Agenda Item No. 10



Health and Wellbeing Board

5 November 2014

Report title Safeguarding Adults' Board Report 2013-14

Report of the Independent Chair

Cabinet member with lead

responsibility

Councillor S Evans

Adults

Wards affected

ΑII

Accountable director

Sarah Norman, Community

Originating service

Adults' Safeguarding

Report to be/has been

considered by

Wolverhampton Safeguarding Adults

12 June 2014

Board

11 September 2014

Recommendation(s) for action or decision:

The Health and Wellbeing Board is recommended to:

- 1. Provide assurance to Wolverhampton Safeguarding Adults Board that the respective agencies represented on the Health and Wellbeing Committee report annually to their respective boards on children's safeguarding;
- 2. Ensure all agencies represented at the Board have internal assurance mechanisms that can demonstrate their role and performance in relation to safeguarding arrangements for adults at risk.
- 3. That Board members representing the key agencies mentioned in Statutory Guidance dated October 23 2014 agree to ensure that the new statutory Board is in place and properly constituted and funded by 1 April 2015
- 4. To note the report

1.0 Purpose

- 1.1 The purpose of this report is to provide the Health and Wellbeing Board with a copy of the Wolverhampton Safeguarding Adult Board's (SAB) Annual Report and Executive Summary (**Appendix 1 & Appendix 2**), to inform the Board of safeguarding activity 2013/2014 and to present the Safeguarding Board with progress made against the priorities for 2013-16.
- 1.2 The report reminds members of the requirement for the Board to become a statutory body by 1 April 2015

2.0 Background

- 2.1 The Safeguarding Manager Adults is responsible for producing an Annual Report on behalf of the Wolverhampton Safeguarding Adults Board. The Annual Report contains contributions from the partner agencies who are members of the Board.
- 2.2 The report provides information regarding local safeguarding initiatives, the work and structure of the Safeguarding Board, progress against previous year priorities, partner achievements, and safeguarding data performance. An Executive Summary has also been produced, this summarises the key headlines from the full report and has been developed in recognition of the needs of the potential audience.
- 2.3 Each year a first draft of the Annual Report and Executive Summary is presented to the June Safeguarding Board and a final draft is presented at the September Board, once agreed it has previously then been presented to the Health and Wellbeing Board. Last year, it was agreed that the Annual Report would be presented to Adult and Community Scrutiny Panel prior to presentation to the Health and Wellbeing Board, thus enabling Members to familiarise themselves with the report contents and to provide opportunity for challenge.

3.0 Progress, options, discussion, etc.

3.1 The Annual Report reflects the complex and wide ranging agenda that the Board, its working groups and partner organisations have been working on throughout the year. The Board has started to make good progress in the first year against its 2013-2016 priorities:

Priority One - Better Outcomes

 Collecting better information from people who have been at risk and gathering information as to whether our intervention has made them feel safer.

Priority Two - Quality Assurance

- Review of both national and local serious case reviews were undertaken to identify key trends and themes and to identify key actions required.
- Set of performance measures agreed enabling the collation of safeguarding information from all partners on the Board and not just from the council.

Priority Three - Information Sharing

- A specific Safeguarding Adults Information Sharing Protocol has been developed, following consultation with Board members it is on track to be formerly adopted at September Board.
- Established Housing Providers Safeguarding forum across all social housing providers operating in Wolverhampton.

Priority Four- Prevention and early intervention

• An audit across partners is being undertaken to identify current prevention and early intervention provision across the city.

Priority Five – Communication and engagement

- Delivered safeguarding in faith sessions- listening to faith groups and learning how we can all keep vulnerable people safe.
- Delivered workshops on the changes to the Disclosure & Barring Service (DBS) to faith groups and small voluntary organisations.

Priority Six – Workforce Development

- The roles and responsibilities and lines of accountability of organisations are clear so that staff understand what is expected of them and others.
- 3.3 For each of the Board's Priorities there is a lead who is responsible for driving the priority forward, the leads are all Board members and they report regularly to the Board on both the progress made and challenges faced. The Priority Leads make up the Board's Executive Group.
- 3.4 The number of safeguarding alerts received increased significantly from 1172 in 2012/13 to 1,305 in 2013/14. This could be attributed to increased public awareness through activities organised by the Safeguarding Board and partner agencies and increased media coverage, particularly in the area of abuse in residential care settings. The Annual Report shows that the type of abuse with highest number of referrals is neglect and also provides a breakdown of safeguarding alerts by geographical Ward area for information.
- 3.5 For 2013/14 a new question was included in the safeguarding documentation to capture the expected outcomes of the adult at risk of harm and also whether the expected outcomes were achieved. The data shows that where the question was asked, the expectations of the adult at risk were fully achieved in 86%
- 3.6 Under the Care Act 2014 the safeguarding of adults is placed on a statutory footing from the 1 April next year. This brings it into line with the safeguarding children board. Final guidance was published on 23 October 2014. Much of it confirms what is already standard practice both locally and nationally. However work is underway to ensure current practice and processes reflect the guidance. The membership of all safeguarding adults' boards must include:
 - the local authority which set it up;
 - the CCG in the local authority's area; and
 - the chief officer of police in the local authority's area

The guidance provides a longer list of other potential members including representatives of the community and the voluntary sector as well as a range of other statutory agencies. It is recommended but it is not essential that each board has an independent chair.

4.0 Financial implications

- 4.1 The Care Act guidance states that: 'It is in all core partners' interests to have an effective SAB that is resourced adequately to carry out its functions.' The oversight of present safeguarding arrangements is underpinned by funding of £67039. The three main contributors are:
 - Wolverhampton Council £40889
 - West Midlands Police £11150
 - Wolverhampton CCG £15000

The West Midlands Police Force calculate their contribution on a regional formula. The level of support from the local authority and CCG is not underpinned by any specific calculation. As part of the work in preparation for becoming a statutory Board discussions are taking place to determine what support is required to deliver a safe service. This will include comparisons with our neighbouring safeguarding boards..

5.0 Legal implications

5.1 There are no direct legal implications arising from this report

6.0 Equalities implications

6.1 Safeguarding adults at risk is a concern for all communities. Improving public engagement – which includes raising public awareness about what safeguarding is and what people should do if they recognise it - is a joint priority for both the Safeguarding Children and the Safeguarding Adults' Boards. Work is currently underway to improve our links with all local communities both directly and also in part through improved links with faith groups.

7.0 Environmental implications

7.1 Comment briefly on the environmental implications of the report/proposals.

8.0 Human resources implications

8.1 There are no environmental implications arising from this report.

9.0 Corporate landlord implications

9.1 There are no corporate landlord implications arising from this report at this stage

10.0 Schedule of background papers

10.1 Department of Health: Care and Support Statutory Guidance – October 2014