



Prevention
Accountability

Institutional
Discriminatory
Sexual
Psychological
Physical Protection Proportionality
Neglect

Haringey Safeguarding Adults Board Annual Report 2011/12

Finance
Partnership
Empowerment

ADULT ABUSE, DON'T ACCEPT IT. IF IN DOUBT - SHOUT!



Contents

Foreword	3
1. Introduction	4
2. Safeguarding Adults Board & local work	6
3. Safeguarding Adults Board Sub-Groups	13
MASH	14
Members Panel	15
Case examples - substantiated referrals	16
4. Safeguarding adults data	18
5. SAB Business Plan objectives for 2012-2013	25
Appendices	
Appendix 1 Partner Statements	26
Appendix 2 National Developments	41

Foreword



Mun Thong Phung
Director of Adult & Housing Services
Chair of Haringey Safeguarding Adults Board

Welcome to the 2011-2012 Haringey Safeguarding Adults Board (SAB) Annual Report.

2011-2012 was a year of consolidation for the SAB. I took up my role as chair of the **SAB in April 2011. There were a number of changes in the Board's membership** early in the year reflecting the changes to the health service. A major development in safeguarding was the launch of the local Multi-Agency Safeguarding Hub (MASH).

Although this is primarily a children's initiative, it involves many of our safeguarding partner agencies and we hope to see the service extended to safeguarding adults in the future.

The Safeguarding Adults Members Panel provides an additional tier of scrutiny of adult safeguarding and has produced its first annual report.

There are challenges ahead for us. We need to update and review our essential protocols and procedures and prepare for the proposed changes to adult safeguarding as set out in the draft Social Care Bill (July 2012). We need to develop our engagement with service users and within the community. We have very good safeguarding data but we need to use that data more effectively in planning preventative work.

We have prepared the ground for more active sub-groups which will include local campaigns and targeted work. One particular success of 2011-2012 was the work of the Carers task and finish sub-group.

The launch of the online safeguarding adults training has been a key development which opens up good quality training for internal council staff as well as SAB partner agencies and local providers.

It has been good to see so many partner agencies contributing to this year's annual report. That is testament to the thriving safeguarding **adults'** work being completed locally. We are very fortunate to have such commitment, and I look forward to working with you all in 2012-2013.

1. Introduction

1.1 The Haringey SAB is a board made up of senior managers of key partner agencies in Haringey as well as representatives of community groups. The SAB provides an oversight of all adult safeguarding matters with the board meeting quarterly. The annual business plan covers local arrangements, service provision and quality assurance.

1.2 The SAB aims to improve safeguarding arrangements for adults at risk by:

- Providing an oversight of safeguarding arrangements
- Steering/coordinating and driving the agenda
- Co-ordinating safeguarding work between local agencies
- Agreeing safeguarding adults policy
- Co-ordinating joint training
- Monitoring progress against agreed safeguarding objectives
- Facilitating learning from safeguarding matters

1.3 The SAB links to other bodies such as the Community Safety Partnership Board and the Local Safeguarding **Children's Board**.

1.4 This annual report provides a review of the year, details and analysis of the safeguarding referrals raised, and details of the work of partner agencies. Some of the key achievements highlighted in this report include:

- Development of the Anti-Hate Crime Strategy and Action Plan
- Launch of the Complex Care Transfer Protocol for people with learning disabilities and mental health issues with Islington
- Creation of a new monitoring post to work across safeguarding and commissioning
- Extra scrutiny provided by the Safeguarding Adults Members Panel
- Robust work with providers, such as:

- Free safeguarding training for local providers
- A new accreditation scheme for domiciliary care providers
- A monthly forum for providers of care services
- Deprivation of Liberty Safeguards (DoLS) information sessions for care home providers.

2. Safeguarding Adults Board and Local Work

The SAB Annual Report 2010-2011 set out eight priorities for work during 2011-2012. These are revisited below with a brief summary of the actions taken.

2.1 SAB Priorities for 2011-2012

2.1.1 Produce a SAB annual report

This was completed and the SAB Annual Report is available on the Haringey website at:

http://www.haringey.gov.uk/index/social_care_and_health/safeguarding_adults.htm

2.1.2 Continue to promote awareness of adult safeguarding and risk assessment

Training sessions were provided for staff in the mental health teams, the Joint Learning Disability Community Team, and for elected Council Members.

Information leaflets (http://harinet.haringey.gov.uk/safeguarding_adults_leaflet.pdf) were reprinted for staff and information was provided to a carers group.

2.1.3 Conclude work to implement the Pan-London safeguarding procedures

Information was provided to internal staff. The Social Care Institute of Excellence (SCIE) at a Glance Pan-London procedures document was distributed to staff. Haringey appendix to the Pan-London procedures produced. This is at:

http://harinet.haringey.gov.uk/haringey_sab_plp_appendix_v3.doc

We also took a lead role in the four-borough work to introduce the Pan-London risk assessment.

The Social Care Institute of Excellence (SCIE) <http://www.scie.org.uk/publications/ataglance/ataglance44.asp>

2.1.4 Review the adult safeguarding training programme for 2011-2012 onwards, giving more emphasis to specific training such as dealing with financial abuse, ensuring that higher numbers of independent sector staff receive training.

New financial abuse courses were provided for staff, in partnership with Enfield. Free training was offered to local providers of care services. New online training courses for staff and partner agencies were launched, and can be accessed via the Learning Pool website, <http://www.learningpool.com/>. The safeguarding training programme has been reviewed with a new programme in place for 2012-2013. In addition, the SAB Training sub-group was relaunched, completing an assessment of local provision and examining potential for developing services in line with the Bournemouth University Safeguarding Adults competencies.

2.1.5 Continue to consolidate safeguarding partnerships with NHS colleagues and GPs

All local health partners are represented on the SABNHS Haringey has good links with Haringey Council and is part of the local management team meetings. Haringey's safeguarding team continued to work in partnership with NHS Haringey's Care Home Support Team and Tissue Viability nurses. The SAB agreed to adopt the Whittington Health pressure ulcer protocol. Links are maintained with the London Ambulance Service which continues to be a major referrer of safeguarding adults referrals.

2.1.6 Monitor the development and implementation of health care providers safeguarding boards

Whittington Health, the North Middlesex Hospital and Barnet, Enfield and Haringey Mental Health NHS Trust have their own safeguarding adults at risk committee. There is good communication between these boards and the SAB, assisted by each health agency having a safeguarding adults lead.

2.1.7 Implement new policy directives set out in the Law Commission's report to reform adult social care

It has not been possible to implement new policy directives as, although the Law Commission reported and made recommendations about safeguarding adults, these have not yet become either law or a directive for local authorities. The Coalition government set out an advice note in 2011 and released a White Paper in July 2012. The consultation period ended in the autumn of 2012.

2.1.8 Continue to develop **Haringey's Multi-Agency Safeguarding Hub (MASH)** and identify its impact on domestic and gender based violence

Haringey's MASH was launched in February 2012. Further information can be found in the section on the MASH below.

2.2 Additional SAB and local safeguarding work

2.2.1 Domestic Violence and Multi Agency Risk Assessment Conference (MARAC)

There are key links between domestic violence and safeguarding adults at risk. The domestic and gender based violence partnership informs local work, and the council employs a domestic violence co-ordinator. SAB members are part of this local partnership as well as being members of the MARAC.

2.2.2 Serious Case Review (SCR)

Following the death of an adult at risk who was a resident of a local supporting living service, the SAB Serious Case Review (SCR) sub-group made the decision to hold a SCR. An independent chair was appointed and a meeting arranged for March 2012. However, the SCR had to be postponed as police were still investigating the death. The SCR will be completed in 2012-2013. One aspect of its work will be a process diary kept by the chair which will be used to update the local SCR policy and procedure.

2.2.3 Commissioning Initiatives

Haringey's Adults Commissioning Team has launched two new developments which address safeguarding matters:

- a new accreditation scheme for domiciliary care providers. Each provider wishing to provide services for the local authority must first either be registered with the Care Quality Commission (CQC) or be successfully accredited with Haringey Council. Since the launch of the accreditation process, we have reviewed five accredited suppliers. The reviews involved unannounced spot checks, a review of policies and the review of client and care worker records. We also observed how care is delivered to individual clients and interviewed residents using care, to find out whether the services they received improved the quality of their lives.

- the consolidation of the local Providers Forum. This has grown into a well attended monthly forum for providers of care services within Haringey. A special joint CQC and safeguarding session took place in May 2012. Notes including examples of good practice were distributed to members of the providers forum.

2.2.4 Quality Assurance

The council's Adult Social Care Services Quality Board meets quarterly to review quality initiatives. Quality outcomes for safeguarding adults work include the completion of safeguarding questionnaires with staff. Three of these were completed in 2011-2012 and will be followed up in 2012-2013 to assess progress.

The case file audit tool has been implemented. The safeguarding team completes two case file audits per month. The performance team analyses the completed audit and produces a report highlighting areas for improvement. This report is presented quarterly to the Quality Board for further action and improvement. The case file audit has been designed in line with the pan-London tool.

2.2.5 Safeguarding data

The Haringey Council performance team compile monthly statistical returns of the safeguarding data. These form the basis of the statutory return Abuse of Vulnerable Adults (AVA) return which each local authority must present to the Department of Health. The data is also presented at each SAB meeting. Extracts from the data are presented below in table 1.

TABLE 1	Period April 2010 – March 2011	Period April 2011 – March 2012
Local Authority	16	25
PCT	8	9
Independent Hospital	0	0
Total	24	34

2.2.6 Hate Crime

Preliminary work to develop a local Anti-Hate Crime Strategy for adults at risk began in 2011-2012 and will continue in 2012-2013. There is an ongoing successful local Mencap-led Learning Disabilities Hate Crime

project; this empowers people with learning disabilities to take action to protect themselves. Links have been made with the Community Safety Team and their work in responding to local hate crime. Anti-Social Behaviour Partnership meetings include key local agencies including the police and adult social care staff.

2.2.7 Deprivation of Liberty Safeguards (DoLS)

Haringey Council is the DoLS supervisory body and is therefore well placed to provide data. The DoLS co-ordinator provided regular briefings for the SAB throughout the year. In addition, agencies came together in the early part of 2011-2012 to share information about DoLS and agree a delivery plan. This included the provision of information sessions for care home providers by the DoLS co-ordinator. A more detailed briefing session for local providers is planned for 2012-2013.

DoLS applications have been lower than expected, in line with the rest of England. There has been an increase since 2010-2011 (in line with the slight trend upwards in the rest of England); however numbers are still relatively low. Extracts from the data are presented below in table 2.

TABLE 2	Period April 2010 – March 2011	Period April 2011 – March 2012
Authorised DOLS	10	22

2.2.8 Independent Mental Capacity Advocate (IMCA) Service

[VoiceAbility \(http://www.voiceability.org\)](http://www.voiceability.org), a local advocacy scheme, has a joint contract with Haringey, Enfield and Barnet Councils to provide an IMCA service. This is a very useful service and VoiceAbility IMCAs have been working with DoLS applications as well as with safeguarding adults' referrals.

2.2.9 Haringey's Joint Strategic Needs Assessment (JSNA) & Local Account

Safeguarding adults information links with other parts of the council and their reporting mechanisms. Examples include the Public Health-led Joint Strategic Needs Assessment (JSNA) and the Adult Social Care Local Account. Safeguarding information and data is provided for both. The JSNA is available at <http://www.haringey.gov.uk/jsna>

The Local Account can be viewed at:

http://www.haringey.gov.uk/index/social_care_and_health/social_care_policy_and_practice/local_account_2010_11.htm

2.2.10 Channel

Channel is a police-led supportive multi-agency process, designed to safeguard individuals who may be vulnerable to being drawn into any form of terrorism. It is a key part of *Prevent – the Government’s strategy* to stop people becoming terrorists or supporting terrorism.

Channel works by identifying individuals who may be at risk, assessing the nature and extent of the risk, and, where necessary, providing an appropriate support package tailored to their needs. A multi-agency panel, chaired by the local authority, decides on the most appropriate action to support an individual after considering their circumstances.

In 2011-2012 an internal Haringey meeting was held with the Channel team to agree the way in which Haringey will respond to Channel referrals. The local Channel panel sits on an “as and when” basis and involves local partners. The Safeguarding Adults Team has taken the lead for the adult Channel Panel to date. The new Prevent co-ordinator in Haringey Council will be involved in the work as we go into 2012-2013.

Channel is a key element of the Prevent strategy. The Home Office has published guidance which provides advice for local partnerships on how to deliver Channel projects and provides advice on the support that can be provided to safeguard those at risk.

<http://www.homeoffice.gov.uk/publications/counter-terrorism/prevent/channel-guidance?view=Standard&pubID=1077165>

2.2.11 Transfer protocol between the London Borough of Haringey and the London Borough of Islington for individuals with a complex learning disability or mental health issue, or both

In January 2012, the Deputy Director of Adult & Community Services initiated a transfer protocol for the safe transition of adults with a complex learning disability or mental health issue from Islington to Haringey, as most people are transferred in that direction and not from Haringey to Islington. The Deputy Director met with her counterpart in Islington; a protocol was subsequently completed in March 2012 and formally launched by the two boroughs.

The Protocol helps to further safeguard a vulnerable person's needs if they are placed in a home in Haringey from the London Borough of Islington. When a vulnerable person from Islington, with a complex learning disability, mental health need, or both, is placed in a Haringey home, this protocol provides a checklist to ensure a person's new home has all the details they need about them and that they are registered with a GP who has all the necessary information about them.

3. Safeguarding Adults Board Sub-Groups

3.1 Review of SAB's Sub-groups

2011-2012 saw a review of the work of **SAB's sub-groups**. In April 2011, as part of the consolidation of the membership, the SAB asked for each sub-group's terms of reference to be reviewed. Following this, the SAB made the decision that sub-group work would proceed on the basis of having specific sub-groups, such as training, as well as additional task and finish sub-groups to look at specific items. Examples of task and finish sub-groups are the Rogue Traders sub-group and the Carer's sub-group. The SAB also made the decision to set up a Prevention sub-group, the groundwork for which was completed at the end of the year.

The SAB has a Serious Case Review (SCR) sub-group which meets as and when required.

3.1.1 Training and Workforce Development Sub-group

The Training and Workforce Development sub-group re-formed in 2011-2012 with new terms of reference. Over three meetings, its focus was on bringing together partner agencies, particularly in health and social care. This allowed sharing of information about provision of safeguarding training. The agreement reached was that each agency would provide basic training with additional training provided by the local authority to cover safeguarding investigations. Further meetings took place with neighbouring local authorities to assess how each of them worked and to explore possibilities for joint training work. An example of this was the provision of financial abuse training in a joint Haringey and Enfield partnership.

Work to explore the introduction of the Bournemouth University **safeguarding adults' competencies** began. This scheme categorises staff into a number of distinct groupings for training purposes and sets out which of the competencies each grouping should complete.

Haringey Council has a successful and easily accessible online training scheme in partnership with Learning Pool for the provision of safeguarding, DoLS, Mental Capacity ACT (MCA) and other training. It can be accessed by council staff as well as external staff and partner agencies through the Learning Pool website.

3.1.2 Rogue Traders Task and Finish Sub-group

Haringey Council Trading Standards Officers have been active SAB members for the past few years. They have been able to offer advice and practical help for adults at risk affected by doorstep crime and other abuse coming into the category of rogue traders. During 2011-2012 the trading standards lead officer worked with the police to produce information about local rogue traders and set up a system for trading standards to respond to incidents.

3.1.3 Carers Task and Finish Sub-group

In July 2011, the Association of Directors of Adult Social Services (ADASS) produced a report about carers and safeguarding, "*Carers and Safeguarding Adults – Working Together to Improve Outcomes*" <http://www.adass.org.uk/images/stories/Policy%20Networks/Carers/Carers%20and%20safeguarding%20document%20June%202011.pdf>.

This sets out the difficulties for carers in raising safeguarding referrals and at the same time being at risk of abuse themselves. The ADASS report asked for local SABs to take action to address these issues. **Haringey's** SAB agreed that a task and finish Carers sub-group should be established to carry out a piece of work engaging with Carers groups and providing them with accessible information. An interim progress report was presented at the SAB and a meeting with Carers held in March 2012. Action points for future work with carers were agreed and an information session was held during Carers week in June 2012.

3.1.4 Multi-Agency Safeguarding Hub (MASH)

The Haringey Multi-Agency Safeguarding Hub (MASH) was designed, planned and brought into operation during 2011-2012. A project team was set up in the summer of 2011 and the MASH became fully operational in February 2012. Staff from the Safeguarding Adults Team are involved in the MASH as are other SAB partner agencies.

Primarily a children's oriented service, MASH brings together representatives of key local agencies. The aims are to provide a confidential and secure setting where agencies can share information about children so that an informed decision about intervention can be made. This can substantially speed up decision making by having relevant information shared at the initial stage. In addition, it allows the police to share information quickly and securely.

The MASH is staffed with professionals from a range of agencies including:

- children's social care
- adult social care
- police
- health and probation

Where additional information is required to ensure that a child is safe, MASH staff will share information. Based on the information gathered, MASH staff decide on what appropriate action needs to take place - whether it be a social work assessment, referral to early help services, or no further action.

<http://www.haringey.gov.uk/index/children-families/childrensocialcare/childprotection/mash.htm>

3.1.5 Safeguarding Adults Members Panel

The Haringey Safeguarding Adults' Members Panel was set up in October 2010. It consists of three elected Haringey Council Members who act as the monitoring arm of safeguarding adults work. The panel was set up to provide scrutiny of the functioning of Adult Safeguarding issues in Adult Services and its partner agencies as they function in Haringey, and to give some reassurance to Members who are collectively responsible for the safeguarding of adults at risk in Haringey.

The panel meets bi-monthly and is chaired by one of the councillors. The panel has an annual programme of work focusing on aspects of safeguarding and panel members have the opportunity to look at safeguarding performance reports as well as the Business Plan. During 2011-2012 the panel considered personalisation, commissioning and DoLS work.

3.2 Case examples - substantiated outcomes from referrals

The following case examples are from substantiated or partially substantiated safeguarding referrals in 2011-2012. All names have been anonymised.

- 3.2.1** Financial abuse was a common type of abuse and featured in a number of substantiated referrals. For example, Mr A was an elderly man living alone and receiving home care from a private agency. Over a number of months his care worker was stealing from him by helping himself to money whilst carrying out the weekly shopping. The matter came to light when a council employee visited to carry out a financial assessment and was shown a bank statement. Mr A had not noticed that his money was dwindling. A safeguarding referral was made, the money was safeguarded at the bank, a police investigation was launched and the care worker was suspended. Fortunately, Mr A was patient and assisted the police with their work which involved two trips to the police station. **Eventually, with the involvement of the council's legal team, a prosecution was brought, the care worker was convicted and imprisoned and a claim for compensation was made for Mr A with his bank. Not all of the stolen money had been returned to Mr A.**
- 3.2.2** Another financial abuse referral illustrates the importance of the wide network of people in the lives of an adult at risk. Each person in the network can act as a means of monitoring and checking that the adult at risk is well. In the case of Mrs B, a family member had been stealing money from her. This came to light when a local newsagent became suspicious about a newspaper bill which had not been paid by the family member. The newsagent asked other family members some questions and this led to an investigation again involving the police.
- 3.2.3** Mrs C is another example demonstrating what happens when agencies work well together. She was a resident in a sheltered housing scheme who was being financially abused by her son. He was living with Mrs C and at the same time exhibiting anti-social behaviour and upsetting other tenants in the scheme. A multi-agency safeguarding meeting led to an injunction being served on the son, a new assessment for Mrs C and the involvement of the police Safer Neighbourhood Team to monitor the situation.
- 3.2.4** Mrs D also lived in a sheltered housing scheme. The warden raised a safeguarding referral after **noting that Mrs D's carer did not stay for the**

full amount of time on a number of occasions. This led to the home care agency investigating and finding that the care worker was not staying for the required time at a number of service users' homes. Mrs D's care worker was changed and the care worker was disciplined and re-trained.

- 3.2.5** Abuse in care homes featured in an increased number of safeguarding referrals. A number demonstrate vigilance by the care home in identifying and reporting incidents of abuse. In the case of Mr E, the care home took rapid action after it was discovered that money had been stolen from him by a member of staff. That resulted in police action and the dismissal of the care worker. Other referrals were made after discoveries of abuse during visits from council staff or friends and relations. In one referral a resident (Mr F) had money that was not being properly accounted for by the care home. This led to a review and a mental capacity assessment for Mr F, followed by involvement of the IMCA service. Mr F then received help with managing his money and a regularisation of how his money was looked after.

4. Safeguarding Adults Data

- 4.1 In April 2011 there was a change in the way we respond to safeguarding alerts. Previously, all safeguarding alerts went directly to the Safeguarding Adults Team after initial reception in the Integrated Access Team. This had led to a large amount of work for a small team especially as a large number of safeguarding alerts did not proceed to an investigation.

From April 2011 it has been the responsibility of the Integrated Access Team (IAT) to look at all safeguarding alerts in the first instance. They do not pass on those where they can establish there is no safeguarding **adults'** content. In many instances, they will seek advice from the safeguarding team and will refer on if there is any doubt. This has meant that, in 2011-2012, 960 safeguarding alerts were raised, only 470 of which were passed to the Safeguarding Adults Team for further screening and investigation.

The data presented below is based on the 470 alerts that were passed to the Safeguarding Adults Team for further screening and investigation.

The number of alerts in 2011-2012

The total numbers of safeguarding alerts received were as follows:

Female	555
Male	405
Total	960

Of those sent to the Safeguarding Adults Team:

Female	270
Male	200
Total	470

The table below reflects the number of Safeguarding referrals which were investigated by the Adult Protection Team during the 2011/12 financial year. The number of safeguarding referrals closed in 2011-12, relates to the number of safeguarding cases which were closed during the aforementioned year, regardless of when the referral was raised. This accounts for the greater number of cases closed (510) than referrals raised (470) in 2011/12. Of the **470 raised 3 were categorised as "unknown," and are therefore not represented within the graphs 4.2 below.**

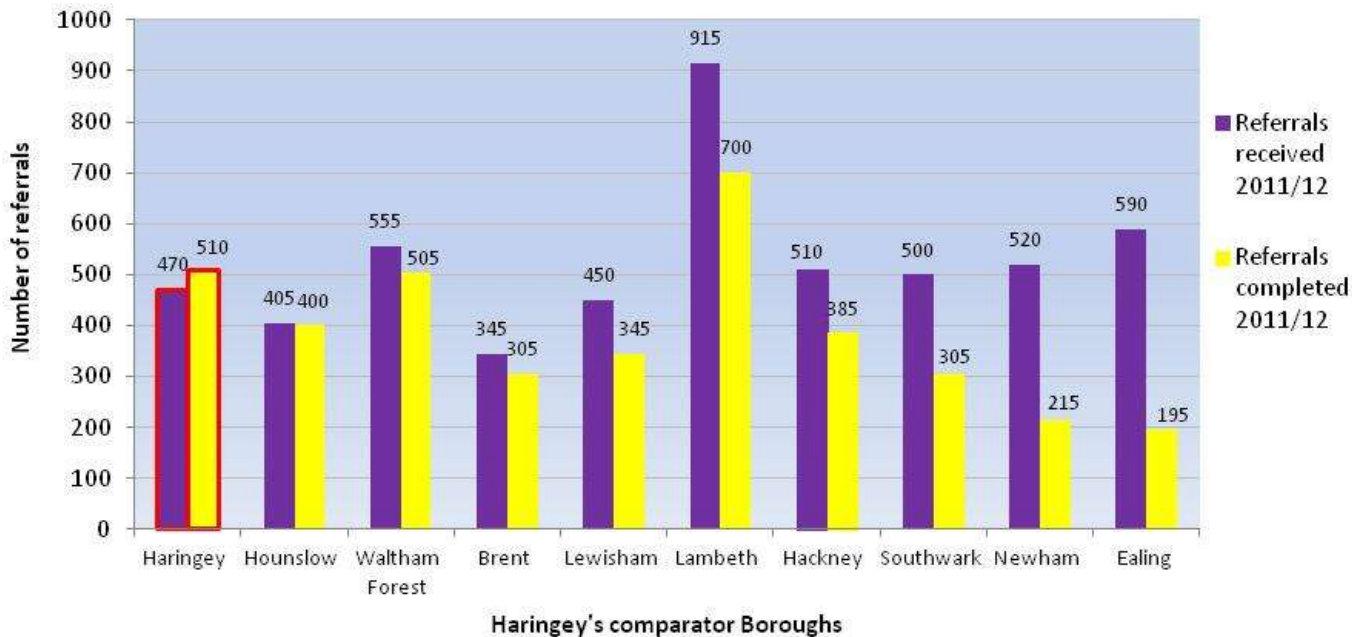
AVA Table 1 - Number of alerts, referrals, repeat referrals and completed referrals by age, primary client group and gender of alleged victim.

Source: NASCIS benchmarking tool (<https://www.icweb.nhs.uk>)

Haringey's Comparator Boroughs	Referrals received 2011/12	Referral completed 2011/12*	Percentage completed against the number of referrals received
Haringey	470	510	108.5%
Hounslow	405	400	98.8%
Waltham Forest	555	505	91.0%
Brent	345	305	88.4%
Lewisham	450	345	76.7%
Lambeth	915	700	76.5%
Hackney	510	385	75.5%
Southwark	500	305	61.0%
Newham	520	215	41.3%
Ealing	590	195	33.1%

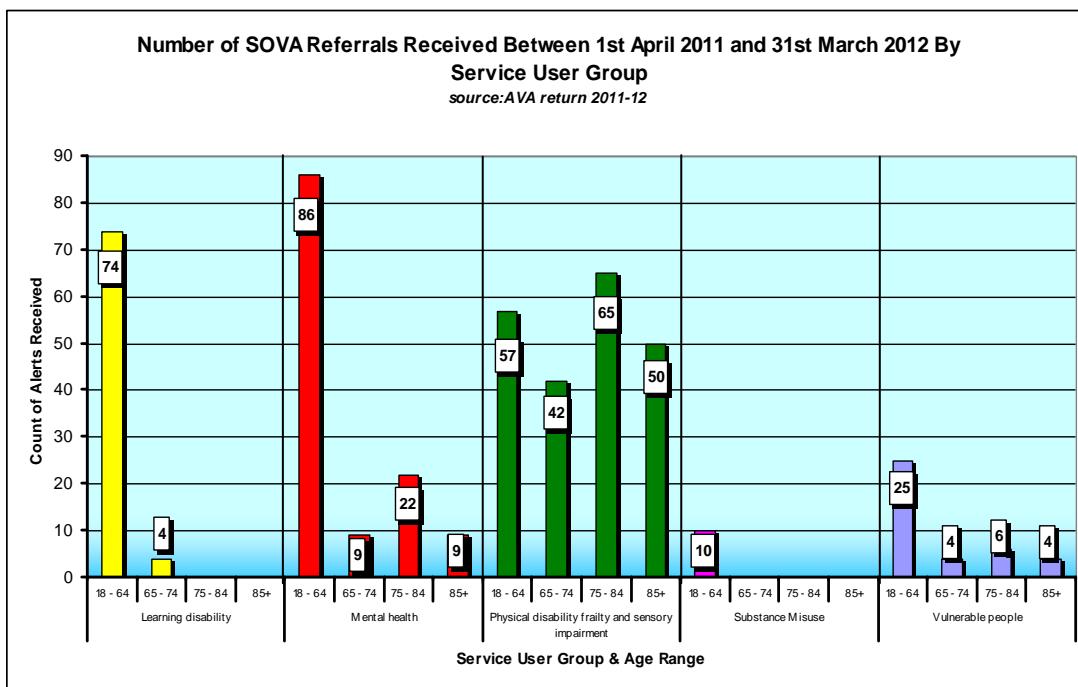
*Please note that the 2011/12 outturns are subject to validation and figures may change as a result.

Table 1A - Number of referrals received in 2011/12



4.2 People affected

The group with the highest number of safeguarding referrals is for those with Mental Health issues aged between 18 to 64. There were 86 referrals during 2011/12. The highest number of safeguarding referrals for people aged over 65 were for people with Physical Disabilities. There were 157 referrals during 2011/12.



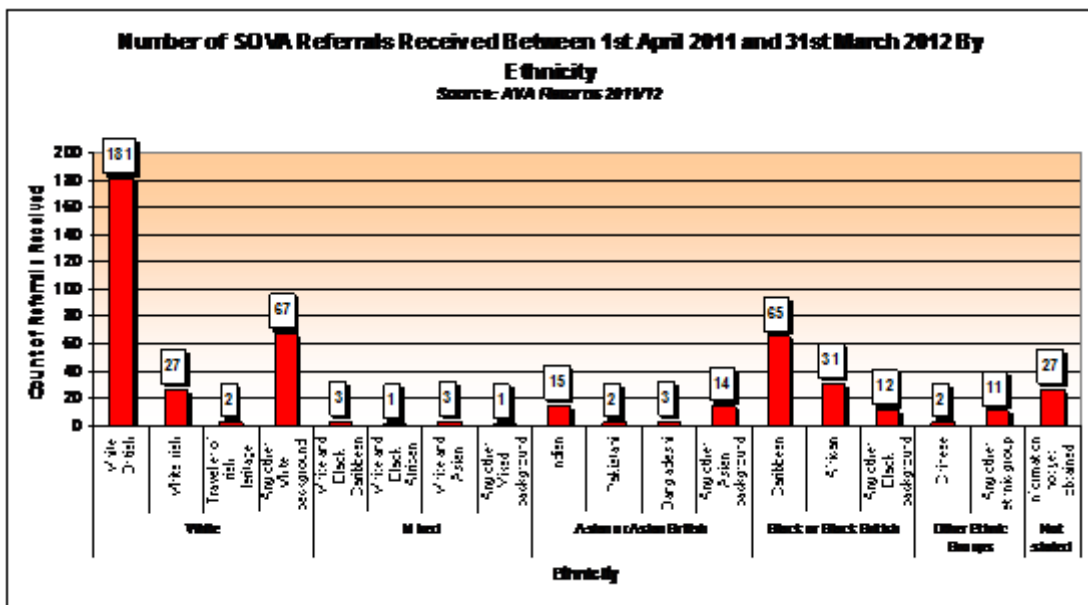
Categories are set by the Department of Health (DH)

Ethnicity

The group with the highest number of safeguarding referrals were for White British, referring 181 of the 467 raised; which represents 38.76% of the total referrals. However, the numbers are lower than the Haringey overall White British percentage which is 51.3% of Haringey’s population. 2011-2012 has seen a rise in the percentage of the Other White Background group. This has risen to 14.35% from 10.22% against 11.9% of Haringey’s population.

The Black Caribbean group remains over represented in safeguarding adults referral figures. That is despite a fall in percentage terms in 2011-2012 from 17.62% to 13.92%. The overall Haringey percentage for Black Caribbean is 6.6%.

Other BME groups are more likely to be under represented in terms of safeguarding adults referrals. For example, even though referrals for the Black African group has risen in 2011-2012 from 4.90% to 6.64% the numbers are still below that of the overall Haringey Black African percentage of 8.1%. Similarly, the figures for the Indian group show a slight rise but they are still beneath that of the overall Indian Haringey figure of 4%. The story is the same for the Chinese group. Other Asian groups have very small numbers of referrals and do not feature in the table above. However, there is work to be done with local BME groups to make sure that referrals are made when required and to address the overrepresentation in the Black Caribbean group.

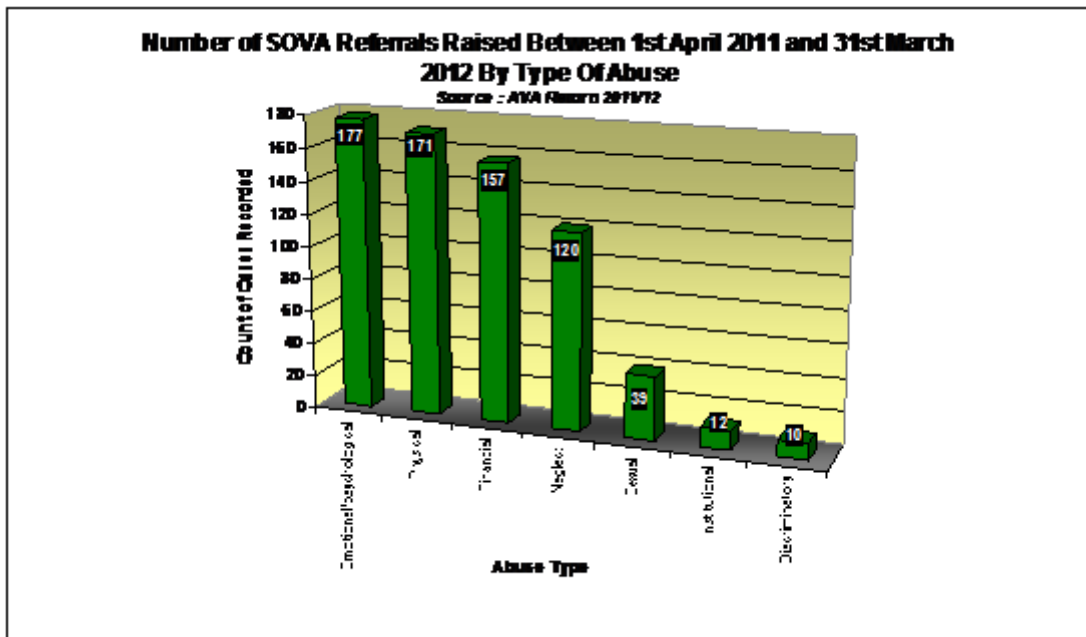


Categories are set by the Department of Health (DH)

4.3 Type of abuse

In 2011-2012 the majority of safeguarding referrals raised reported Emotional & Psychological abuse, with 177 cases reported. There were also 171 cases of Physical abuse reported within the same financial year.

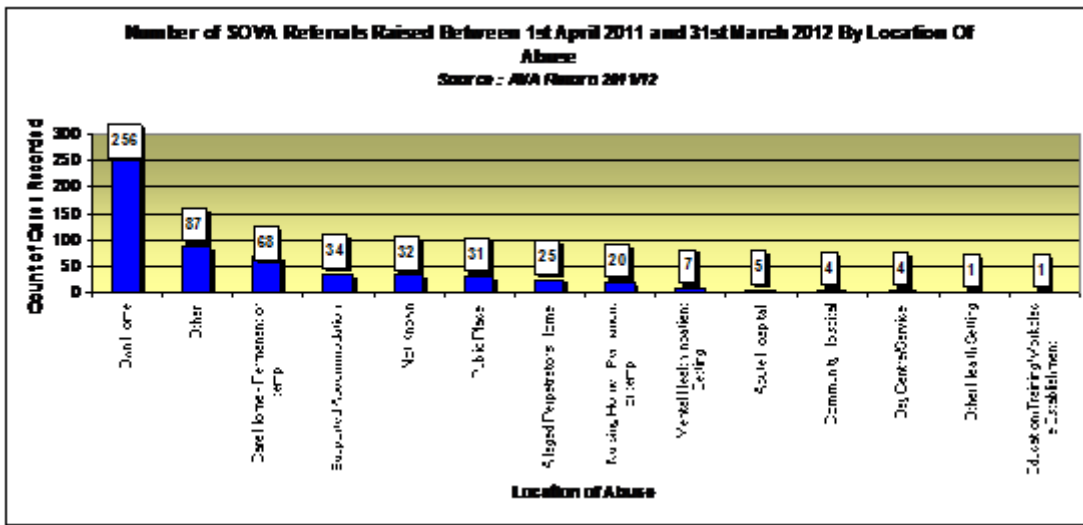
There was a distinct change from 2010/11, where the most common form of abuse recorded was for neglect. This has fallen from the highest form of abuse recorded in 2010/12, to the fourth highest form of abuse recorded in 2011/12.



Categories are set by the Department of Health (DH)

4.4 Place of abuse

Again, as in previous years, the most common place where abuse has occurred is in the vulnerable adult's own home. There was an increase in the number of referrals which identified the location of abuse as a residential care home, from 56 cases recorded in 2010/11 to 68 cases recorded in 2011/12. This reflects a greater emphasis on reporting abuse from care homes and a higher focus on monitoring of care homes following the Winterbourne View Hospital BBC Panorama programme in May 2011.



Categories are set by the Department of Health (DH)

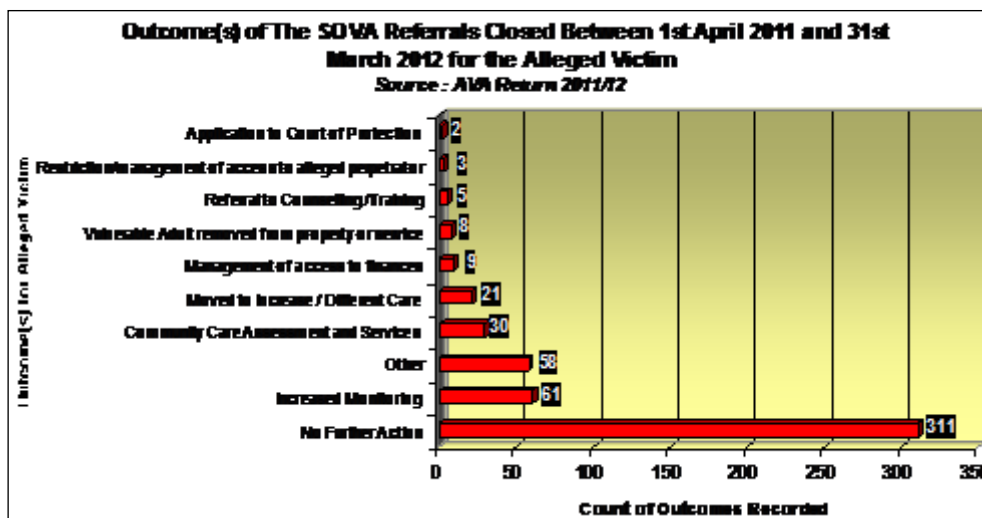
4.5 Safeguarding outcomes

The table below provides details of the 502 referrals that have been closed.

Substantiated	34	6.8%
Partially substantiated	43	8.6%
Not substantiated	328	65.3%
Inconclusive	97	19.3%

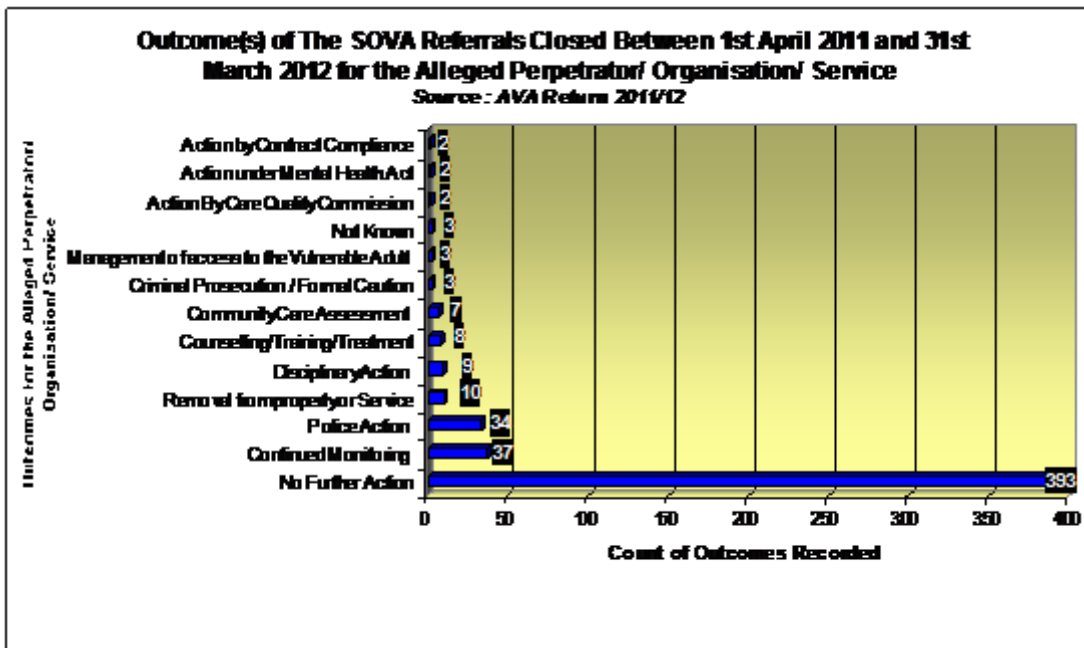
4.6 Actions taken to help the adult at risk

The graph below details the outcomes of the alleged victims for cases closed during 2011/12, as a result of the safeguarding investigation/intervention. The high number of cases concluded as having “no further action”, is consistent with the 328 referrals which were not substantiated.



4.7 [Action for the perpetrator](#)

Similar to the outcomes chosen for the alleged victims for cases closed during 2011/12, the high number of cases concluded as having “no further action”, is consistent with the 328 referrals which were not substantiated. Police action and continued monitoring were the most common forms of action taken against the alleged perpetrator/organisation/ service during 2011/12



5. SAB Business Plan Objectives for 2012/2013

- There is a SAB overarching safeguarding adults strategy
- SAB involves effective multi-agency working with partner agencies working collaboratively
- Provide well connected safeguarding services that make links between adults **and children's safeguarding services**
- Further enhanced work with service users and carers in safeguarding work through provision of information and strategies to assist people protecting themselves
- The local DOLS system provides assurance that DOLS works effectively and sensitively locally
- The SAB and local **safeguarding adults' arrangements are subject to the scrutiny of a safeguarding panel made up of local elected representatives.**
- Produce an annual report of adult safeguarding activity and make available on the **council's website.**
- Each SAB sub-group provides a regular report to the SAB as well as an annual report
- SAB information links to other council documents including the local authority Local Account and the JSNA.
- Provide an effective local safeguarding service.
- Have agreed ways of working together to respond to domestic violence that affects adults at risk.
- There is an agreed strategy for responding to Hate Crime as it affects adults at risk.
- The MASH is an integral part of local safeguarding arrangements
- The SAB monitors quality outcomes and performance data to continuously improve practice.
- Have a local safeguarding prevention strategy including a prevention sub-group.
- Safeguarding data is analysed to identify prevention trends and to inform the SAB prevention work.
- There is an effective workforce development programme in place with partner agencies working jointly on workforce development
- Training and workforce development events are provided locally periodically throughout the year.
- Information about safeguarding adults is provided to local individuals and groups in a variety of formats
- The Haringey Council website provides up-to-date and relevant information to staff and the public about safeguarding adults matters.
- There is capacity for local campaigns on safeguarding adults matters aiming at providing information and helping people to protect themselves.

1. London Fire Brigade

Internal safeguarding adults' governance arrangements. This can include safeguarding boards, committees, key posts, named individuals and other arrangements such as monitoring and reporting arrangements.

London Fire brigade have issued an internal policy concerning 'Safeguarding Adults at Risk' (a copy can be supplied upon request)

As part of our statutory duties our staff come into regular contact with a wide range of people including adults who may be at risk.

The policy details reporting procedures both internally and with the Police or other agencies. All safeguarding concerns must be reported to the Officer of the Day (OOD) within 4 hours if there is an immediate risk, and within 24 hours for all other concerns. Responsibility for referral to the local Social Services Department lies with the Duty Deputy Assistant Commissioner.

In addition, in order to comply with the Vetting and Barring scheme, our staff who work in roles which involve working with children or adults at risk in a regulated activity are subject to a CRB check at enhanced level.

Safeguarding adults work undertaken and achievements in 2011-2012. To include specific examples of work undertaken.

Through Community Fire Safety work our crews in Haringey have made two referrals to Social Services. In addition following a fire in Gorlesden Rd, N15 we made contact with safeguarding adult practitioners for a gentleman whose home showed evidence of hoarding.

Hoarding is an increasing area for concern for our organisation in terms of fire safety and escape from premises.

Safeguarding adults work planned for 2012-2013

As the new Borough Commander for Haringey I will be ensuring that this area of our work receives the necessary investment of time and resources in order to significantly reduce the risk to vulnerable adults in Haringey.

Internally, I will be ensuring that all personnel undertake the required training and understand their role and responsibilities.

Externally, I will be working closely with our partners raising awareness of fire safety and its impact for vulnerable adults, particularly the risks associated with hoarding behaviour and inappropriate sleeping accommodation.

Details of internal arrangements for providing staff (and others) with safeguarding adults training.

All staff have undertaken training and instruction in the requirements stipulated under LFB 'Safeguarding Adults at Risk' policy. Refresher training is now planned for all personnel due to be completed by the end of October 2012.

SPENCER ALDEN-SMITH

BOROUGH COMMANDER

2. NHS North Central London (Haringey)

Internal safeguarding adults' governance arrangements. This can include safeguarding boards, committees, key posts, named individuals and other arrangements such as monitoring and reporting arrangements.

The Haringey safeguarding adults lead currently sits within the role of the Head of Adult Commissioning with dual reporting lines to NHS North Central London (Haringey) Borough Director and NHS North Central London Executive Lead for Safeguarding Adults.

Reports on safeguarding adult matters are provided to the NHS North Central London Quality and Safety Committee quarterly with more frequent papers being presented as required.

Safeguarding adults work undertaken and achievements in 2011-2012. To include specific examples of work undertaken.

Nursing Homes working group

Following on from the initial meeting held on 29 June 2012 with key stakeholders a further meeting was arranged for October 2012. The aim is to agree key priorities and to draw up a realistic plan during this period of transition, and to propose a longer term plan that can be adopted by the Clinical Commissioning Groups (CCGs). One of the family carers who attended a Patient Story session at the last Quality and Safety Committee meeting in July has agreed to be the patient representative on this working group.

Learning Disabilities Self Assessment Assurance Framework

This was completed for NHS London in 2011.

Safeguarding adults work planned for 2012-2013

Safeguarding Adults Post

A full time safeguarding adults post has been agreed by Haringey Clinical Commissioning Group. Recruitment will commence in the autumn of 2012. This role will provide strategic and operational oversight of safeguarding adult's issues within NHS North Central London (Haringey) until 31 March 2013 and will move to Haringey Clinical Commissioning Group when this becomes a legal entity on 1 April 2013.

Safeguarding Adults Self Assessment and Assurance Framework

NHS London is requiring all health providers across London to complete a self-assessment and assurance framework which has now been completed. NHS

providers and commissioners are expected to work closely with their local SAB and for the SAB to validate the assessment.

Mental Health Complex Care Pathway Plan

NHS Barnet, Enfield and Haringey Mental Health commissioners have been developing care pathways which ensure clients with complex mental health needs receive quality services which are local, cost effective, personalised and which help early recovery. Support for individuals in regaining and maintaining good mental health and well-being should be offered in the least restrictive settings possible.

Nursing Homes working group

To continue to develop a proactive approach to quality assuring care within care homes and an early warning system if concerns arise.

Details of internal arrangements for providing staff (and others) with safeguarding adults training.

Safeguarding adults training is a mandatory requirement for all employees of NHS North Central London. The content of the training is dependent on job/role. A rolling programme of delivering training to all General Practitioners (GPs) is underway with a number of sessions delivered so far. This commitment regarding training will continue with Haringey Clinical Commissioning Group from April 2013.

Karen Baggaley – Acting Safeguarding Adults Lead

NHS North Central London (Haringey)

3. North Middlesex University Hospital NHS Trust

Internal safeguarding adults' governance arrangements. This can include safeguarding boards, committees, key posts, named individuals and other arrangements such as monitoring and reporting arrangements.

Comprehensive structure in place to ensure the legal and professional safeguarding and protection responsibilities are undertaken for adults potentially at risk. North Middlesex University Hospital (NMUH) has its own Safeguarding of Adults at Risk committee. Governance arrangements are that the committee reports to the Chief Executive through the Executive Management Board, the Patient Safety Board and Patient Safety & Quality Committee. There is active participation in both Haringey and Enfield SABs.

Safeguarding adults work undertaken and achievements in 2011-2012. To include specific examples of work undertaken.

Visit from Independent Chair of Enfield SAB – it was recognised how well the Trust works with its partners. It was also recognised that the processes work with the Trust and that work with partners was cohesive and promoted the safety of adults at risk.

There is an established Board which has the purpose to provide strategic direction to safeguarding activities across the Trust. The group operates within the London Multi-Agency guidelines.

Voiceability, which provides an IMCA service, has joined the group.

Governance arrangements are robust. There has been further integration for the benefit of patients with learning disabilities and patients with dementia. The Dementia Board meets monthly.

Self-neglect is identified as an area that may present and this is initially captured through inter-professional and multi-agency team meetings.

There is a well established End of Life Care inter-professional multi-agency group.

There is an action plan, *“Standards for Organisation Working with Adults at Risk”*, which enables the Trust to introduce, embed and audit adult safeguarding standards.

The Trust produced a comprehensive action plan which covered nine elements. This was agreed through the Trust Safeguarding of Adults at Risk committee and submitted to the Enfield SAB.

Safeguarding adults work planned for 2012-2013

To ensure that the Trust Safeguarding Adults at Risk strategy continues to remain within the current and future pan London procedures, and that all subsequent and inter related Trust policies embrace this format.

To maintain and develop training for all staff across the Trust covering all required areas to ensure compliance with our targets and to ensure that our services are fit for purpose whilst ensuring that retraining occurs in a purposeful cycle.

To continue to work collaboratively with our multi-agency and inter professional groups to ensure that our patents are protected.

To continue to improve our responses to reports of abuse in order that investigations can be clearly undertaken timely with our partners.

To make it easier for people to report abuse and make sure they receive a good quality service when they do. To assist adults at risk to recognise and prevent abuse and to put them in touch with a range of support services, including places where they can be safe from harm.

To be prepared to further scrutinise and interpret into practical actions following the publication of the final Mid Staffordshire report which is expected later this year.

Details of internal arrangements for providing staff (and others) with safeguarding adults training.

The Trust has continued to develop training for all staff in conjunction with Enfield Social Services who provide our level 3 training. The training needs analysis clearly identified the three levels of training required, depending on staff roles and patient contact. This training will continue to be delivered by the Trust and also by our host, LB Enfield. We have identified that there is further development work in relation to a training plan for safeguarding adults and areas will be targeted to have updates in safeguarding adults at all levels. We continue to train staff through face-to-face and e-learning packages. During this year the Trust training compliance figures have increased significantly and we will maintain our training cycle to ensure that this can be maintained. The level 2 training includes Deprivation of Liberty Safeguards and the Mental Capacity Act. These figures are presented to the Patient Safety and Quality Board on a quarterly basis. The Trust continues to participate in the Enfield and Haringey SAB training sub-groups. This ensures that we are able to access training and remain compliant with learning outcomes.

Philip Bircham, Deputy Director of Nursing and Midwifery

North Middlesex University Hospital NHS Trust

4. Barnet, Enfield & Haringey Mental Health NHS Trust

Internal safeguarding adults' governance arrangements. This can include safeguarding boards, committees, key posts, named individuals and other arrangements such as monitoring and reporting arrangements.

Barnet, Enfield & Haringey Mental Health NHS Trust (BEHMHT) has a trustwide Safeguarding Adults Committee which meets bi-monthly. The committee allows reporting, discussion and decision making about internal and external matters **concerning safeguarding adults. The Trust's** Assistant Director for Safeguarding Adults represents the Trust at all three of the local authority SABs. A Trust safeguarding adults annual report is presented to the Governance and Risk Management Committee and the Trust Board.

Safeguarding adults work undertaken and achievements in 2011-2012. To include specific examples of work undertaken.

- There was a continued drive to make sure that people using BEHMHT services are safeguarded from abuse and that any reported abuse was responded to as per the London multi-agency safeguarding procedures, "Protecting Adults at Risk".
- A service user booklet was developed which provides information about abuse and how to report abuse. The booklet was distributed to all wards and teams.
- A BEHMHT self-assessment was carried out by the Assistant Director Safeguarding Adults using the Safeguarding Adults Assurance Framework. This allowed a benchmark against the standards.
- A balanced scorecard has been developed which will be used to report safeguarding activity to the Trust Board. Reports three times a year are planned.
- A safeguarding adults audit tool has been developed and is now on the Meridian computer system. This will enable team managers to audit one safeguarding case per month.
- The Trust has been carrying out compliance inspections on all inpatient units and community teams against the criteria in Outcome 7 (safeguarding) of the CQC's regulatory framework.
- Case file audits have been carried out.

Safeguarding adults work planned for 2012-2013

- Ensure that a planned programme of bespoke safeguarding adult training is undertaken and delivered to managers and staff in the Forensic Service.

- Ensure that training in domestic violence is delivered to staff in BEHMHT to raise awareness and gain further understanding of the referral process.
- As part of a quality measure team managers are to audit one case file per month on the Meridian system.
- Maintenance of the Trustwide safeguarding adults database.
- Review of the Trust self-assessment using the Safeguarding Adult Assurance Framework for healthcare services.
- To get regular reports to enable the tracking of incidences on the Datix system that have been reported as safeguarding cases.
- Further develop closer working with the Serious Incident and Complaints Manager to ensure the continued integration of the three processes at the time an incident occurs.
- A planned programme of compliance inspections against the criteria in Outcome 7 of the CQC Regulatory Framework to be carried out by the Practice Standards Leads.
- As part of the implementation of the Bournemouth Competency Tool, to ensure that the Trust has a system that gives consistency in the use of the tool.
- Continue to deliver level 1 safeguarding adult training as part of the mandatory training day.

Details of internal arrangements for providing staff (and others) with safeguarding adults training.

- The Trust Level 1 training slides have been updated to include the changes set out in the new London multi-agency safeguarding adults procedures.
- Level 1 safeguarding adults training continues to be offered as part of the mandatory training day and as of 28 February 2012 67 % of staff have been trained to level1.

Veronica Flood

Assistant Director Safeguarding Adults BEHMHT

5. Whittington Health

Internal safeguarding adults governance arrangements. This can include safeguarding boards, committees, key posts, named individuals and other arrangements such as monitoring and reporting arrangements.

- The Trust is represented at Borough Safeguarding Adult Boards by the Deputy Director of Nursing.
- The Trust has an Adult's at Risk Steering Committee which is a sub-committee of, and reports to the Quality Committee. It provides assurance to them on all matters relating to adults at risk. The lead nurse is the Prevent lead for the Trust, approved by the Department of Health to provide WRAP training.
- The Trust collates reports and evaluations from patients on a continual basis. Additionally, there is scrutiny of patient information following concerns and complaints by patients and their relatives.

Safeguarding adults work undertaken and achievements in 2011-2012. To include specific examples of work undertaken.

- The Trust has re-written the safeguarding adults policy following the Pan London Procedures publication. This links in with other protocols such as the information sharing protocol and the domestic violence protocol. The Lead nurse for safeguarding adults links in with the NCL, SHA, and DH to keep abreast of the safeguarding changes. The Chanel process of Prevent is an appendix to the policy.
- Provision of reporting to governance committees which indicates areas for patient experience and actions taken as a result, the reports identify themes for both areas; this information is to be used by the Patient Experience Group as part of the integration of feedback into service development.
- On complex cases involving mental capacity, best interests, mental disorder, consent/refusal/withdrawal of medical treatment, Deprivation of Liberty Safeguards, or the lawful use of restraint, the lead nurse conducts assessments, provides recommendations, and further training to staff. This also includes chairing best interest meetings in complex cases. Training on the MCA is provided by the lead nurse and site manager. 2012 stats: 11 main wards within the hospital with 248 nurses and health care assistants - 152 health care assistants and Nurses trained in MCA/ DOLS. Emergency Department and ITU, 40 nurses trained. Their numbers are not included in the 248.
- Mandatory training: This shows that adult safeguarding and child protection are joint top out of all mandatory training in the trust at 77%. There is a WRAP approved trainer who is rolling out training to the high-risk areas of emergency medicine, and learning disabilities.

Safeguarding adults work planned for 2012-2013

There is a work plan for 2012-2013 setting out objectives in the following areas. Strategic, operational, safeguarding adults, DOLS, pressure ulcers, domestic violence and Prevent. There are to be quarterly reviews of safeguarding alerts from local authorities and a safeguarding adults Dashboard is to be written. There are a number of training development objectives as well as a review of the pressure ulcer protocol. A domestic violence protocol is also to be written.

6. Metropolitan Police – Haringey Borough

Internal safeguarding adults governance arrangements. This can include safeguarding boards, committees, key posts, named individuals and other arrangements such as monitoring and reporting arrangements.

Haringey Police is involved in safeguarding work with both adults and children on a number of levels. The police manager of the Haringey Public Protection Desk is a member of the SAB; the police manager of the Community Safety Unit chairs the Haringey MARAC and is part of the Haringey Domestic Violence Partnership. **Haringey Police is also part of the Local Children’s Safeguarding Board and part of the Anti-Social Behaviour Partnership and Community Safety Board.** The police safer neighbourhood teams have been active in attending safeguarding adults strategy meetings and taking action to report and investigate allegations of abuse.

Safeguarding adults work undertaken and achievements in 2011-2012. To include specific examples of work undertaken.

- MASH is a police lead initiative and the development of the Haringey MASH has been a significant development within 2011-2012. It has brought agencies together and has been helpful in forging new contacts and communication between the police and Haringey Council’s **adult social care service**.
- Police representatives met with the Adults & Housing Director and senior managers to discuss safeguarding adults work.
- An additional meeting was held with safeguarding adults operational staff to explore reporting arrangements and how best to obtain feedback from the police in safeguarding adults referrals.
- Police representatives worked with Trading Standards officers in the rogue traders sub-group

Safeguarding adults work planned for 2012-2013

- Joint work with Haringey Council to agree a mechanism for safeguarding referrals and obtaining feedback from the police
- Continuing with the MASH work and exploring how to extend the MASH to adults at risk.
- Take an active part in the SAB and work to meet the objectives set out in the SAB business plan
- Continue to work in partnership with other agencies in the areas of Domestic Violence and Community safety.

Details of internal arrangements for providing staff (and others) with safeguarding adults training.

Police staff are provided with internal basic safeguarding adults training. Further training can be obtained from Haringey Council and that will be explored in 2012-2013.

DI M. Pilch, Metropolitan Police, Haringey Borough

Name of agency	LB Haringey – Children’s Directorate
Lead contact & contact details including tel. & email address	Marion Wheeler, Assistant Director, Children’s Directorate

Please detail your internal safeguarding adults governance arrangements. This can include safeguarding boards, committees, key posts, named individuals and other arrangements such as monitoring and reporting arrangements.

The Assistant Director, Children’s Directorate, is a member of the SAB and attends regularly. Equally, the Assistant Director, Adult Social care is a member of the Local Safeguarding Children’s Panel (LSCB). Outside of this there are meetings between Children’s and Adults Social Care Directorate’s to discuss arising issues. There are links between the directorates at other levels including work with the LSCB sub-groups and in areas such as transition to adult social care. The introduction of MASH in 2011-2012 has brought greater opportunities for communication. There are also links through the local domestic violence partnership.

Safeguarding adults work undertaken and achievements in 2011-2012. To include specific examples of work undertaken. You may wish to provide evidence with your statement.

The LSCB provides information for parents, families and professionals and has a dedicated website – www.haringeylscb.org.uk. There is specific guidance about parenting and guidance about mental health and learning disabilities issues. There is a link to the safeguarding adults site. Particular achievements in 2011-2012 are the production of highly regarded Serious Case Reviews as well as training which is accessible by adult social care staff and online. The LSCB sub-groups have worked to address relevant issues and there is a thriving set of sub-groups including quality assurance, Best Practice, Domestic Violence and Policy.

Safeguarding adults work planned for 2012-2013

A major piece of work planned that will run into 2012-2013 is the s11 review of local agencies against children’s safeguarding standards. Each partner, including adult social care, will be involved in the process of a self-assessment which will be followed up by site visits. A report with recommendations will be produced.

Please detail your internal arrangements for providing your staff (and others) with safeguarding adults training. You may wish to attach records or reports of training provided.

As described above, the LSCB provides a range of taught and online children’s related training. This is accessible for adult social care staff and is available through the LSCB website and training booking form. Haringey Council are also to provide safeguarding briefings throughout 2012-2013 for all council staff.

Martin Grant LLM, Lead Nurse for Safeguarding Adults, Whittington Health

Name of agency	Housing Services – Haringey Council
Lead contact & contact details including tel. & email address	Denise Gandy, Head of Housing Support and Options

Please detail your internal safeguarding adults governance arrangements. This can include safeguarding boards, committees, key posts, named individuals and other arrangements such as monitoring and reporting arrangements.

Haringey Council Housing Services is part of the Adults & Housing Directorate and as such is part of the same internal governance arrangements as the Adult Social Care service. There is a departmental management team lead by the Director, Mun Thong Phung. There is an internal Business Management Team responsible for ensuring that the directorate complies with all statutory and compliance requirements. There is a lead Cabinet Member who meets with senior managers on a regular basis. There is also additional councillor scrutiny of the work. The Head of Housing Support and Options is a member of the SAB.

Housing Services provide two key services that work with adults at risk and other vulnerable people in Haringey. The Hearthstone service is a key part of the local Domestic Violence Partnership providing advice, support and practical assistance for people experiencing domestic violence. The Vulnerable Adults Team provides a specialist housing advice service for vulnerable homeless people and those in housing need. This service is often a key resource for adults at risk. The Housing Related Support Team fund refuges for people experiencing domestic violence and supported housing for potentially vulnerable single person households in housing need and requiring support.

Safeguarding adults work undertaken and achievements in 2011-2012. To include specific examples of work undertaken. You may wish to provide evidence with your statement.

As described above, Housing staff play important roles in providing advice and support to people affected by domestic violence and in housing need. Hearthstone assisted 521 survivors of domestic violence and the Vulnerable Adults Team has assisted over 1,000 people.

Safeguarding adults work planned for 2012-2013

Update briefings for staff on safeguarding responsibilities.

Further enhancement of the Hearthstone Service to recognise the particular vulnerability of Eastern European women who are experiencing DV and have a language barrier

Please detail your internal arrangements for providing your staff (and others)

with safeguarding adults training. You may wish to attach records or reports of training provided.

Housing staff are eligible to take up the safeguarding adults training provided by Haringey Council. This includes the online safeguarding courses. Haringey Council are to provide safeguarding adults briefings for all staff during 2012-2013 and Housing staff will be able to take up this offer.

Completion of the e-learning module is a minimum requirement for all new Housing staff and frontline staff receive an additional briefing on safeguarding responsibilities for both Adults and Children.

National Developments

Appendix 2

The following are a selection of national safeguarding adults or related developments.

1. Domestic Homicide Reviews

Statutory guidance was issued by the Home Office under Section 9(3) of the Domestic Violence, Crime and Victims Act (2004) to support domestic homicide reviews. It introduced a duty upon local partners such as the police, local authority, probation service, health service and voluntary sector to establish a review in the event of a domestic homicide. These should be conducted to ensure lessons are learned when a person has been killed as a result of domestic violence.

2. The Association of Directors of Adults Social Services (ADASS) Safeguarding Adults: Advice Note

In April 2011 ADASS published a new advice note to support Directors of Adult Social Services in their leadership role regarding adult safeguarding. The framework has been developed by ADASS National Safeguarding Adults Policy Network. It makes the following recommendations for consideration by Directors of Adult Social Care Services:

- Develop or review the safeguarding strategy of the Board, embedding an outcomes focus throughout, and ensuring that procedures are **sufficiently sensitive to respond to people's choices**.
- Provide an annual report of the effectiveness of the Safeguarding Adult Board to all partner organisations and the public to assess the delivery of outcomes.
- Review risk enabling and risk management policies and practice to ensure that safeguarding and personalisation are addressed and people can weigh up the risks and benefits of their options.
- Develop a portfolio of responses to safeguarding situations that support positive outcomes.
- Review the Workforce Strategy to ensure it supports the workforce to be competent in safeguarding adults
- Share with partners locally and regionally, to support partner organisations and agencies to ensure that their own leadership of the safeguarding agenda is effective.
- Share with partner bodies at a national level, e.g. NHS Confederation and ACPO, to develop a partnership approach to safeguarding adults (ADASS to lead)

3. ADASS Carers and Safeguarding Adults – Working Together to Improve Outcomes.

Following the new principles set out within the vision for Adult Social Care, and the refreshed national strategy for carers ‘Recognised Valued and Supported’ ADASS published a report setting out seven key messages in relation to carers abusing those in their care and carers being abused by those that they care for.

The key messages include Leadership; Partnership; Empowerment; Prevention; Recognition & Reporting; Protection & Proportionality; Learning & Accountability.

4. Law Commission publishes Adult Social Care in May 2011

This reviews adult social care law in England and Wales and contains recommendations for reform. The Government committed to consider the conclusions of the report, with a view to introducing legislation in the second session of this Parliament. The report recommends a three level structure containing new statute, regulations and a code of practice. In relation to safeguarding adults it recommends to “safeguard adults wherever practicable from abuse and neglect; and to “use the least restrictive solution where it is necessary to interfere with the individual’s rights and freedom of action wherever that is practicable”.

5. Statement of Government Policy on Adult Safeguarding May 2011

This includes a statement of principles for use by Local Authority Social Services and housing, health, the Police and other agencies for both developing and assessing the effectiveness of their local safeguarding arrangements. It also introduces specific safeguarding outcome principles, which we are encouraged to use to develop our strategic action plan;

- Empowerment - Presumption of person led decisions and informed consent.
- Protection - Support and representation for those in greatest need.
- Prevention - It is better to take action before harm occurs.
- Proportionality – Proportionate and least intrusive response appropriate to the risk presented.
- Partnership - Local solutions through services working with their communities.
- Communities have a part to play in preventing, detecting and reporting neglect and abuse.
- Accountability - Accountability and transparency in delivering safeguarding

6. SCIE Report 41: Prevention in Adult Safeguarding May 2011

This report shares findings from research, policy and practice on prevention in adult safeguarding and presents a wide range of approaches that can help prevent abuse. Its key message is that effective prevention in safeguarding needs to be broadly defined and should include all social care user groups and service configurations. It does not mean being over-protective or risk-averse.

7. The Equality and Human Rights Commission: Hidden in Plain Sight: Inquiry into disability-related harassment

Report into disability harassment and its impact. Those serious cases which come to court and receive media attention are just tip of the iceberg. Disabled people often do not report harassment for a number of reasons. There is a systemic failure by public authorities to recognise the extent and impact and abuse of disabled people, take action to prevent it happening in the first place and intervene effectively when it does. There are key safeguarding sections in the report.

8. The Governance of adult safeguarding: findings from research into Safeguarding Adult Boards SCIE

This report was commissioned by the Department of Health. The report looks at how the boards have been structured, their membership and their strategic goals, vision and purpose.

9. Self-Neglect and adult Safeguarding: Findings from Research SCIE

This report comprised of a scoping study on the concept of self-neglect as defined in the literature and interpreted in adult safeguarding practice. The report draws on a systematic review of the literature, workshops with senior managers and practitioners in specialist safeguarding roles, a focus group with adult social care practitioners and interviews with key informants.

10. SCIE: Safeguarding adults at risk of harm: A legal guide for practitioners by Michael Mandelstam

This guide outlines the legal basis for the safeguarding of vulnerable adults at risk of harm in England. It is intended to give practitioners useful legal pointers but every case is different and should be taken on its own merits.

11. The Equality and Human Rights Commission: Close to Home: An Enquiry into Older People and Human Rights in Home Care

The Commission's inquiry into the home care system in England reveals disturbing evidence that the poor treatment of many older people is breaching their human rights and too many are struggling to voice their concerns about their care or be listened to about what kind of support they want.

SCIE: Assessment Financial Crimes Against Vulnerable Adults

This assessment, commissioned by the Association of Chief Police Officers (ACPO) Economic Crime Portfolio, has been produced to highlight the current and potential future threats to vulnerable adults in relation to economic crime.

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ⁱ Clinical Commissioning Groups (CCGs) will be statutory NHS bodies with a range of statutory duties similar in many respects to those of Primary Care Trusts (PCTs) CCGs become operational on 1 April 2013