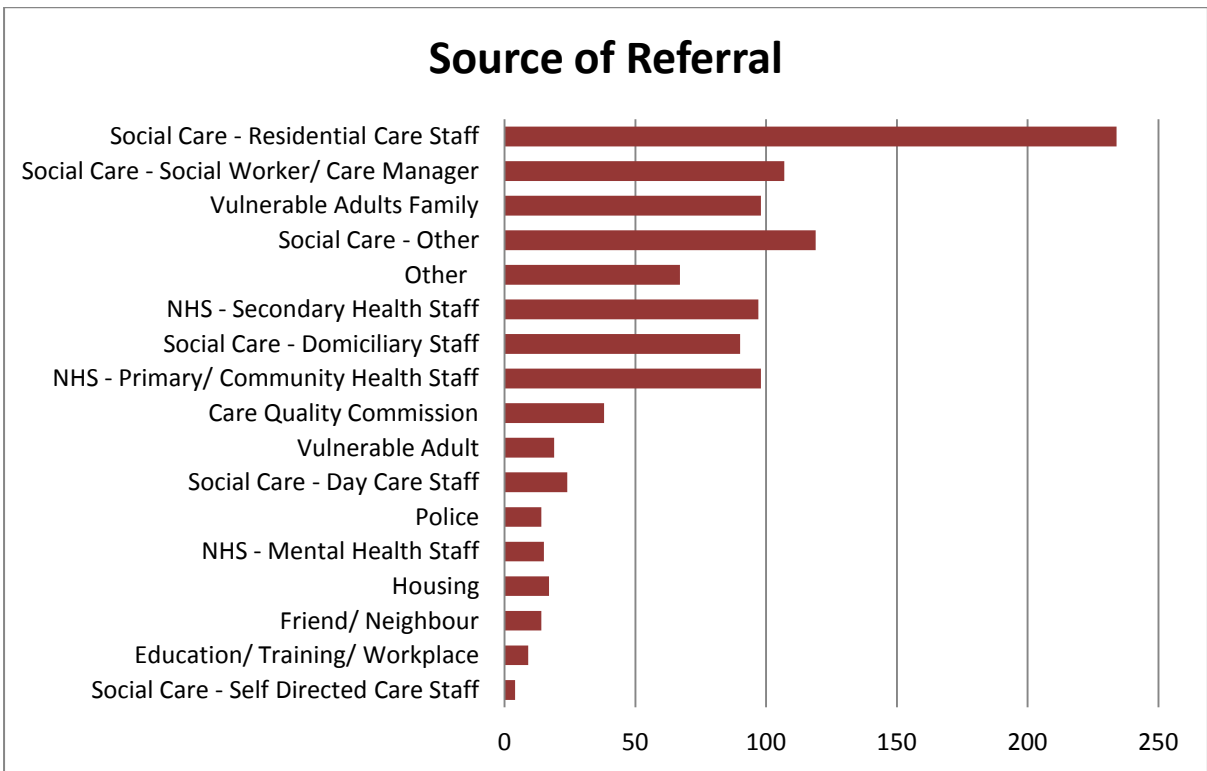
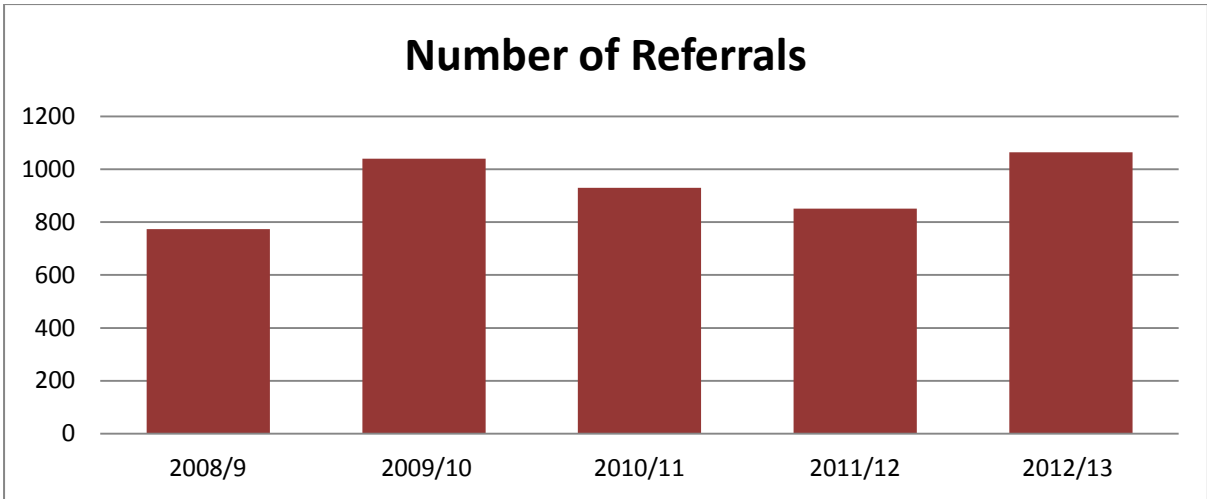
3. Type of abuse

Type of abuse	Total
Physical	343
Sexual	45
Psychological	184
Financial/Material	223
Neglect/Acts of Omission	472
Discriminatory	0
Institutional	27
of which no. of multiple abuse	388
Not stated	0

4. Case conclusion;

Case Conclusion	Total
Substantiated	312
Partly substantiated	113
Not substantiated	336
Not determined/inconclusive	194





TRAINING

The following sections demonstrate the extensive training provision available and delivered by Board member agencies.

Safeguarding Training of Council Workforce (Shropshire & Telford and Wrekin)

This year it has not been possible to collect information about the training status of all statutory and independent sector workforces. This will be addressed in next year's report.

A range of training opportunities exist to meet the learning and development needs of different staff in a variety of settings who have different roles and levels of responsibility. Each agency takes a slightly different approach to meeting those needs, always appropriate to achieve the competencies set out in the framework approved by the board.

This ensures that all staff know what actions they need to take in order to safeguard an Adult at Risk.

Training is available at different levels of complexity to meet different learners' needs in the format of short courses, problem solving workshops and longer courses up to 5 days. Training is targeted to the relevant audiences, for example 'awareness' level for all staff with direct access to adults at risk and Minute Taking for administrative staff undertaking this task.

A range of training is also provided for non-Council staff from the care and health sector and community groups in Shropshire e.g. Safeguarding Briefing for Community Groups.

The following table sets out the range of courses available across the two Councils (not all courses are provided in both) and the number of Council staff who have attend each in the year 2012-13.

Number of Council workers who attended training during 2012-13

Subject	Shropshire	Telford & Wrekin
Safeguarding Adults Awareness	200	34
Safeguarding Adults for Provider Managers	11	1
Interviewing and Investigating	15	Not applicable
Chairing Adult Safeguarding Meetings	3	Not applicable, done previous year.
Minute Taking in Safeguarding Adults	4	Not applicable, done previous year.

New Safeguarding Adults Policy – Implications for Investigating Workers	75	Undertaken through briefings
New Safeguarding Adults Policy – Managing Officers	43	Undertaken through briefings
Safeguarding Briefing Train the Trainer	6	Not applicable
Mental Capacity Act 2005 (different levels)	109	Not applicable
Mental Capacity Act and Deprivation of Liberties Safeguards	Not applicable	22
Deprivation of Liberty Safeguards, including Authorisers training (different levels)	203	Not applicable
Best Interests Assessment (different levels)	35	Not applicable
Court of Protection and Decision Making under MCA	17	Not applicable
Police and Criminal Evidence Act (PACE)	27	Not applicable
Dignity in Practice	11	Not applicable
Professional Boundaries	23	0
Personal relationships and sexuality (different levels)	43	0
Domestic Abuse	21	Not applicable
Managing Actual and Potential Aggression MAPA® (this figure is the number of complete courses attended, which range in duration from one to four days)	139	78

The training numbers are relatively small in Telford due to very low levels of staff recruitment during extensive restructuring activities. There is currently no mandatory requirement to attend refresher training so long-term workers have not needed to attend a second time. The development of e-learning to cover some of these subjects will make training easier to access and update knowledge.

In Telford Council 399 workers have direct contact with vulnerable adults and therefore need a minimum of the 'awareness' level training. Of those, 42 have yet to undertake the training. This is approximately 10% of the workforce. In Shropshire accurate data is not currently available due to recent reorganisation of services and movement of staff.

Shropshire Partners in Care (Independent & Private Sector)

Training is made more widely available to the sector through Shropshire Partners in Care and is offered directly through SPIC and in partnership with Joint Training for Adult Community and Health Services, Shropshire Council and Workforce Development, Telford & Wrekin Council. In 2012-2013 the safeguarding trainers were invited to present workshops on safeguarding and Mental Capacity Act during the COPE training sessions for GP practices.

Training delivered or coordinated by SPIC:

- Safeguarding Adults Awareness

- Safeguarding Adults for Provider Managers
- Keeping Safe, Understanding and Reporting Abuse (Shropshire)
- Common Induction Standards Training (Standards 5 & 6) (Shropshire)
- Mental Capacity Act 2005 and Deprivation of Liberty Safeguards (Telford & Wrekin)
- Professional Boundaries in Social Care and Health
- A range of Moving and Handling courses
- A range of First Aid courses
- Medication in Care for Support Workers and Nurses
- Dignity in Practice (Shropshire)
- Dementia Awareness (Telford & Wrekin)
- Management programmes and workshops

In 2012-2013 the number of learners trained has again risen, 1515 learners accessed safeguarding related courses delivered by the training and development worker in Shropshire and 1254 in Telford & Wrekin. (These figures may show duplication with Joint Training and T&W Workforce Development as SPIC trainers deliver the courses).

Robert Jones & Agnes Hunt NHS Foundation Trust

The Trust currently provides mandatory training for clinical staff with direct patient contact which needs to be completed every 3 years by staff identified within the Trust Training Needs Analysis. The Trust aims for all clinical staff to have completed the training by the end of 2013/14.

The table below shows the number and percentage of staff that are compliant with the training listed above:

Year	Name of Training		
	Safeguarding Vulnerable Adults	DOLS	MCA
2010 – 2011 % in 2010-11 <i>(based on 751 staff to complete)</i>	292 38.9%	43 5.7%	45 5.9%
2011 – 2012 % in 2011-12 <i>(based on 751 staff to complete)</i>	628 83.6%	69 9.2%	68 9.1%
2012-2013 % in 2012/13 <i>n.b. The Trust Training Needs Analysis was reviewed in November 2012.</i>	582 86.9% <i>(based on 670 staff to complete)</i>	178 30.9% <i>(based on 575 staff to complete)</i>	145 23.4% <i>(based on 620 staff to complete)</i>

The Trust aim is for at least 90% of relevant staff to have received Adult Safeguarding Training by 31st March 2014.

The Trust also provides further training in the following specific areas:

- ***Mental Capacity Act 2005 Awareness***

This is provided as a facilitated session delivered by an external training company.

- ***Deprivation of Liberty Safeguarding Awareness (DOLS) Training***

This is provided as a facilitated session delivered by an external training company.

- ***Learning Disabilities Awareness Training***

This is provided as both an e-learning module and a facilitated session delivered by Shropshire County Training and a service user. In 2012-13, the number of staff who are compliant with the training is 445 staff, giving a percentage of 68.0% (based upon 654 staff to complete following review of TNA in November 2012).

133 staff have completed a variety of Dementia awareness workshops and 73 staff have completed mental health awareness training and mental health first aid training.

West Midlands Ambulance Service

The Safeguarding Team (together with the Education and Training Department) have delivered extensive education (Educare, Clinical Notices, VLE, Clinical Times and Weekly Briefing articles, direct training, mandatory workbook and University engagement). This has led to a the quality of referrals being substantially increased and can be evidenced by a reduction in the amount of concerns from partner organisation's in regard to our referrals

Shropshire Fire and Rescue Service

We recognise that sharing data with other agencies can greatly improve our effectiveness and we have a long history of sharing information and data with partners to assist in achieving mutual goals. Our involvement in safeguarding adult's programmes is part of that commitment. A number of our staff have been trained and deliver the programme in house. We have now trained the majority of our front line staff in recognising and acting upon safeguarding issues, a total of 300 staff in all. From this training we have had a number of referrals to the safeguarding teams in the first year that the training has gone live. This has allowed the relevant agencies to assess and assist where necessary, and also allowed vulnerable adults access to help and assistance

Training in SaTH

Training remains a key focus within the organisation regarding safeguarding of children and adults at risk. Across the Trust there are 5,500 members of staff to train. Adult protection Awareness training remains part of the statutory training programme for all patient handlers and at present we have achieved 70% attendance with a target of 80%; which is a significant increase to last year. Adult safeguarding training has now been included in the induction training of new members of staff within the Trust.

Shropshire Council has continued to provide MCA and DoLS training sessions on site with further sessions to be provided. This has proven to be very effective in raising awareness within the Trust with the outcome of increasing referrals for DoLS over the year.

West Mercia Police

The investigator has undertaken training as listed below.

- Aspergers.
- Personality Disorder
- Mental Health
- Huntingdon's Disease
- Whistle blowing Conference

DEPRIVATION OF LIBERTY SAFEGUARDS

Shropshire

Deprivation of Liberty Safeguards annual report 2012/13

Level of DoLS activity 2012/13 for Hospitals in Shropshire

There were 17 requests from Shrewsbury and Telford Hospitals which related to 13 different people.

There were 4 requests from Robert Jones and Agnes Hunt all granted, one request from Chirk Community Hospital which was granted, one request from Queen Elizabeth Hospital, Birmingham not granted as the patient had absconded and one from St Georges Hospital Stafford (there is a specialist ALD unit there) which was granted. In the case of the absconding patient an Adult Safeguarding referral was made to Birmingham.

SOURCES OF HOSPITAL DOLS REFERRALS 2012/13	NUMBER	GRANTED	NOT GRANTED
SATH	17	8	9
RJAH	4	4	
BISHOPS CASTLE CH	0	0	
BRIDGNORTH CH	0	0	
LUDLOW CH	0	0	
WHITCHURCH CH	0	0	
ST GEORGES	1	1	
QE BIRMINGHAM	1	0	1
CHIRK CH	1	1	

Level of activity 2012/13 Care Homes

There were 81 requests of which 51 were granted and 30 not granted.

Combined level of activity 2012/13

Numbers of assessments completed April 2012 to March 2013 compared to previous years

<i>Assessments month by month</i>	2009/10	2010/11	2011/12	2012/13
Total	62	107	121	105

Case Law and Court of Protection

Best Interest assessments have become more complex, time consuming and challenging as case law develops. Assessors are grappling with concepts as they are interpreted by Judges and have to always be alert to potential challenges to their decision making.

We do not currently have any DoLS cases at the Court of Protection to challenge DoLS decisions. However, we are involved with a care management case at the Court of Protection where the Court have found a deprivation of liberty is occurring and required the care home to apply for a DoLS authorisation. It is linked to the Cheshire West appeal which is to be heard by the Supreme Court in October this year. Once this case is heard it may provide more direction about what does and what doesn't constitute a deprivation of liberty.

Areas of developing practice

The Shropshire DoLS Manager is currently summarising a number of case studies where DoLS has produced a successful outcome for the service users with a view to these being published. Community Care is interested in this. Some have also been shared with the DH and with SCIE for inclusion in a Good Practice Guide.

Regional representation

The Shropshire MCA/DoLS Manager is Chair of the Regional Leads Group. The group has produced some significant work over the last year. Training was arranged in 2012 by Shropshire in conjunction with Keele University. This was for all BIA's across the region. The group developed regional training standards for BIA's and for the s12 approved DoLS assessors. In 2013, the annual BIA and S12 DoLS assessor training was arranged by Shropshire and provided in Shrewsbury and Birmingham for approximately 220 people. In addition, regional Transition training for Authorisers was held in Shropshire and well attended.

Extensive work has been carried out across the region to review the DoLS Forms. The DH is aware of this work and has had copies. Checklists of best practice were developed for BIA's and for Authorisers. The new Best Interest Assessment form was piloted across the region from January to March and a final West Midlands wide version is now in use across the region.

This regional support and benchmarking is extremely valuable to the DoLS Leads, working in partnership ensures greater consistency of practice. The Leads group has recently reviewed the original ADASS DoLS protocol and this has been submitted to the Chair of the national ADASS Mental Health Network to take forward.

The group has also produced a protocol for situations where people are assessed as ineligible for DoLS and also for the MHA. This causes operational problems and may leave us open to challenge as the supervisory body for hospital DoLS.

The safeguarding systems coordinator for Shropshire is now part of the national DoLS Development Group which is chaired by the Section Head, Adult Social Care Statistics (HSCIC). The key aim of this group is to operationally manage and develop the DoLS collection from 2013/14 to reflect the requirements of users and policy.

Telford & Wrekin

The table below shows the numbers of assessments completed across Telford & Wrekin Council (T&WC) and NHS Telford and Wrekin (NHS T&W) between April 2012 and March 2013 in response to requests for Standard Authorisations.

Source of Hospital Referrals	Total Number	Number Granted	Number Not Granted
St. Andrews Hospital, Northampton	2	2	0
St. David's Independent Hospital, Corwen	1	0	1
Whorlton Hall Independent Hospital, County Durham	1	0	1
SaTH	6	1	5
University Hospital, North Staffs	1	1	0
Total	11	4	7

- There was a total of 43 referrals from care homes of which 31 were granted. This has shown an increase of 16 (59%) on the previous year.
- The number of referrals received from hospitals totalled 11, which related to 9 individuals. This figure remains the same as the previous year. This is a fairly low number, but following transfer of responsibility for hospital DoLS to the Local Authority, a new quarterly meeting has been set up with Health colleagues, which will include focus upon hospital DoLS.

Total Standard Authorisations per 100,000 population (see Appendix 2)

The total number of standard authorisations received per 100,000 population shows Telford & Wrekin at 42.4, which is higher than the West Midlands average of 29.6. The number of standard authorisations granted compared to not granted, has increased over the year and may be attributed to the quality of training being provided to the care homes.

For the year 2012/13, SPIC trained approximately 450 staff in the combined MCA and DoLS training courses. Staff came from the independent sector, voluntary organisations and groups of doctors and dentists based in Telford. Basic Awareness Training of the MCA and DoLS is now included in the Corporate induction process for both CCG and Local Authority staff within Telford & Wrekin.

There have continued to be complex and challenging issues to consider this year, with the Local Authority experiencing its first DoLS challenge through the Court of Protection. Although this highlighted a small number of care planning issues, the DoLS Authorisation itself was deemed to be appropriate and the assessments were commended by the judge.

The Joint DoLS panel with staff from Local Authority and PCT continued to meet to discuss every individual case and made an important contribution in the development, consistency and governance of the assessment process. Support to BIA's also continued with monthly BIA forums which provided ongoing supervision, peer support and inclusion in the West Midlands regionally agreed 5 year comprehensive mandatory refresher training programme.

Up to the transfer of responsibility of hospital DoLS to the Local Authority, there were 8 Best Interest Assessors (BIAs) working across the service, 4 from NHS T&W and 4 from Local Authority - 2 in Learning Disability/Mental Health, 1 in Older People and 1 in Physical Disability.

Comparison with West Midlands (Appendix 2)

West Midlands data is attached including per head of population. From this table it can be seen that the numbers of referrals from Shropshire and Telford & Wrekin are consistently above the West Midlands average. In terms of per head of population applications Shropshire is 3rd highest and Telford & Wrekin the 4th highest.

In terms of hospital requests Shropshire is about halfway down the list of authorities. Hospital DoLS make up approximately 30% of all referrals but the lack of referrals from Community Hospitals last year is of concern.

Priorities for 2013/14

Priority Actions

	Action/Priority	Agencies	Leads	Target date
1	To develop a performance monitoring framework for the Board	All	Performance subgroup	30/11/13
2	Explore ways of obtaining income streams to allow further development of SAB including the appointment of an independent chair	All	Chair	30/11/13
3	Increase the availability and use of independent advocacy services by adults at risk in appropriate cases	All	All	31/03/14

AGENCY STATEMENTS

Telford & Wrekin Council

Keeping vulnerable people safe from harm has continued to be one the Council's most pressing priorities during 2012-13. Despite the 20% savings which had to be made from Adult Care & Support staffing budget during the restructure during the previous year, the maintenance of the existing resources for safeguarding resulted over the year in the consolidation and continuity of the service offered.

This has meant that the Council was relatively well-placed to meet the challenge posed by the preparation for the new policy and procedural arrangements which were to be shared across most local authority areas in the West Midlands. Particular mention should be made of the Council's Professional Lead for Safeguarding who, as one of the regional editorial group, brought the new process into existence, and contributed considerably to the development of local practice guidance.

In the wake of the events at Winterbourne View the need to look critically at the safety, welfare and life chances of some of the most vulnerable members of our community has been thrown into sharp focus. The events have demanded an effective multi-agency response in producing new approaches to case management, safeguarding, reviewing and commissioning, starting with a strong presumption against placements outside the Telford and Shropshire locality. The Council has played a leading role in bringing about the necessary changes.

Bucking the trend of recent years, we have experienced a sharp increase in the number of safeguarding referrals recorded during the year from 428 to 503, an increase of 17.5%. Much of this increase can be attributed to the number of referrals linked with a number of large-scale institutional investigations over the year, conducted with some major local providers.

As a Council we value our local safeguarding partnership very highly and see our colleague agencies as sources of strength, support and positive challenge in the uncertainties which lie ahead, across the public sector.

Karen Kalinowski
Assistant Director, Care & Support

Shropshire Council

The safeguarding of Vulnerable Adults within Shropshire during 2012/13 has remains a high priority for Shropshire Council.

The Adult Safeguarding Board has responded to the Winterbourne View Joint Improvement programme through a task and finish group and now more latterly through a Learning Disability Programme Board which has also addressed the

confidential inquiry into premature deaths and contributing to the joint health and social care self-assessment process.

Training in the Adult Safeguarding agenda has continued across all partner agencies across the wider social care and health economy, building on previous years training offer. The uptake of training continues to grow; 1328 people have been trained in an adult safeguarding related subject during 2012/13, and it remains a high priority for the adult safeguarding board.

Shropshire has continued to work with local partners including the independent sector, Telford and Wrekin Council, West Mercia Police and Health providers to promote safeguarding. Shropshire has also contributed to the development of a West Midlands Policy and a new recording process which went live in April 2013.

Stephen Chandler
Director of Adult Services

Telford and Wrekin Clinical Commissioning Group

In 2012/13 the NHS reforms led to the establishment of Clinical Commissioning Groups (CCG) across England. These new clinically led organisations are to become statutory bodies for local health care commissioning from April 2013. In Telford and Wrekin during 2012/13, the Shadow CCG was formed and statutory roles and responsibilities of the new organisation became clear.

The safeguarding of adults in Telford and Wrekin is one of the key responsibilities of the CCG Board and to this end an accountability structure within the organisation was quickly established, ensuring the highest priority for safeguarding vulnerable adults, working in partnership with all other agencies in both Telford and Wrekin and Shropshire. The CCG Executive Nurse Lead for Quality and Safety is the delegated responsible officer with the Clinical Chair as Lead GP; the Secondary Care Board Nurse also provides scrutiny and support to the CCG internal safeguarding processes. The Chief Officer will have the overarching accountability from April 13.

The CCG has in place a Lead and Associate Nurse for adult safeguarding under a "hosting arrangement" with Shropshire CCG. This arrangement ensures appropriate resources and joint working across common providers. Throughout the CCG authorisation process in 2012/13 safeguarding process and infrastructure were externally reviewed and the CCG was fully authorised to operate across all areas. The CCG works with all healthcare providers to ensure that commissioned care is safe and effective, meeting national guidance in relation to safeguarding adults. This work is shared as appropriate with the Safeguarding Adults Board, in which the CCG plays an active role.

Christine Morris
Executive Nurse Lead for Quality & Safety

Shrewsbury and Telford Hospital NHS Trust

Shrewsbury and Telford Hospital NHS Trust is committed to developing processes and systems that ensure that people using the service, staff and others who visit the hospital are as safe as they can be.

Over recent months there has been an increase of adult protection referrals against the Trust where the care that we provided could have been better. Over half of these referrals were not substantiated. The initiation of each referral is based on a concern and as such the Trust is committed to working with other agencies and with staff within the Trust to make improvements and safeguard all adults at risk. The increase of referrals coincides with an increase in dementia/frail and complex patients admitted to the Trust during March 2013 and an overall increasing demand for beds in the hospitals. As a result the Trust is working extensively with external agencies to ensure that patient's are discharged appropriately with the correct support and care required. A group has been established and endorsed by the Safeguarding Adults Board which will examine all areas of concern. SaTH is proactively addressing the concerns raised and includes a letter issued by myself in the role of Chief Nurse to all senior nurses, matrons and ward managers to ensure that patients are safely managed and discharged home.

Safeguarding Steering Group

This internal group meets bimonthly to develop hospital policies and procedures in line with national and local guidance ensuring hospital practice safeguards both children and adults at risk. Representation of this group includes the newly appointed Associate Director of Patient Safety and also named medical and nursing staff for both children and adults. The Clinical Commissioning Group for Telford and Wrekin and Shropshire also attend and receive reports from internal governance meetings and safeguarding board.

High Risk Scrutiny Group

This group continues to develop best practice and is represented by all area across the organisation. The group currently meet bimonthly to discuss formal complaints, adult protection referrals and serious incidents. Further information regarding patient's deaths which have been reported to the Coroner has now also been added to this group.

Vicky Morris
Director of Quality and Safety / Chief Nurse

Shropshire Community Health NHS Trust

Shropshire Community Health NHS Trust is committed to doing all that it can to protect vulnerable adults. Preventing neglect, harm and abuse is a primary objective. At Board level the Director of Nursing, AHPs, Quality, HR, Workforce/OD, Deputy CEO is the Executive Lead Director for Safeguarding of children and adults and is actively supported at Board by a Non-Executive Director. The Trust is formally engaged with the work of the Safeguarding Adults Board (SAB) and the Executive Director is represented on the Board by the Deputy Director of Nursing & Quality.

The 'Safeguarding adults: multi-agency policy and procedures for the West Midlands' developed with our partners across the West Midlands has been adopted and approved by the Trust.

The Trust is actively engaged in related work programmes for example Dignity Network, MCA DoLS Operational Group and Winterbourne View Programme Board and systems are in place to review and update in line with local and national developments.

The Trust Quality & Safety Committee continues to monitor all aspects of the Trust's services to ensure standards are met via the Operational Group.

We have established and embedded an on-going process where any safeguarding concern/issues/incidents are reported through our Datix Risk Management information system and all information is reviewed by the Trust Safeguarding Adult Lead and reported on a monthly basis to the Safeguarding Group chaired by the Executive Lead and communication systems are set up with partners to identify potential vulnerability and abuse.

The Trust has developed a 'Protocol to support the health care needs of people with a Learning Disability' to promote high standards of practice for this vulnerable group of people within our community and we have adopted joint policies with the two Local Authorities on Mental Capacity Act and Deprivation of Liberty Safeguards. We have also adopted the Competency Framework for Safeguarding Vulnerable Adults and MCA training competencies. We encourage and support access to a wide range of safeguarding training opportunities and we monitor and report on the number of staff that have accessed training each month.

We communicate our safeguarding key messages to staff on a regular basis and these are:

- All staff need to be aware of and recognise signs of abuse, harm and neglect;
- All staff need to be able to identify possible safeguarding concerns and take any immediate safety action

- All staff need to be confident of their role in the prevention and response to abuse, harm or neglect.

Our values 'We Care' reflect our commitment to respecting dignity and achieving tailored outcomes for individuals. We view the assurance and promotion of dignity as key in the prevention of abuse and thus we have adopted the DH 10 Point Dignity Challenge and we encourage all staff to become dignity champions. We continue to work with our local health economy partners to ensure there is zero tolerance to all forms of abuse.

Maggie Bayley, Director of Nursing, AHPs, Quality, HR, Workforce/OD & Deputy CEO

Martine Tune, Deputy Director of Nursing and Quality

The Robert Jones & Agnes Hunt NHS Foundation Trust

Throughout 2012/13 the Robert Jones & Agnes Hunt NHS Foundation Trust has continued to be engaged in the promotion of the well-being, security and safety of vulnerable adults (adults at risk) which is consistent with the individuals rights, capacity and personal choices. As an organisation we have continued to be committed in providing good partnership working with outside agencies, and other NHS organisations providing high quality care and appropriate support for patients.

The Robert Jones & Agnes Hunt NHS Foundation Trust continue to work with Shropshire and Telford and Wrekin Safeguarding Adults Board and attend quarterly meetings to ensure there is effective communication and interagency team working. Good partnership working provides effective means of safeguarding vulnerable adults, and as an organisation, we are dedicated to provide and ensure that the dignity, safety and wellbeing of each individual in our care always remains a priority, and is at the heart of what we do.

Actions undertaken during 2012/13

- A review of the named professionals has been undertaken, and there is a designated named nurse who is the adult safeguarding lead for the organisation, and a named doctor. The named roles have been developed in line with Working Together 2010.
- The Trust has provided safeguarding vulnerable adults training for all staff, and has continued to provide specific Mental Capacity training and Deprivation of Liberty safeguards (DOLs) training.
- Dementia training for clinical staff and mental health training for specific cohorts of staff who are regularly exposed to patients with mental health issues.
- Learning disabilities training which is delivered via e-learning or as face to face facilitated training in collaboration with Shropshire County training

- Training provision has raised staff awareness and has enabled them to understand their role and responsibilities with regard to policy and procedures. This has enabled staff to promote good practice in response to concerns on a multiagency basis.
- Dissemination of clear adult safeguarding policies so that processes are embedded within the organisation. This has been undertaken through the development of the Safeguarding web page on the Trust intranet site.
- Work continues in collaboration with outside agencies to ensure service users are safe from harm, and maintain independence, well-being and choice.
- Quarterly Safeguarding Committee meetings within the RJAH have continued which is a forum to discuss children and adult safeguarding issues. The committee has the appropriate accountability for safeguarding across the trust and reports to the Trusts Quality and Safety committee.
- A review of compliance with the Care Quality Commission Essential Standards Outcome 7 has been undertaken with the appropriate supporting evidence showing how the trust continues to work in partnership towards meeting the standards.
- The Trust has continued to work in partnership with the local authorities and have adopted the Safeguarding adults: multi-agency policy and procedures for the West Midlands and Shropshire and Telford & Wrekin Multiagency Adult Protection Policy which is accessible through the Trust intranet.
- Reporting mechanisms through the Trust Datix incident reporting system have been strengthened. All adult safeguarding incidents are reported through the reporting system, and the adult safeguarding lead is involved when investigations are being undertaken to provide the necessary support for managers.

Actions for 2013/14

Setting up adult safeguarding links within ward areas, and specific clinical areas to raise awareness of the importance of adult safeguarding, and the contribution of the Trust to the care of vulnerable adults ('Adults at risk').

Development of staff information leaflet about adult safeguarding which will be distributed to all staff working within the organisation.

Development of face to face adult protection training which links in with the West Midlands multiagency policy, and local Shropshire, Telford and Wrekin Policy. Safeguarding links will be identified to attend this training as well as Ward/departamental managers, and deputies. To consider further face to face training with other frontline staff who care for patients and support their carers/relatives.

Developing an evidence-based portfolio within the ward areas for staff to refer to, that demonstrates compliance against the CQC Essential Standard Outcome 7.

Delivery of the Dementia Strategy and its implementation working in conjunction with the local health economy is on-going. The purpose of this work is to implement best practice across organisations and to ensure that the vision for dementia, as set out in the National Dementia Strategy (2009), Prime Minister’s Challenge (2011) and the NICE (National Institute for Health & Clinical Excellence) guidance and quality standards are adopted and delivered for the benefit of patients and their carers.

Reviewing the process for identifying people with learning difficulties/disabilities and ensuring that the organisation reasonably adjusts its services to provide person centred care for this patient group.

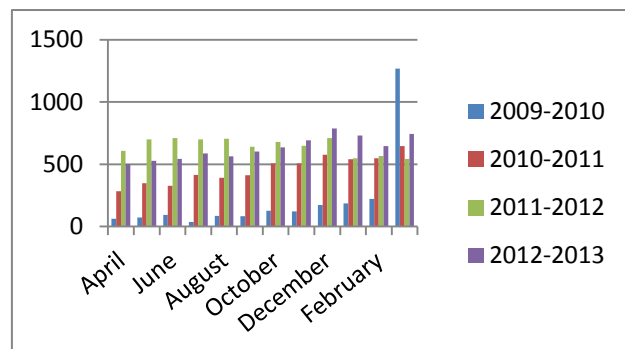
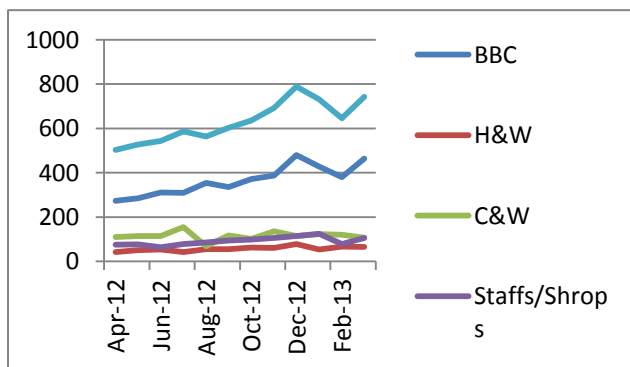
Developing further training materials about patients with Autism including the production of an in-house video about the “Autistic patient experience” in association with Shropshire County Training and the Shropshire Autonomy Self-help Group.

Continuing to embed these principles of openness and transparency to ensure a continued commitment to safeguarding through the collaboration with the local Safeguarding Board and the dissemination of information to prevent and protect adults at risk.

The provision of staff awareness and training enables the Trust to empower and support adults at risk and provide a comprehensive service to them. Reviews of practice have enabled the Trust to develop a robust action plan which will continue into 2013/14 to further enhance safeguarding adults’ practices within the organisation.

Jayne Downey, Director of Nursing
A M Worrall, Matron Quality & Safety Adult Safeguarding Lead

West Midlands Ambulance Service Summary of Annual Report (Adults) 2012/13



West Midlands Ambulance Service NHS Foundation Trust (WMASFT) has continued to ensure the safeguarding of vulnerable persons remains a focal point within the organisation and the Trust is committed to ensuring **ALL** persons within the region are protected at **ALL** times.

West Midlands Ambulance Service NHS Foundation Trust serves a population of 5.36 million people covering an area of more than 5,000 square miles made up of Shropshire, Herefordshire, Worcestershire, Warwickshire, Staffordshire and the Birmingham, Solihull and Black Country

For the year 2012/2013, 7562 safeguarding adult referrals were made. This has decreased from 7754 referrals in 2011/2012.

1. The primary justification for the reduction in the numbers of adult referrals is attributed to the situation regarding Care Concern calls. A Care Concern call surrounds an individual whom is not subject to harm being caused by a another individual/organisation (safeguarding) but more commonly as a result of one's own inability to cope with their current situation e.g. an elderly male self-neglecting. WMASFT until the start of 2012 always accepted Care Concern calls being passed via the safeguarding referral route. The Trust received an immense amount of pressure to cease this practice from partner agencies.. WMASFT did cease this practice, however, following and advice from the experts both within and external to the organisation the practice of receiving Care Concerns recommenced in September 2012. Clinical Notice was issued to inform the staff of the change. If the patient does not have capacity then a referral will be made under best interests. This is being constantly reviewed to ensure WMASFT are acting in accordance with the law.
2. The introduction of the Directory of Services has seen an improvement in the amount of direct referrals to partner agencies (Care Concern) and these are now as a result not being required to be passed via the Safeguarding line.
3. The success of the High Volume Service User scheme has resulted in many patients whom would have previously been subject to multiple referrals (often several a week) now being successfully managed by the safeguarding team and the operational leads resulting in a reduced number of referrals as there no longer is a need to make a call.
4. The safeguarding Team have conducted an in-depth call audit and have established that over a one month period the call abandonment rate for the safeguarding line was 29%. We are unable to establish what percentages of these calls were never re-presented. The assumption is that it would be very low however we are unable to evidence that. We will be introducing a final question into the question set to establish the number of attempts to pass the call as a further level of assurance in the next audit.

West Mercia Police

West Mercia is being restructured as part of an Alliance with Warwickshire Police. This will allow for common and enhanced working practices across the two Forces.

For note, resources to Adult Safeguarding will be increased across Shropshire and Telford and there will be one Detective Sergeant supervising 3 Detective Constables. This is a welcomed increase of 1 Detective Constable Post.

The interagency Detective Inspector has been engaged with supporting two key priorities in working with partners to reduce the numbers of vulnerable missing hospital patients & the numbers of Mental Health patients being taken to Custody instead of the recognised Section 136 Suite – Redwood Centre, Shelton, Shrewsbury.

Missing Hospital Patients

The numbers of missing hospital patients has significantly decreased across Shropshire (from 60 in 2011/12 to 49 in 2012/13)

Section 136 Mental Health detentions in Police Custody

New working protocols have been introduced and there is still much work to do. In 2012 there were 120 such detainee's and there were 53 from Jan to May 2013.

Police are continuing to work with hospital managers to understand how improvements can be made so that vulnerable people can be given speedy access to treatment and not routinely taken to Police cells.

Shropshire

This last year has continued to be busy, during the period April 2012 – March 2013 717 adult referrals were recorded. This is around an 18% increase on the previous year. From Jan – June 2013 Police recorded 271 referrals.

Police investigated several cases of financial abuse in domiciliary care, residential and family settings which have resulted in members of staff receiving official Police cautions, and being dismissed from employment.

Cases of Note

- A registered care home manager in Shropshire is awaiting a Crown Court appearance for offences of neglect where they have allegedly misled doctors as to the extent of pressure sores suffered by a number of residents.
- A Nurse has been charged with neglect and is awaiting a Crown Court appearance for allegations of withholding prescribed medication to residents.
- A residential care home manager is being investigated for allegations of neglect and for not having a number of care plans in place.

Partnership working

The Vulnerable Adult Investigator has delivered presentations to staff at Shrewsbury and Telford Hospitals on their role and provided staff insight as to how safeguarding can be enhanced through effective practice.

Trainee Carers at Radbrook College, Shrewsbury have received similar presentations and found them valuable.

Telford

Between Jan – 31st May 2013 there have been 262 Adult Social Care referrals to Police. 50 referrals have been recorded by Police officers.

There has been a significant decrease in the number of referrals since the beginning of June due to new referral mechanisms which have allowed Police staff to focus on completing more investigative work.

The emerging theme is that there is a growing level of financial abuse

Cases of Note

- Following information from a whistleblower the manager of a residential care home in Newport has been dismissed for neglecting elderly residents. There were no judicial outcome but it is reassuring that members of staff have the confidence to come forward to alert the appropriate authorities.
- A nurse from a residential care home in the Telford Area is currently on bail following the deaths of two elderly residents. A number of the residents lacked capacity and prescribed medication was allegedly not given to them.

The Vulnerable Adult investigator has recently been appointed to sit on the local Learning Disability Partnership Board and has undertaken training as below.

- Elder Abuse
- Epilepsy
- Pressure Sore Prevention
- Diabetes

Both the VA Investigator and her supervisor have been forging closer links with residential care homes and have given a number of presentations on their role and the themes of their investigation. This has been well received by staff and care home managers.

Philip Shakesheff
Detective Inspector
Public Protection Department

Shropshire Partners in Care

Shropshire Partners in Care (SPIC) is committed to safeguarding adults at risk, and raising awareness of connected issues across the wider community in Shropshire and Telford & Wrekin.

2012 -2013 has been a year of change preparing for the launch and implementation of the Safeguarding adults: multi-agency policy and procedure for the West Midlands. Prior to which Shropshire Partners in Care organised several workshops for Provider Managers to work with local authority safeguarding leads to develop Provider Managers Guidance ([available on the Shropshire and Telford & Wrekin Safeguarding Adults Board website](#)). During the same period there have also been significant changes to vetting and barring (Disclosure and Barring Service), SPIC has worked hard to keep its members and partners up to date with these changes. This has involved delivering support to small groups of SPIC members concerning vetting changes and organising a large cross sector event delivered by the Disclosure and Barring Service focusing on barring responsibilities.

Training

SPIC employs a Safeguarding Adults Training and Development Worker in Shropshire and a Safeguarding Trainer in Telford and Wrekin delivering a range of training sessions and supporting and signposting to the independent, statutory and voluntary sectors.

Training is offered directly through SPIC and in partnership with Joint Training for Adult Community and Health Services, Shropshire Council and Workforce Development, Telford & Wrekin Council. In 2012-2013 the safeguarding trainers were invited to present workshops on safeguarding and Mental Capacity Act during the COPE training sessions for GP practices.

Information Sharing and Raising Awareness

A crucial element of SPIC's work stream is keeping the sector up to date with information and developments, legislation, guidance and good practice.

2012-13 has seen seminars and information days addressing safeguarding, including input from trading standards highlighting rogue trading and issues for adults at risk. Each June SPIC organises events with partners including Shropshire Council and Telford and Wrekin Council to mark World Elder Abuse Awareness Day (WEAAD). In addition to events SPIC utilises its monthly e-newsletter and the website to update the membership. SPIC contributes to national and local consultations and channels views and concerns from the sector to other organisations, including; local authorities (T & W and SC), CQC, MP's and the Clinical Commissioning Group (CCG).

Future Developments and Promotion of Best Practice

SPIC continues to develop its range of courses tackling safeguarding issues and other services to support the sector.

In 2013 this will include training on Hate and Mate Crime to service users with input from the Vulnerable Adults Police Officer (Shropshire). Additionally, an event was delivered at The Lord Hill Hotel (Zero Tolerance) addressing whistleblowing. Speakers included Care Quality Commission, Shropshire Council, Telford & Wrekin Council, Healthwatch and Conover College with attendees from the independent social care sector, specialist safeguarding police officers, statutory agencies and housing. In 2013/14 further work on whistleblowing will be developed and delivered by SPIC.

Staff employed by SPIC continue to work with organisations to address specific issues and improve safeguarding practice, including bespoke projects when required. Managers who attend the Safeguarding for Provider Managers course are supported by the trainers to develop action plans around risk reduction and develop Whistleblowing practice, ensuring knowledge gained in training transfers into good practice in the workplace.

SPIC staff represent the independent sector on various subgroups of the Safeguarding Adults Board (SAB) including the Shropshire and Telford & Wrekin Dignity Network, the Training Sub Group and the Performance Sub Group. Through the SAB Training Sub Group, SPIC has developed a Competency Framework for Safeguarding Adults at Risk (available on the SPIC and Safeguarding Adults Board websites). In addition a Mental Capacity Act Competency Framework Level 1 has been developed for Telford & Wrekin. SPIC is also represented on other groups and Boards including the 'Winterbourne View Review Group' (Shropshire and Telford & Wrekin) and 'Safe Aging and No Discrimination' (SAND) LGBT working group.

SPIC has been instrumental (on behalf of Telford & Wrekin Council) in developing a service specification for the Dementia Leadership Training, having managed the tendering process and organised the delivery of the course in Telford & Wrekin and Shropshire. SPIC has also been involved in supporting learners to update organisational action plans to improve service provision for people with dementia.

SPIC is asked to attend working groups to support meeting health priorities' these include: Health Economy Dementia Group, promoting the Gold Standard Framework, Liverpool Care Pathway, Clinical Input into Care Homes and the Medicine Management Steering Group.

We work very closely with Karen George the Clinical Lead for the Independent Sector and a number of courses have been organised to support workforce development in clinical skills and understanding conditions. Courses attended in 2012/2013 include: Assessing Staff Competence to Administer Medication, Bowel Management, Can You Feel It (Pulse check), Care Plan Training, Continence & Catheter Training for HCA's, Diabetes Training for Nurses, Ear Care, Falls Awareness Training, Falls Champions Update, Training, Foot Care, Hydration, Pressure Area Care, Pressure Ulcer Management, Respiratory Disease, Venepuncture and Waterlow Risk Assessment Training .

SPIC will continue to work to its core principles including working in partnership with stakeholders and remains committed to safeguarding adults at risk in all of the activities it undertakes.

Debbie Price, Chief Officer

Karen Littleford, Safeguarding Adults Training and Development Worker

Marion Kelly, Safeguarding Trainer

Shropshire Fire and Rescue Service

Shropshire Fire and Rescue Service is a keen participant in many multi agency community programmes focussed on making Shropshire, Telford and Wrekin Safer. Through joint working with partners, we work with many groups identified as being vulnerable in society, not only to the effects of fire but other risks that put people in danger. A primary feature of our work is our ability to access all parts of the community. Fire does not discriminate and this means that we find ourselves accessing most areas of society which allows us to identify and highlight concerns if they arise. .

Our involvement with the safeguarding adults programmes has been an extremely positive experience for Shropshire Fire and Rescue Service. It has given our staff the knowledge and confidence to identify and address potentially difficult situations that they encounter during their work and we are keen to continue to support the programme in future.

John Redmond
Chief Fire Officer

West Mercia Probation Trust

West Mercia Probation Trust is committed to safeguarding adults. The Trust is committed to safeguarding adults who have been the victim or are assessed as vulnerable to abusive behaviour. We refer any concerns to Adult Social services, working with partner agencies to protect the individual from harm.

Staff from Telford Local Delivery unit have completed safeguarding adults training. The commitment for all Probation staff attending safeguarding adults training will continue and will be part of the continuous development and learning programme for existing and new staff.

Safeguarding adults is considered in all aspects of Probation work. There are plans to undertake an audit of safeguarding adults work in a Probation setting and it is a work stream for the designated Public protection lead. There has been an increase in awareness of safeguarding adults amongst Probation staff and a number have referred vulnerable adults in to safeguarding adults or been part of the safeguarding process.

Probation have a statutory seat at all Multi Agency Public protection Arrangement Panels where the risks to vulnerable adults are identified and risk management strategies agreed. There is also a representative from Telford LDU at the Multi Agency Risk Assessment Conference.

There are challenging times for the Probation Trust as the Government aim to ***'transform the way we manage offenders in the community to achieve a reduction in the rate of re-offending whilst continuing to protect the public'***

This means that by 2015 the majority of offender services will be delivered by a range of contracted private and voluntary organisations, rather than, as now, being delivered through local Probation Trusts. Trusts will be abolished and a new public sector National Probation Service created. This new national service will manage the most difficult and high -risk offender and provide services to courts.

It is not known whether the contracted private or voluntary organisations will have a statutory duty to contribute to or sit on Safeguarding Boards.

In the mean time it is business as usual and the commitment to playing a pivotal role in safeguarding Adults in Telford and Wrekin will continue working on a multi-agency basis with other organisations in the borough.

George Branch
ACO/Head of Service

South Staffordshire & Shropshire Healthcare NHS Foundation Trust

The Trust continues to be positively committed to working in partnership to ensure that the most vulnerable are safeguarded. We have valued the support and guidance provided through inter-agency arrangements and fully recognise the importance of working in an open and collaborative way to safeguard our service users. Over the past year we have continued to strive to improve our service to vulnerable people.

- We have continued to be an active partner in the Shropshire and Telford & Wrekin Safeguarding Adults Board.

- Adult Protection Awareness training remains mandatory and compliance is rigorously monitored. Staff are trained in adult protection at induction and must update every three years. We have increased our compliance by 11% to 82% in April 2013.
- We have been working to improve our processes to meet the physical health care of our service users. We have implemented a monthly Safety Thermometer which measures key aspects of physical health care for inpatients (such as pressure ulcers, falls etc). In April we were able to demonstrate 100% harm free care.
- We have been working to improve our processes to meet the needs of frail patients who are at risk of harm through falling. We have been effective at reducing the harm to service users from falls.
- We have developed Care Planning Standards to improve the quality of care plans. Our audits have shown that 75% of service users are satisfied with the way we involve them in care planning. We have also improved our involvement of carers in care planning during the last 12 months.
- We have improved our discharge planning to ensure that the transition between inpatient and community services is so there is effective continuity of care.

Each year our Quality Accounts are available on the Trust's web site at:

www.southstaffsandshropshealthcareft.nhs.uk

Much progress has been made, however we acknowledge there are always challenges, and we are fully committed to the continuous improvement of our practice in the area of safeguarding.

Therèsa Moyes Director of Quality and Clinical Performance

Appendix 1

1. Data from Telford & Wrekin

Vulnerable Adults Safeguarding Board Quarterly Statistics

1. Total referrals received to date by each Authority; (by quarter for this year, by year for previous 4 years)

Period	2008/9	2009/10	2010/11	2011/12	2012/13
Number	375	509	489	439	501

2. Total referrals received by source for current year;

	2012/13 Q1	2012/13 Q2	2012/13 Q3	2012/13 Q4	Total
Vulnerable Adult	2	2	3	3	10
Vulnerable Adults Family	15	9	12	18	54
Friend/ Neighbour	4	1	0	2	7
Other Service User	0	0	0	0	0
Social Care - Domiciliary Staff	17	10	18	15	60
Social Care - Residential Care Staff	20	37	33	36	126
Social Care - Day Care Staff	1	4	7	5	17
Social Care - Social Worker/ Care Manager	14	7	11	21	53
Social Care - Self Directed Care Staff	1	0	0	0	1
Social Care - Other	4	11	7	6	28
NHS - Primary/ Community Health Staff	8	7	10	8	33
NHS - Secondary Health Staff	7	9	13	12	41
NHS - Mental Health Staff	0	3	1	0	4
Care Quality Commission	7	2	2	12	23
Housing	3	4	2	1	10
Education/ Training/ Workplace	0	0	0	6	6
Police	2	3	2	1	8
Other	7	6	5	1	19

3. Type of abuse by quarter for current year;

Type of abuse	2012/13 Q1	2012/13 Q2	2012/13 Q3	2012/13 Q4	Total
Physical	39	39	39	41	158
Sexual	6	3	5	3	17
Psychological	34	16	30	42	122
Financial/Material	40	31	27	15	113
Neglect/Acts of Omission	35	54	68	89	246
Discriminatory	0	0	0	0	0
Institutional	2	4	5	11	22
of which no. of multiple abuse	38	28	40	47	153
Not stated	0	0	0	0	0

4. Case conclusion;

	2012/13 Q1	2012/13 Q2	2012/13 Q3	2012/13 Q4	Total
Substantiated	31	33	38	23	96
Partly substantiated	10	14	18	16	41
Not substantiated	39	44	29	24	108
Not determined/inconclusive	29	16	27	17	70

2. Data from Shropshire

Vulnerable Adults Safeguarding Board Quarterly Statistics

4. Total referrals received to date by each Authority; (by quarter for this year, by year for previous 4 years)

Period	2008/9	2009/10	2010/11	2011/12	2012/13
Number	399	4531	459	412	561

6. Total referrals received (For Shropshire – investigations undertaken) by source for current year;

	Q1	Q2	Q3	Q4	Total
Social care staff - TOTAL	90	70	66	57	283
Of which; Domiciliary staff	8	6	6	9	29
Residential staff	36	23	25	20	104
Day care staff	2	1	2	1	6
Social Worker/Care Manager	15	15	14	8	52
Self directed care staff	1	0	1	1	3
Other	28	25	18	18	89
NHS Staff - TOTAL	27	40	38	25	130
Of which; Primary/Com health	11	21	17	15	64
Secondary Health Staff	13	15	18	9	55
Mental Health staff	3	4	3	1	11
Self referral	2	2	3	2	9
Family Member	17	11	8	6	42
Friend/neighbour	0	4	1	2	7
Other Service User	0	0	0	0	0
Care Quality Commission	4	1	9	1	15
Housing	1	1	3	1	6
Education/training/workplace	0	0	3	0	3
Police	0	1	1	4	6
Other	13	11	13	9	46
Overall TOTAL	154	141	145	107	547

7. Type of abuse by quarter for current year;

Type of abuse	Q1	Q2	Q3	Q4	Total
Physical	50	38	52	37	177
Sexual	9	6	7	4	26
Psychological	17	12	17	8	54
Financial/Material	26	30	30	23	109
Neglect/Acts of Omission	60	61	53	37	211
Discriminatory					
Institutional	3	2	0	0	5
of which no. of multiple abuse	8	7	9	4	28
Not stated					

8. Case conclusion;

	Q1	Q2	Q3	Q4	Total + % of total closed
Substantiated	65	42	47	18	172 = 34.05%
Partly substantiated	12	10	17	7	46 = 9.10%
Not substantiated	53	65	50	25	193 = 38.21%
Not determined/inconclusive	22	22	23	27	94 = 18.61%

Appendix 2 : Comparator data for the West Midlands region

DEPRIVATION OF LIBERTY - WEST MIDLANDS REPORT FOR LA's AND PCT's				
1 April 2012 - 31 March 2013				
AREA	Adult Population		Total Number of standard authorisation applications from 1st April 2012	Total Number of standard authorisation applications from 1st April 2012 per 100,000 Adult Population
Birmingham	782,400	LA	48	6.1
Birmingham East and North	782,400	PCT	17	2.2
Heart of Birmingham Teaching	782,400	PCT	14	1.8
South Birmingham	782,400	PCT	19	2.4
Birmingham Total				12.5
Coventry	247,500	LA	97	39.2
Coventry Teaching	247,500	PCT	24	9.7
Coventry Total				48.9
Dudley	241,800	LA	59	24.4
Dudley	241,800	PCT	33	13.6
Dudley Total				38.0
Herefordshire	144,100	LA	60	41.6
Herefordshire	144,100	PCT	10	6.9
Herefordshire Total				48.6
Sandwell	223,300	LA	53	23.7
Sandwell	223,300	PCT	28	12.5
Sandwell Total				36.3
Shropshire	233,500	LA	81	34.7
Shropshire County	233,500	PCT	24	10.3
Shropshire Total				45.0

Solihull	161,200	LA	35	21.7
Solihull Care	161,200	PCT	11	6.8
Solihull Total				28.5
Staffordshire	663,200	LA	172	25.9
North Staffordshire	663,200	PCT	10	1.5
South Staffordshire	663,200	PCT	26	3.9
Staffordshire Total				31.4
Stoke	188,400	LA	66	35.0
Stoke on Trent	188,400	PCT	14	7.4
Stoke Total				42.5
Telford & Wrekin	125,000	LA	43	34.4
Telford & Wrekin	125,000	PCT	10	8.0
Telford & Wrekin Total				42.4
Walsall	196,300	LA	17	8.7
Walsall Teaching	196,300	PCT	18	9.2
Walsall Total				17.8
Warwickshire	424,800	LA	29	6.8
Warwickshire	424,800	PCT	37	8.7
Warwickshire Total				15.5
Wolverhampton *	186,600	LA	55	29.5
Wolverhampton City	186,600	PCT	19	10.2
Wolverhampton Total				39.7
Worcestershire	442,500	LA	90	20.3
Worcestershire	442,500	PCT	41	9.3
Worcestershire Total				29.6
WEST MIDLANDS TOTAL	4,260,600		1260	29.6

	West Midlands
	Above West Midlands Average per 100,000 adult population
	Below West Midlands Average per 100,000 adult population

The West Midlands average of 29.6 per 100,000 adult population is skewed because of Birmingham, with the highest population, having the lowest rate of referrals.