

Leicestershire and Rutland Safeguarding Adults Board Business Development Plan 2017-18

Priority: SAB1 Prevention

Priority Statement: Develop a clear strategy for Prevention of harm to adults, including increasing the unacceptability of abuse across the community

Rationale:

Gap regarding Prevention Strategy identified by Care Act Compliance Self-Assessment

No single prevention strategy regarding adult safeguarding in place in or across Leicestershire & Rutland

Prevention is key in reducing harm and fear of harm, improving safety and quality of life

Development from community based work in previous years

Reduce demand on stretched services

Early intervention can reduce pressure on higher level, higher cost services (learning from Early Help work in Children's Services).

What do we want to be different?:

Clear Prevention Strategy in place for Board area OR safeguarding is clear within existing prevention strategies OR safeguarding elements of existing strategies are brought together (need to clarify this!!)

People feel safer in the community and in community based services

People understand pathways into care and support better

More vulnerable adults continue to be supported by Local Network – less requiring statutory svcs / intervention

Fewer people see abuse as acceptable

Notes – Need to strengthen links with Public Health.

Partnership Lead: Rutland County Council – John Morley

Board Officer: Sanj Pattani

Kov delivery mechanism:

Objective	What are we going to do?	When is it going to be done by?	Who is responsible?	How will we measure progress and impact?	Progress made	Impact / what difference did it make?
Prevention Strategy in place?	Develop a Prevention Strategy through a process of consultation with other strategic partnerships, leaders staff and service users	September 2017	Task and Finish Group (?)			
Prevention Strategy being implemented?	Undertake a service impact assessment to determine any changes to service delivery that may be required to adopt	December 2017				

	preventative approach Consider commissioning implications and communicate to Health and Well-Being Board and other commissioning bodies Secure assurance that appropriate commissioning strategies are in place to deliver preventive strategy			
Develop community resilience / responsibility / capacity?	Develop a community safeguarding strategy that includes awareness raising campaign to assure the Board there is robust recognition and reporting of risk	July 2017	Demand metrics Survey Measures	
Public awareness raising regarding adult safeguarding / warning signs of abuse / unacceptability of abuse	As above	July 2017	Campaigns	

Priority: SAB2 Making Safeguarding Personal

Priority Statement: Further embed Making Safeguarding Personal across the Partnership (include hidden harm)

Rationale:

- Developing culture, attitude, approaches
- Ensuring Voice of the person
- Ensuring Rights and choices
- Don't want to lose momentum
- Address hidden harm

What do we want to be different?:

- See the outcomes of person centred approach
- Evidence that principles of MSP are evident within multi-agency Safeguarding Adults practice

Partnership Lead: Leicestershire ASC – Laura Sanderson

Board Officer: Helen Pearson

Key delivery mechanism: LLR Multi-Agency Group

Objective	What are we going to do?	When is it going to be done by?	Who is responsible?	How will we measure progress and impact?	Progress made	Impact / what difference did it make?
Embed principles of MSP across multi-agency safeguarding practice	Awareness, training and service development strategy —already set out in the MSP plan	Check MSP plan	LLR Multi- Agency Group	Regular reporting to Joint LLR Executive and Board	The Executive on the 6 th March were	
Assess use of MSP in safeguarding	Audit programme	Quarterly	SEG	LA database 1 further multi-agency audit and peer review (City and County Local Authorities)	advised that the work of the LLR Task and Finish Group was	
Assess outcomes from implementing Making Safeguarding Personal	Agree quality assurance and performance management framework to test impact of MSP	May 2017	SEG	Quarterly reporting	coming to an end and that a MSP agency temperature check is undertaken. Further work becomes	

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Priority: SAB3 Thresholds

Priority Statement: Ensure adult safeguarding thresholds are understood and being utilised correctly

Rationale:

- Low conversion rates establish agencies where particular issues of 'over-reporting' prior to plan commencing
- Lack of alerts from (certain) professionals / organisations Need to establish particular agencies 'under-reporting' prior to plan commencing
- Look for more effective use of increasingly stretched resources
- · Lack of clarity on application of thresholds
- Needs multi-agency focus / joint work with City
- Confident that all providers understand and operate in line with thresholds.

What do we want to be different?:

Consistent applications of thresholds across all organisations

Better conversion rates

Assure thresholds working effectively – appropriate referrals

Thresholds are used as a tool for staff across agencies, rather than just in Social Care (e.g. as per Children's Services)

Partnership Lead: CCG – Jan Harrison Board Officer: Chris Tew

Key delivery mechanism:

Objective	What are we going to do?	When is it going to be done by?	Who is responsible?	How will we measure progress and impact?	Progress made	Impact / what difference did it make?
Assess potential for triage function in Adult Safeguarding (Not sure this is feasible for partnership?)	Consider the framework to test potential for development	July 2017	Policy and Procedures (?)			
Work with particular 'over- reporting' agencies to address this	Develop staff awareness, training and development programme within both individual agencies and collectively	March 2018				
Work with particular 'under- reporting' agencies to address this	Develop staff awareness, training and development programme within both individual agencies and collectively					

Clarify definition of terms regarding safeguarding between ASC and Health	Develop the appropriate documentation and consult with staff on this to secure ownership and understanding of purpose	September 2017	Policy and Procedures (?)		
Assure thresholds working effectively	Develop a quality assurance and performance management framework to test impact	May 2017	SEG	Conversion rates Alerts broken down by agency / sector Ask staff (SAAF?) Outcomes of SI audit	

Priority: SAB 4 Self-Neglect

Priority Statement: Develop a clear consistent response to self-neglect and safeguarding for front line workers

Rationale:

- Process across LLR (where self-neglect is safeguarding or not) is not clear
- Lack of consistency of approach
- Unclear levels of understanding of and application of legislation
- An issue that has a significant time impact upon all partner agencies
- Agencies feel that effectiveness of decision making could be improved across agencies

What do we want to be different?:

Assurance that we have:

- Clear LLR process of working with Self-Neglect
- LLR communication strategy including development of LLR Multi-Agency VARM

Partnership Lead: LPT – Rachel Bradley			Board Office	Board Officer: Gary Watts				
Key delivery mechanism:								
Objective	What are we going to do?	When is it going to be done by?	Who is responsible?	How will we measure progress and impact?	Progress made	Impact / what difference did it make?		
Secure clarity and consistency in policy, procedures and practice in relation to self-neglect	Develop clear self-neglect decision making process (across LLR) – VARM	May/June 2017	Priority Lead and Board Officer	Evidence of effective communication strategy across LLR that demonstrates VARM being embedded into practice of partner agencies By end of Q2, Board will need to be assured that awareness has been cascaded to appropriate agencies through briefings etc.				
Assurance of appropriate and effective response to self-neglect	Develop a quality assurance and performance management framework to test impact	Q1 for VARM data to commence Q3/Q4 for M/A Audit	Laura Sanderson	Count of cases going into VARM Multi-Agency audit (Q3/Q4 2017/18)				

