# **PEOPLE (CHILDREN) SCRUTINY PANEL**

# 12 July 2012

# JOINT ADULTS AND CHILDREN'S SAFEGUARDING REPORT

#### **Report of the Strategic Director for People**

STRATEGIC AIM:	Creating a Brighter Future for All
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#### 1. PURPOSE OF THE REPORT

1.1 This report is the regular directorate report on Safeguarding but now reflects an integrated focus on both Adults' and Children's Safeguarding in line with the national direction of travel in safeguarding and the management arrangements within the Directorate.

#### 2. **RECOMMENDATIONS**

#### 2.1 That Scrutiny Panel note the content of the report.

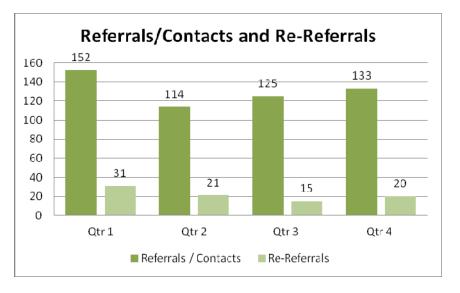
#### 3 BACKGROUND

- 3.1 To reflect an integrated model there has been significant developments within the multi -agency arena and within the Directorate. These include:
  - The appointment of an independent chair for the Adults and Children Safeguarding Boards (Paul Burnett).
  - Joining of the Business Support function hosted by Leicestershire County Council.
  - Joint sub groups for Serious Case Reviews and Safeguarding Effectiveness.
  - New adults safeguarding procedures for front line staff which will be incorporated into the web based procedural manual that children's services has had for several years.
  - Workshops for staff to launch these procedures with a view to raising awareness of safeguarding adults.
  - Induction training to ensure awareness about basic information about children and adult safeguarding and the alert process.
  - Significant training activity in relation to safeguarding adults and 67 staff have had the alerter training this year.

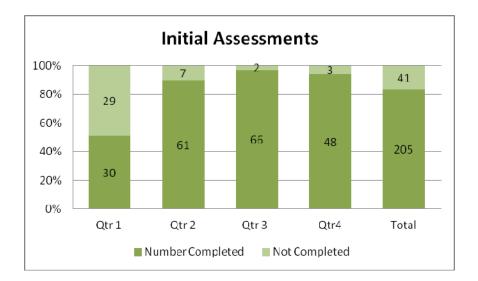
# 4 CHILDREN & YOUNG PEOPLE UPDATE

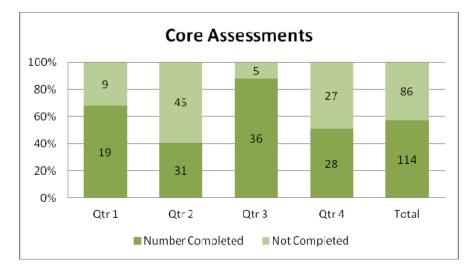
4.1 Performance in relation to children is good with targets being exceeded or met in most instances. Areas for priority focus are timely completion of core assessments and an on-going focus on re-referrals.

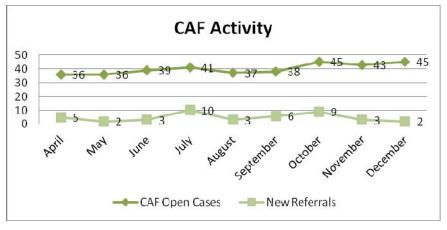
- 4.2 Numbers of referrals to children's social care remains steady and the total number of contacts and referrals since 01 04 11 is 524. At the end of March, Team 11 and 12 had 241 referrals open which is a 21% increase from last year.
- 4.3 The re-referral rate is currently at 27%. Analysis about and the reasons for rereferrals have revealed that these are linked to changes in families resulting in the need for further support after initial interventions. There is also a need to make better use of Common Assessment Framework (CAF) services after social care interventions.
- 4.4 The timeliness of initial assessment is 80% within 10 days and for core assessments 57% have been completed within 35 days. A cluster of factors have contributed to the performance in relation to core assessments including staff sickness and competing priorities such as the need to prioritise the completion of court documents. The achievement of more timely core assessments is a priority for 2012/13 through a more focussed approach to performance management at all levels.
- 4.5 Numbers of children looked after (30) and children subject to a child protection plan (15) have remained steady.
- 4.6 Looked after children reviews and child protection conferences continue to be held within timescale although there was an initial conference held out of timescale because of the parent's ill health.

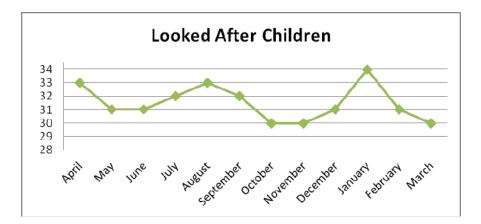


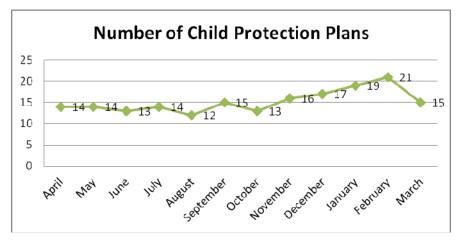
# 5 2011/12 CHILDREN DATA











# 6 ADULT UPDATE

- 6.1 Local guidance on the management of Adult Safeguarding cases has recently been developed to support RCC staff and the implementation of the existing Multi-Agency Safeguarding Adult Policy and Procedures. Briefing workshops have been provided for Social Care staff.
- 6.2 From September 2011 RCC took on the responsibility for the delivery of some areas of the Safeguarding Adults training, a function which previously was the responsibility of the Safeguarding Adults Board. To date 77 members of staff have attended the Alerter Training. Training is currently under development for Safeguarding Adults Referrers and is planned to commence by May 2012. The Safeguarding Adults Board is responsible for the Safeguarding Adults Investigators training and also the Managing the Process training. For the year 2011- 2012 four members of staff attended the Investigators training.

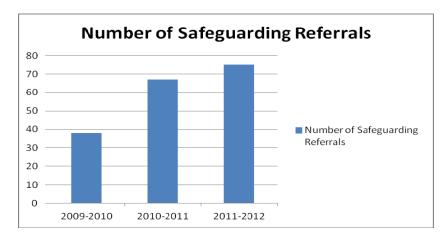
# 7 SAFEGUARDING ADULTS DATA COLLECTION

7.1 All the statistics detailed in this report have been sourced from the Abuse of Vulnerable Adults (AVA) reports for 2010-2011 and 2011-2012 and the recently introduced Safeguarding Adults Board balanced scorecard. Comparative data from Leicestershire County Council and other Local Authorities for 11/12 is unavailable at present as they are all still in the process of compiling their own end of year statistics.

#### 8 NUMBER OF REFERRALS

8.1 For the reporting year 2011-2012 there were 75 Safeguarding Adult referrals compared to a figure of 67 for the previous year and 38 referrals for the year

2009-2010. This represents a 12% increase in Safeguarding Adult referrals for the reporting year. The reason for this increase in referrals is the greater awareness, within the council, partner agencies and wider community regarding adults in need of safeguarding.



# 8.2 **Primary Client Group**

The majority of Safeguarding Adult referrals for the year 2011-2012 relate to people with physical and sensory disability/frailty (44 referrals). This is not unexpected as for the year 2010-2011 the majority of Safeguarding Adult referrals were related to this client group who also represent the majority of service users under the care of adult services.

Primary Client Type	Number of referrals Year 2011- 2012	%
Phys. Disability/Frailty/ Sensory Impairment (includes older people)	44	56%
Mental Health Needs	22	28%
Learning Disability	13	16%
Substance Misuse	0	0
Total	79	100%

\*Referrals recorded as Mental Health Needs relates to referrals from the Adult Mental Health Team as well as referrals relating to people with mental health problems over 65+.

# 8.3 Outcomes

The statistics indicate only 15% of Safeguarding investigations were substantiated. The majority of referrals were either unsubstantiated or not determined/inconclusive. This is an area that requires further analysis to establish explanations for these trends.

Outcome	Number of referrals Year 2011- 2012	Number of referrals as a % of total
Substantiated	12	15%
Partially Substantiated	6	8%
Unsubstantiated	30	38%
Not determined/	31	39%

Inconclusive
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#### 8.4 Type of Abuse

The data indicates that the alleged institutional abuse category had the highest increase in 11/12. Historically institutional abuse was often reported as individual cases.

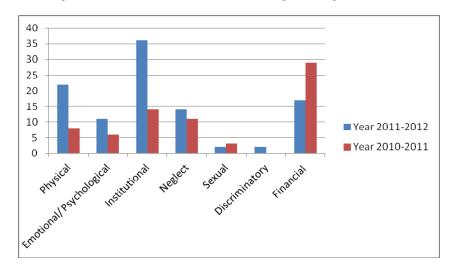
The Leicestershire and Rutland multi-agency policy and procedures identifies institutional abuse as:

"Repeated incidents of poor practice or neglect. Inflexible services based on the needs of providers rather than the person receiving services."

Nationally statistics have increased in relation to institutional abuse partly due to increased public awareness since the Winterbourne/Castlebeck Panorama programme. Most local authorities are looking at how they balance what is safeguarding of an individual and what is contract compliance and monitoring of overall care practices so that there is consistency in how safeguarding is logged.

To gain consistency in relation to institutional abuse RCC is :

- 1. Training relevant staff in relation to types of abuse and the process for identification and notification.
- 2. Implementing revised safeguarding procedures to ensure investigations are consistent.
- 3. Developing a provider investigation procedure to ensure that there is a consistent approach in relation to alleged institutional abuse.
- 4. Holding quarterly monitoring meetings with the Care Quality Commission to discuss concerns and compliance in relation to providers.
- 5. Revising the Notification of Concern Procedure so that all incidents of concern within providers are notified to RCC and a decision is made regarding safeguarding and further investigation.
- 6. Developing a contract monitoring framework that includes a Best Practice in Care Checklist for providers to use.
- 7. Developing the web site to include resources for providers.
- 8. Holding a Provider forum for residential and nursing care and another for domiciliary care providers where safeguarding and support is discussed.
- 9. Holding quarterly adult safeguarding monitoring meetings so that senior management discuss and monitor safeguarding information.



\*Figures include referrals where more than one form of abuse is suspected.

#### 9 FURTHER DATA COLLECTION

The data contained within this report has been compiled from information that is currently available. The Performance Management Team is currently working on the Abuse of Vulnerable Adults return for the last reporting year 2011-2012. Once this is completed a more comprehensive report can be produced and will contain comparisons with other Local Authorities where available.

#### **10 FINANCIAL IMPLICATIONS**

Still some ongoing issues with sickness absence in both areas which may impact on budgets if agency staff are required. Data shows increases in service demand in both areas if this trend continues staffing levels may need to be reviewed.

RISK	IMPACT	COMMENTS
Time	Medium	Timeliness of core assessments requires continued focus
Viability	High	Performance will improve by the on-going management focus on priority areas.
Finance	Medium	See comments in Financial implications. Request for additional funding will be referred back to Cabinet for approval.
Profile	High	Safeguarding work continues to be high profile in both areas particularly in relation to possible negative media attention.
Equality & Diversity	Medium	This area of work is across a diverse spectrum of vulnerable groups in the community which may raise issues in relation to E&D

#### 11 RISK MANAGEMENT

Background Papers

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A Large Print or Braille Version of this Report is available upon request – Contact 01572 722577.