Surrey Safeguarding Adults Board

Annual Report

2015 – 2016

We will all work together to enable people in Surrey to live a life free from fear, harm and abuse

Surrey Safeguarding Adults Board

Annual Report 2015 – 2016

Foreword by the chair of the Board

Simon Turpitt
Independent Chair, Surrey Safeguarding Adults Board

This has been an exciting yet challenging year for the Board.

In April we became statutory which was really significant, not only as it gave us a stronger remit to protect adults at risk of harm and abuse. It also meant that all agencies had to comply with the Care Act including re training their staff, re writing procedures and ensuring capacity and capability to deliver a robust programme around Safeguarding Adults at risk of harm and abuse.

Keeping safeguarding personal is key to ensuring the person is at the centre of what we do and we have worked and continue to work with partners to ensure they focus on that.

A lot of effort was put in by all to ensure the new processes were in place on time and that they worked. This was a big task for the Board and its member agencies. The expectation was for the Board to have a team in place to support this by April 1st. The reality was that it took the best part of the year to get people into the appropriate roles (Board Manager, Quality Assurance, and Board Administrator) and this had an impact especially around ensuring compliance with the Act.

However, with good support from all Board agencies we met the timescales for implementation, though there has been a learning curve in understanding the new processes around enquiries and their escalation. It has not been possible to report evidence to the required level. This is primarily due to the limitations within the Adult Social Care (ASC) IT system. This will be addressed through the implementation of the new ASC IT system in September 2016.

We have put a lot of work into building a better data base to assure ourselves that the programmes we are implementing are making Surrey safer for adults at risk of harm and abuse. The foundation for this is to have data from all major providers. From this we can evidence what is happening and ensure they are taking appropriate actions where issues occur or need to strengthen prevention. This still has some way to go but each reporting cycle gets better.

Since the start of the Care Act, agencies have been more committed to working together and ensuring that they support the programme of the Board. Better representation on committees, input to plans and training, have all improved. We recognise though, that with financial and human resources under pressure, there are still some challenges.

There was a Serious Case Review which started in the previous year but reported in the period covered by this report. It highlighted some recommendations for agencies and the Board which were cascaded and followed up by the Business Management Group (a subcommittee of the Board). This group oversees the implementation and impact of recommendations and holds members to account for delivery of the changes.

We have improved our ability to share best practice and learning not just within our own area but also from reports across the country and from working with other Boards.

We held a learning seminar on the Mental Capacity Act and Deprivation of Liberty Safeguards, as this had been highlighted as an area of development for most agencies. The seminar included speakers from National Agencies and local experts. It was well attended with over 100 delegates from across the county. The feedback was really positive and showed that attendees felt better equipped to manage these areas.

Towards the end of the year we had one and half days where we developed our strategy and plan for the coming year. There was a real multi agency input and robust discussions ensured we had a good plan.

The Board was fully funded this year across agencies and this helped gain stronger commitment from all. This allowed us to have three permanent staff to support the Board. Although recruitment took a long time, it has really helped us be more effective in our plans.

It is clear that the current financial restraints are challenging. However, the Board is committed to deliver more on the prevention agenda rather than managing the after effects of safeguarding enquires. This means being efficient in the use of our, and our partner’s resources, looking at ways of working with other agencies to avoid duplication, focussing more on what works and improving that.

Have we kept people safer in Surrey? - The answer is yes, but qualified by the fact that our ability to measure that, though improved still has a way to go. Improving information, better accountability, more focus on the person and a stronger prevention agenda are part of the continuing programme the Board drives.

Simon Turpitt
Independent Chair, Surrey Safeguarding Adults Board

Keeping your loved ones safe from abuse and neglect

Everyone deserves to be treated with care and respect.

If you think someone is being abused report it now.

Call this free and confidential helpline

0300 200 1005

In an emergency DIAL 999

For further information visit surreycc.gov.uk/protectingadults

surrey safeguarding ADULTS BOARD

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What is safeguarding

Most people in Surrey live safely, free from harm, abuse and neglect. However, some people have care and support needs that make it difficult for them to protect themselves. In these circumstances, if they are experiencing or are at risk of abuse and neglect, then they need to be safeguarded to keep them safe.

The Care Act sets out the circumstances when safeguarding duties apply. The Act says safeguarding applies to adults who

- has needs for care and support (whether or not the local authority is meeting any of those needs) and
- is experiencing, or at risk of, abuse or neglect and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect

The six key principles that underpin all adult safeguarding work

There are six key principles that underpin all adult safeguarding work. These are set out below.

Empowerment

People being supported and encouraged to make their own decisions and informed consent.

‘I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens’.

Prevention

It is better to take action before harm occurs.

‘I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help’.

Proportionality

The least intrusive response appropriate to the risk presented.

‘I am sure that the professionals will work in my interest, as I see them and they will only get involved as much as needed’.

Protection

Support and representation for those in greatest need.

‘I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want’.

Partnership

Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.

‘I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me’.

Accountability

Accountability and transparency in delivering safeguarding.

‘I understand the role of everyone involved in my life and so do they’.

Types of abuse and neglect

There are types of abuse and neglect that will always require a safeguarding response when an adult at risk experiences them. These are set out below.

Physical abuse including:	• Assault • hitting • slapping • pushing • misuse of medication • restraint • inappropriate physical sanctions
Domestic violence including:	• psychological • physical • sexual • financial • emotional abuse • so called ‘honour’ based violence

Sexual abuse including:	• rape • indecent exposure • sexual harassment • inappropriate looking or touching • sexual teasing or innuendo • sexual photography • subjection to pornography or witnessing sexual acts • indecent exposure • sexual assault • sexual acts to which the adult has not consented or was pressured into consenting
Psychological abuse including:	• emotional abuse • threats of harm or abandonment • deprivation of contact • humiliation • blaming • controlling • intimidation • coercion • harassment • verbal abuse • cyber bullying • isolation • unreasonable and unjustified withdrawal of services or supportive networks.
Financial or material abuse including:	• theft • fraud • internet scamming • coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions • the misuse or misappropriation of property, possessions or benefits
Modern slavery encompasses:	• slavery • human trafficking • forced labour and domestic servitude. • traffickers and slave masters using whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment

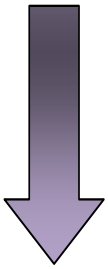
Discriminatory abuse	including forms of: • harassment • slurs or similar treatment because of: race, gender and gender identity, age, disability, sexual orientation, religion.
Organisational abuse	Including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.
Neglect and acts of omission including:	• ignoring medical • emotional or physical care needs • failure to provide access to appropriate health, care and support or educational services • the withholding of the necessities of life, such as medication, adequate nutrition and heating.
Self-neglect	This covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. A decision on whether a response is required under safeguarding will depend on the adult's ability to protect themselves by controlling their own behaviour. There may come a point when they are no longer able to do this, without external support.

A Snapshot of Safeguarding adults in Surrey

We received **7,561** concerns that an adult was experiencing or at risk of abuse or neglect

1,144 safeguarding concerns required an enquiry to establish what had occurred

There were **422** fewer new safeguarding enquiries this year compared to last year

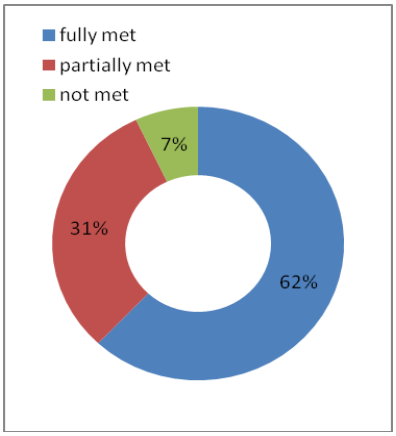


47% of safeguarding enquiries involved people had physical support needs

30% of people who had a safeguarding enquiry lacked mental capacity

Safeguarding outcomes

62% said their desired outcomes were fully met
31% said they were partially met
7% said their desired outcomes had not been achieved

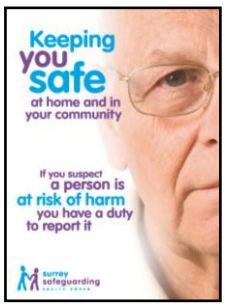


43% of enquiries related to neglect

21% of enquiries related to physical abuse

20% of enquiries related to financial abuse

There were **5,435** leaflets and other safeguarding publicity material distributed



We ran a radio advert to raise awareness of safeguarding on **3** main Surrey radio stations for **2** weeks

We completed **706** home fire safety checks for vulnerable adults.

What is a Safeguarding Adults Board

There has been a Safeguarding Adults Board in place in Surrey for over a decade. Until April 2015, it was a voluntary partnership where agencies came together to ensure vulnerable adults, who were at risk of harm, are kept safe. It ensures partners work together in a collaborative way, agreeing policies and procedures and undertaking activities to raise awareness of safeguarding.

In April 2015, the Care Act came into effect and this made it mandatory for all areas in England to have a Safeguarding Adults Board. The core objective of a Board is to reassure itself of the effectiveness of safeguarding in its area.

The Safeguarding Adults Board has 3 core duties to ensure it meets its objective. It must:

- publish a strategic plan for each financial year that sets how it will meet its main objective and what the members will do to achieve this. The plan must be developed with local community involvement, and the Safeguarding Adults Board must consult the local Healthwatch organisation. The plan should be evidence based and make use of all available evidence and intelligence from partners to form and develop its plan
- publish an annual report detailing what the Safeguarding Adults Board has done during the year to achieve its main objective and implement its strategic plan, and what each member has done to implement the strategy as well as detailing the findings of any safeguarding adults reviews and subsequent action
- conduct any safeguarding adults review in accordance with Section 44 of the Care Act.

For more information on the Surrey Safeguarding Adults Board, please see Appendix A.

How are people in Surrey safer?

The Surrey Safeguarding Adults Board undertook many activities during the year to ensure people in Surrey were protected from abuse and neglect. Below are some examples of the work we did.

Why did we need to take action	What did we do	What difference have we made
We needed to ensure all professionals were working to an agreed set of policies and procedures that were compliant with the Care Act 2014.	We re-wrote policies and procedures for all agencies to use, ensuring these set out the new statutory responsibilities.	For professionals - All agencies are using the same, agreed procedures and these are compliant with the new legislation. For residents – people receive a consistent service and improved integration between health, social services and other agencies.

Examples:

- Multi Agency Procedures – Sections 1 & 2
- Self Neglect Policy

We needed to train professionals so they understood their new statutory responsibilities and the responsibilities of other professionals.	We put on a programme of multi agency, class-room based training.	For professionals – More staff are trained to a higher competency level in safeguarding adults. For residents – people are kept safe whether they are in their own home receiving care, in a hospital or in a care home.

Examples:

- Making Safeguarding Personal
- Managing Safely
- Provider led Enquiries
- Supporting the Process
- Internal Management Reviews

Why did we need to take action	What did we do	What difference have we made
We needed to learn lessons when adults have not been properly safeguarded so we can better protect adults at risk.	We completed a Serious Case Review (SCR) and implemented an Action Plan with relevant agencies. We published the Executive Summary to support other areas to learn lessons. We looked at Safeguarding Adults Reviews and Serious Case Reviews from other areas to help us learn lessons.	For professionals – staff have been able to change practices to prevent abuse and neglect before it happens. For residents – people are less likely to experience abuse or neglect.

Examples:

- Surrey SCR Mr J & Mr Y
- Camden SCR on self neglect

We needed to raise awareness of adult safeguarding so more people understood their responsibilities to raise a safeguarding concern when an adult at risk is abused or neglected	We built awareness of safeguarding to ensure concerns are raised appropriately This was done through different mechanisms such as: radio, posters, newsletters	For professionals – staff are better informed of safeguarding news and changes in practices. For residents – people know how to raise a safeguarding concern and professionals are working to keep them safe.

Examples:

- Radio adverts on 3 stations
- Posters at Surrey bus stops
- 4 Newsletters

Why did we need to take action	What did we do	What difference have we made
We needed to know what is working well and what needed to be improved when people have been safeguarded in Surrey	We agreed a programme of quality assurance of safeguarding practice through examining past safeguarding case files.	For professionals – when the audits are completed, staff will be able to learn what is working well and improve practices that could be better. For residents – people will be able to experience an improved safeguarding service.

Example:

- Case File audits

Living in Surrey

Surrey has a total population of just over 1.1 million people and covers a large area (166,250 hectares). The population density of Surrey is greater than that in most parts of England. The proportion of households in Surrey which are owner occupied (78%) is greater than in the South East (74%) and England (69%)[1]. It is generally an affluent area with pockets of deprivation.

Information on the current and future health and social care needs of the community in Surrey are set out in the Joint Strategic Needs Assessment (JSNA). The JSNA is produced by Surrey County Council and the Clinical Commissioning Groups. The JSNA tells us:

- **Surrey people generally enjoy good health and wellbeing. They expect to live a long and healthy life. Life expectancy is high: 84 years for women and 81 years for men. That's almost two years longer than the average for England.**
- **Seven out of Surrey's eleven boroughs are in the highest ten nationally for the percentage of adults engaging in 'increasing risk' drinking of alcohol. This means that one in four adults drink above the daily recommended sensible drinking levels. Rates of alcohol-related hospital admissions have almost doubled since 2002.**
- **The number of people with conditions such as diabetes, Coronary Heart Disease and chronic obstructive pulmonary disease is expected to increase over the next five to ten years.**
- **In Surrey, an estimated 15,100 people have dementia: that's one in 15 people aged over 65. Fewer than half of them would have been diagnosed formally. Numbers are predicted to rise to 19,000 by 2020 and 25,000 by 2030.**

These statistics help us when we build our strategic plans as it gives context to ensuring our focus is in the right place. For example, raising awareness with agencies around the effective use of the Mental Capacity Act, ensuring carers voices are heard and responded to.

[1] Information from Joint Strategic Needs Assessment - https://www.surreyi.gov.uk/

There are an estimated 65,800 people over 65 years, living alone in Surrey. Other key data on the population of Surrey:

Age of population	England	Surrey
Age 18-24	9.4%	8.7%
Age 18-64	62.3%	61.3%
Age 65+	16.3%	17.2%
Age 85+	2.2%	2.5%
Disability	**England**	**Surrey**
All people with day to day activities limited by long term illness or disabilty	17.6%	15.7%
People with day to day activities limited a lot by long term illness or disabilty	8.3%	6.9%
Carers	**England**	**Surrey**
All people providing unpaid care	10.2%	9.8%
People providing 1-19 hours of unpaid care per week	6.5%	6.7%
People providing 20-49 hours of unpaid care per week	1.4%	1.1%
People providing 50 hours or more of unpaid care per week	2.4%	2.0%
Health and Well-being	**England**	**Surrey**
People with bad or very bad health	4.2%	3.4%
Ethnicity	**England**	**Surrey**
Selected ethnic groups: White British	79.8%	85.2%
Selected ethnic groups: All other white ethnicities	5.7%	5.4%
Selected ethnic groups: All mixed/multiple ethnicities	2.3%	1.9%
Selected ethnic groups: All black/african/caribbean/black british	3.5%	1.6%
Selected ethnic groups: Asian/Asian British: Indian	2.6%	1.8%
Selected ethnic groups: Asian/Asian British: Pakistani	2.1%	1.1%
All non-white ethnic groups	14.6%	9.3%
All non white British ethnic groups	20.2%	14.8%

The population statistics help us when we are interpreting data, for example, looking at our age profiles especially over 65 it tells us that the number of concerns raised with this age group were over 65% but that would be expected that this group would be more at risk to have care and support needs and be at risk of abuse and neglect therefore more concerns raised.

Impact of the Care Act

At the beginning of this reporting year, the Care Act became law. There were many positive consequences from this. Safeguarding Adults Boards became statutory and adults at risk of abuse and neglect received the same protection in all parts of England. A new definition was introduced to describe when adults need to be protected from abuse or neglect. Previously, safeguarding was applied to all adults who were considered ‘vulnerable’ without considering their ability to protect themselves. The new definition is an adult who has care and support needs and because of those needs are unable to protect themselves from abuse / neglect or the risk of it. This new definition is helpful in that adults only receive safeguarding intervention when they are unable to stay safe without activity from agencies.

In recent years, there has been increasing focus on ensuring safeguarding achieves what the person wants from the process and not what professionals want. This means the safeguarding actions will be different depending on who the person is and what outcome they want to achieve. Sometimes the person will want a robust response to the harm, whereas other times the person will want less or sometimes no intervention. This is called ‘making safeguarding personal’. The Care Act has introduced a new requirement on Adult Social Care to ensure their safeguarding activities are targeted towards achieving this.

Often when changes are introduced, there are extra pressures placed on agencies and this has been no exception. Board members have worked to respond to these pressures, in particular, by training staff, ensuring vacancies are filled as quickly as possible, changing procedures and participating in multi agency activities to work better together.

Board members agreed a more robust framework for reporting in to the Board and being held accountable for the way they safeguarding adults. They agreed to a Constitution that sets out responsibilities, a process of providing reports on their own agencies each quarter, a set of data that will give the Board information on safeguarding trends and to participate in a development day to identify future priorities. This has supported members to fulfil their obligations to safeguard adults in a strategic way that is visible to partners on the Board.

The Act has had more impact on Adult Social Care than other agencies because they have the lead responsibility in responding to safeguarding concerns and conducting (or ensuring another agency conducts) a safeguarding enquiry. The IT system that is used by Social Workers in Adult Social Care was installed long before the Care Act came into effect and not suitable for the new requirements. For this reason Adult Social Care decided a new system would be introduced. This work has been done throughout the reporting year, with staff being trained, records prepared for electronic transfer to the new system and the new system adapted to ensure it

meets the needs of users. However, the new system will not be fully operational until autumn 2016 and this has had an impact on the Board's effectiveness, for example, in relation to the availability of timely data on safeguarding. There is more detail on this later in this report and what will be in place when the new IT system is introduced.

Safeguarding adults in Surrey - what the data tells us

Definitions

The following words are used to describe different types of safeguarding activity. Knowing what these mean, helps to understand the information that is available:

Safeguarding Concern - This is when a concern is raised where an adult at risk may have been, is, or might be, a victim of abuse. This is normally the first contact between the person raising the concern and the council about the alleged abuse. For example, if an individual phoned a council and expressed a concern that their elderly neighbour was being physically abused, this would be counted as a concern.

Safeguarding Enquiry - A safeguarding enquiry is where a concern is assessed by the council as meeting the local safeguarding threshold and a full safeguarding investigation is deemed necessary.

Brief guide to what happens when someone raises a safeguarding concern with Adult Social Care

Anyone can make a safeguarding concern by contacting Adult Social Care and saying they are concerned an adult at risk is experiencing abuse or neglect

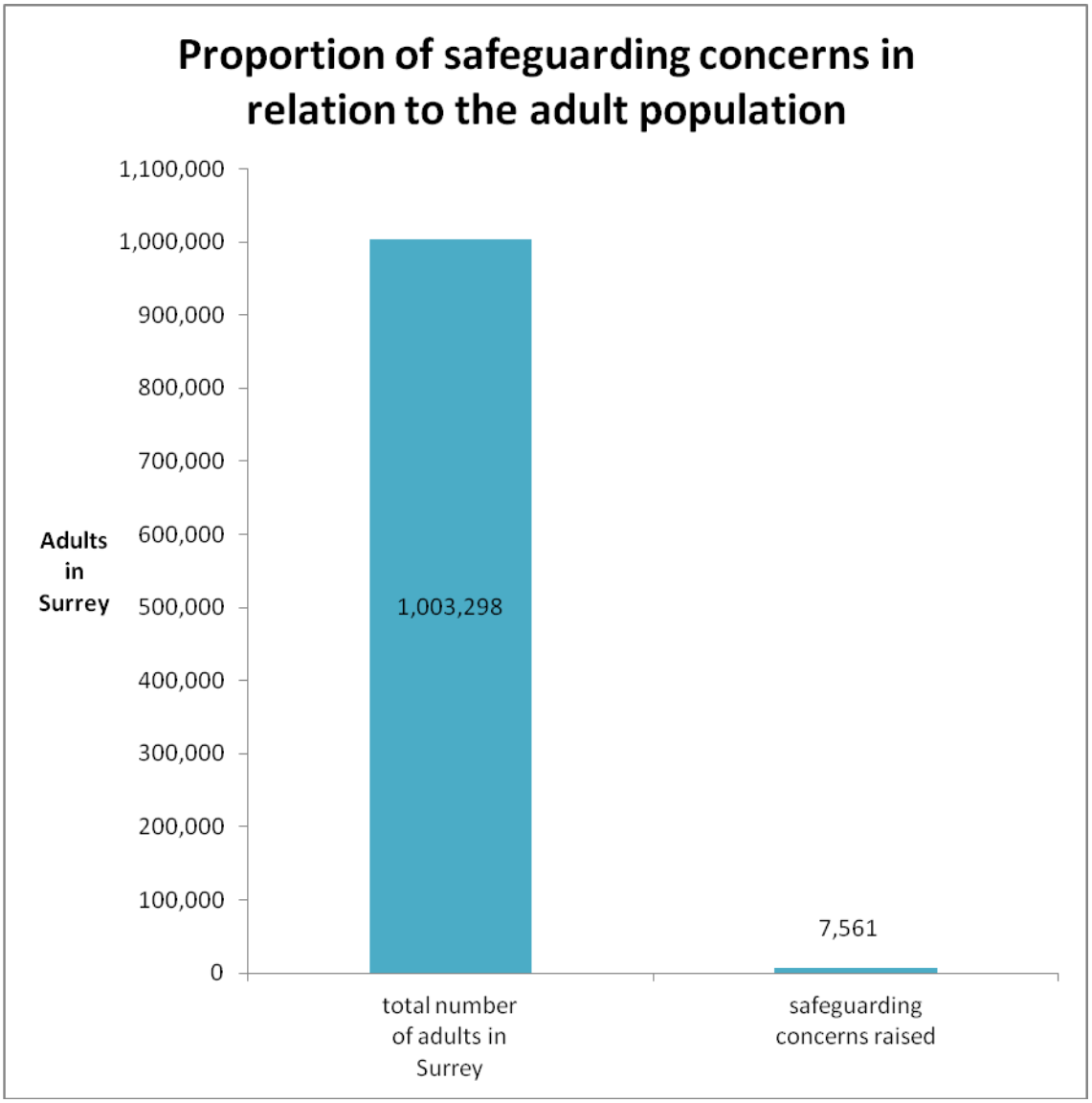
↓

A safeguarding advisor in Adult Social Care ensures the person is safe, they gather information and decide if there has been abuse or neglect.

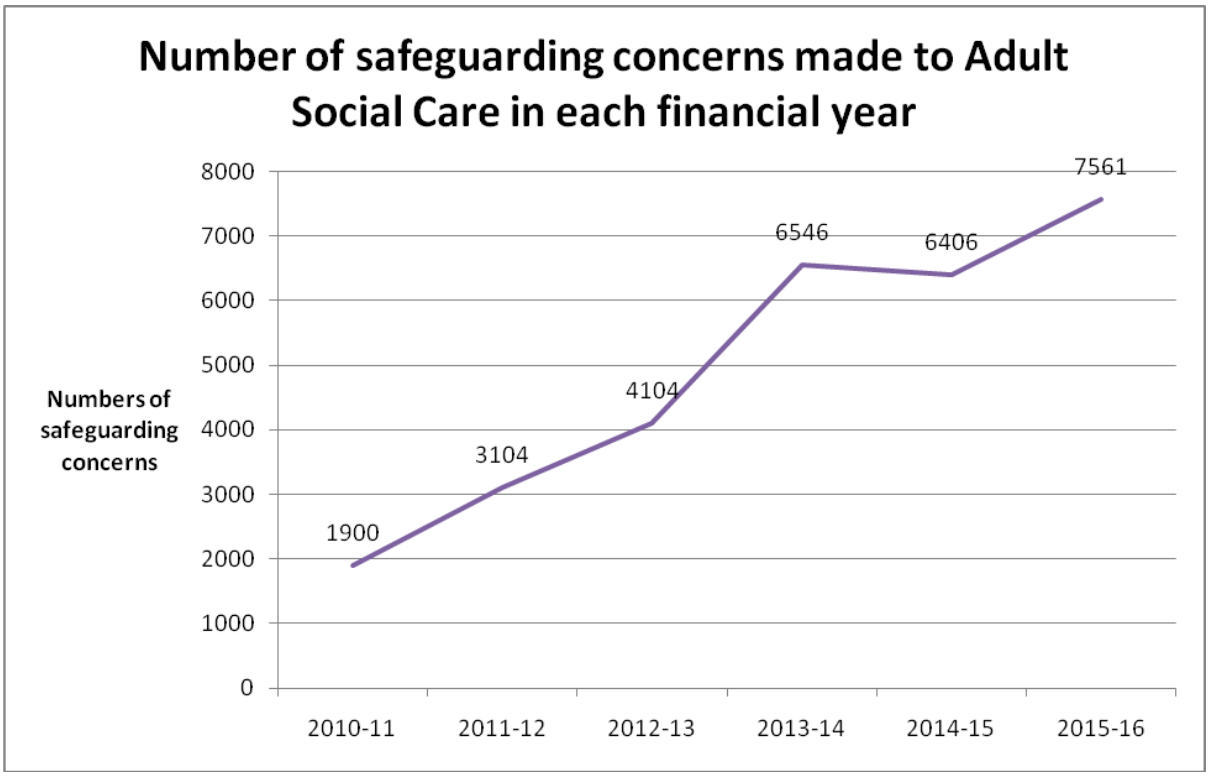
↓

If there has been abuse or neglect, they start a safeguarding enquiry, as set out in Section 42 of the Care Act. The adult who has experienced abuse or neglect is involved in the process throughout.

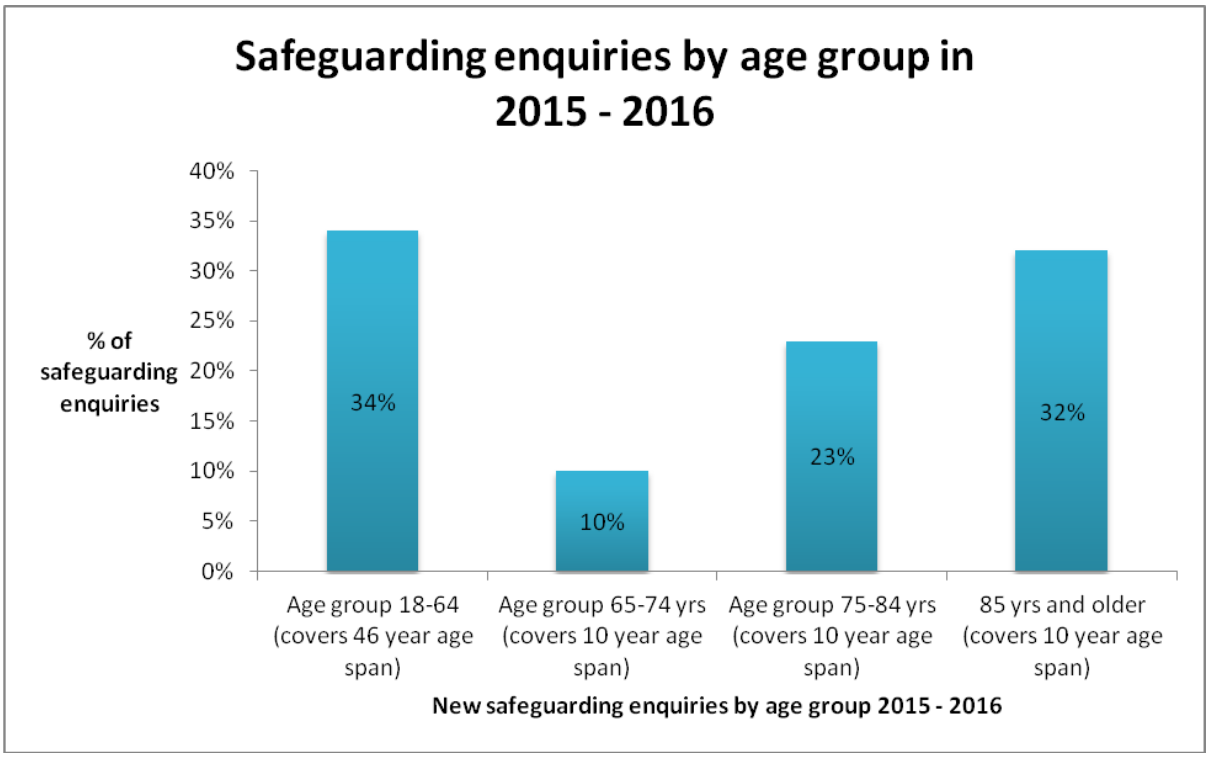
In 2015 – 2016 there were 7,561 safeguarding concerns made to Adult Social Care where someone thought an adult at risk may be being abused or neglected. That is just 0.75% of the total adult population. This tells us that Surrey is a very safe place for people to live. Please see chart below that illustrates this.



Over the last few years, there has been an increase in the number of times safeguarding concerns have been raised to Adult Social Care. This is shown in the graph below. The exact cause of the increasing number of reported concerns is not exactly known, however, there has been a significant investment in increasing awareness of the importance of safeguarding adults. This was expected to lead to an increasing knowledge of the need to report suspected abuse or neglect. It reflects a willingness to report concerns which is good, but it does also reflect the pressure this puts on services to respond to the larger demand at times of increased pressure on budgets.



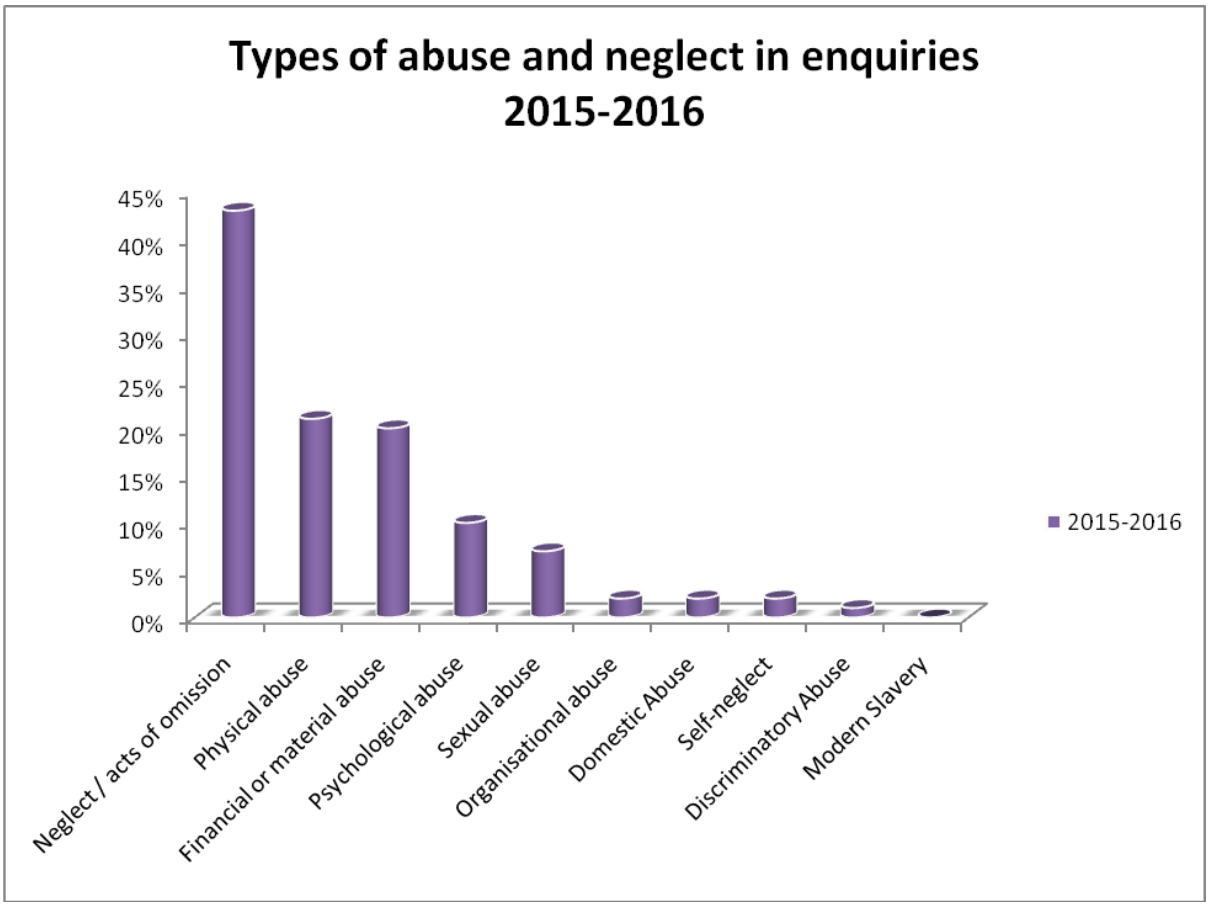
Data from Adult Social Care tells us that more safeguarding enquiries are made in relation to older adults than in relation to younger adults. More than half of all safeguarding enquiries in Surrey are for people over the age of 75 years. This is not surprising as the definition of an adult at risk of abuse or neglect is someone who is unable to protect themselves from harm because they have care and support needs. The older a person is, the more likely they are to have care and support needs and this may make it difficult for them to protect themselves. The safeguarding enquiries for each age group are shown on the chart below.



New safeguarding enquiries in 2015-2016 for different age groups				
	18-64 yrs	65-74 yrs	75-84 yrs	85+ yrs
2015 -2016	34%	10%	23%	32%

6

When an adult needs to be safeguarded, the type of harm they are most likely to have experienced is neglect. Of all the safeguarding enquiries in Surrey in 2015 – 2015, 43% were for neglect. In fact, neglect has been the most frequently reported type of abuse for the last 3 years. Physical abuse and financial abuse each account for about 20% or reported harm. The other types of abuse and neglect are much less frequently reported. This is illustrated in the chart below.



Type of abuse or neglect	Percentage of total enquiries
Neglect and acts of omission	43%
Physical abuse	21%
Financial or material abuse	20%
Psychological abuse	10%
Sexual abuse	7%
Organisational abuse	2%
Domestic Abuse	2%
Self-neglect	2%
Discriminatory Abuse	1%
Modern Slavery	0

Data being developed

Agencies on the Safeguarding Adults Board have been working throughout the year to identify further sources of data that will support the Board to have a full picture of adult safeguarding. The Board's ambition is to do more than just copy existing data sets from individual agencies. Existing data sets from individual agencies have been developed for purposes other than supporting safeguarding activity and can be difficult to interpret and therefore unhelpful. Board members are working to create a tailored performance framework that enables members to identify and respond to trends. This will enable the Board to further improve targeted activity to address concerns.

The development of this data framework is being taken forward in the next reporting year. In particular, there is focussed work planned with the police in relation to adults at risk who are victims of crime or who come into contact with criminal justice agencies. In addition, health agencies are working together to produce a comprehensive safeguarding 'dashboard' that will provide information in a simple format that demonstrates both long term trends and short term changes in activity.

Image of ‘Keeping you safe’ poster at a Surrey bus stop. This is part of the raising awareness campaign undertaken by the Adult Social Care Communications team.

What has SSAB the done to deliver the Annual Plan

At the start of the reporting year, Board members agreed a set of priorities to be taken forward in the next 12 months. Board members identified actions to ensure those priorities were met, put those actions into a plan and the Action Plan was then implemented and monitored. The Action Plan was made public on the Board's webpages in easy read format together with a more detailed version suitable for professionals who work in safeguarding.

Priorities for Surrey Safeguarding Adults Board 2015 - 2016
1 Achieving good outcomes for adults at risk and carers
2 Responding to reported abuse
3 Leadership
4 Safeguarding Adults Board
5 Safeguarding Adults Reviews and Reviews undertaken by other Boards and Partnerships
6 Making Safeguarding Personal
7 A Competent workforce

The following actions were successfully completed:

Action	How this has protected adults from abuse and neglect
The Board has implemented a new constitution, has reported on the Board's activities in its Annual Report and published its Annual Plan for the following year. (Actions 1 & 3)	These actions have improved the accountability of Board members for delivering safeguarding. Surrey residents can be assured that actions are being taken to safeguard adults at risk of abuse and neglect and can see whether those actions have been delivered. Residents can see how agencies in Surrey are working together to ensure adults are safeguarded and can see they will be kept safe in all health and social care settings.

Action	How this has protected adults from abuse and neglect
Safeguarding materials such as leaflets and posters were made available to residents in a wide range of settings. The Adult Social Care Communications team led on a public campaign to raise awareness of how to contact Adult Social Care if there is a safeguarding concern. This is set out in detail in the relevant Appendix. The Board's website was revised to make it easier for residents and professionals to find the information they need and to make the pages more attractive so people are more likely to access information. (Action 9)	More residents will be aware that abuse or neglect of vulnerable adults is unacceptable and must be responded to. They will know what types of behaviour is abuse or neglect and will know how to contact Adult Social Care. This will help ensure that when someone is experiencing abuse or neglect someone will respond to put a stop to the abuse.
Board members have worked to raise awareness of adult safeguarding with residents who fund their own care directly (without support from Adult Social Care) and with residents who may be harder to reach. (Action 10)	Activities have included attending the Surrey Heath Muslim Association annual family day and working with the Surrey Minority Ethnic Forum to support their safeguarding training programme for minority groups. The Board has ensured information is available in easily accessible formats including other languages. These activities have complemented other activities such as the media campaign delivered by the Adult Social Care Communications team and the improvements to the Board's webpages. This has helped spread knowledge of safeguarding to people who may not access information through other methods.

Action	How this has protected adults from abuse and neglect
Board members have adopted a culture of learning from other reviews including Domestic Homicide Reviews, children's Serious Case Reviews and national reports. Board members have looked at the recommendations from reviews and reports from other areas. Members have considered whether those recommendations are relevant to the way services are delivered in Surrey and where appropriate have amended the way we do things. An example is from the Serious Case Review of JR that was undertaken in West Mercia. Board members reviewed this at their meeting in January and were reminded of the importance of sharing information across both children's and adult's services as well as across agencies. (Action 11)	By learning lessons from other areas, Board members are able to respond and prevent similar abuse and neglect happening here. Prevention of abuse and neglect is a key principle of adult safeguarding.
Board members reviewed the effectiveness of the Board's multi-agency Training Programme 2014-15 and prepared the Programme for 2015-16. This included setting up new courses in response to the Care Act and on how to respond to when people are experiencing self-neglect. The Board introduced an assessment process to better measure the quality of the course. In addition, people have been asked after attending training courses to identify how they have implemented what they learned. (Action 13)	By having an effective training programme in place, the Board is able to support agencies to further develop their workforce.

Action	How this has protected adults from abuse and neglect
Board members have considered how they can better share information and have raised awareness of how information can be shared securely and safely. Activities have included examining cases where information sharing has been less than effective and seeing how it could be improved. Members identified a need for brief information to be available covering the Care Act duties in relation to working together to safeguard adults and this was prepared, circulated and published on the webpages. (Action 14)	By working together and sharing information, agencies are able to make a full assessment of an adults risk of abuse or neglect and to respond to those risks effectively.
Board members agreed to ensure the voices of carers and adults at risk are heard by the Board. Representatives from the voluntary sector are present and involved in every Board meeting. They attend the relevant sub-groups and Board events. All new and revised policies are shared with the representatives at draft stage to ensure they can be amended, if required to take into account more fully the needs of carers and adults at risk. *(Action 16)*	Professionals who implement the Boards policies are better able to meet the needs of carers and adults at risk.
The Mental Capacity Act and the Deprivation of Liberty Safeguards legislation are a complex area of law that Board members wanted to understand and implement better. They held a well attended event with key note speakers who were specialists in this area of the law. (Action 17)	Professionals working in Surrey have improved understanding of how to apply the requirements and this will support residents who require protection have relevant health needs.

The following actions were started in the reporting year but were not fully completed:

Action	Impact and activities that will be undertaken in the next year
The Board began the implementation of a new Performance Framework for including data collection from statutory agencies and reporting from all sub-groups. This was the first time the Board was receiving information from many agencies which would enable members to understand and respond to emerging trends. Whilst much work was done to put this in place, there were several challenges. Adult Social Care were unable to provide detailed data during this period due to their IT system not being able to produce relevant reports. Detailed data was subsequently provided in July 2016, however, this was too late to inform the Annual Plan for that year. Some other agencies experienced difficulties in producing data. In addition, some agencies did not provide progress reports at each quarter. Furthermore, the Board were expecting to have a Quality Assurance Manager in post from the beginning of the year but this position was not successfully filled until the following year. (Action 2)	The Board made some progress in 2015 – 2016, however, the Board did not receive all the information that was expected. Adult Social Care is implementing a new IT system that will be used autumn 2016 onwards. When this in place it will enable the Board to better fulfil its responsibilities to understand safeguarding in its area and respond to issues and trends that are identified. The Board has successfully recruited a Quality Assurance Manager. This Manager will provide added resource to ensure relevant data is collected and will present it to each Board meeting. There remain some challenges for a few agencies, chiefly those that work on or near the County borders. These agencies have identified the duplication in the number of reports they have to produce as they report to several different Boards, Groups and public bodies. To support them, the Surrey Safeguarding Adults Board has agreed flexibility in what can be provided and is working with Boards/Groups/Public Bodies in other areas to see if a consistent approach can be agreed.

Action	Impact and activities that will be undertaken in the next year
Board members determined at the beginning of the year to have fully implemented all aspects of the Care Act relevant to safeguarding. Substantial progress was made, however, the Board cannot at this time be assured all agencies in Surrey are fully compliant at all times. It should be noted that the Care Act was a huge change in the way abuse and neglect is responded to and contains a great many requirements on agencies. This does not mean adults are not being protected from abuse and neglect. It means the Board has not received evidence that satisfies it every agency is compliant with the legislation. It should also be noted that in March 2016 the Department of Health revised the Care Act guidance. This included removing the requirement for each agency to have a Designated Adult Safeguarding Manager but to instead have a named person with the lead on adult safeguarding. The revisions included new details on financial abuse and revised some of the existing requirements. (Action 4)	There is no evidence that this has impacted on how well residents in Surrey are protected from abuse and neglect. However, with the social care IT system, a full time Quality Assurance resource and better understanding of the Care Act by agencies the Board is confident that it will be able to better evidence compliance.
Board members agreed to undertake a self-assessment of their safeguarding. A template was agreed that was based on one already used by health agencies. A timeline was in place for these to be undertaken and sent to the Board. Most agencies on the Board completed the self assessment within the agreed period. These showed a careful and thorough analysis of how effective their safeguarding is. However, not all agencies completed the self-assessment and a couple did not demonstrate a sufficiently thorough assessment. (Action 5)	There is no evidence that this has impacted on how well residents in Surrey are protected from abuse and neglect This coming year the Board will be assured that agencies are monitoring and responding to their own safeguarding activities, where self-assessments are not effectively undertaken the Board will via audits of the agencies concerned ensure themselves that the standards expected are evidence and met .

Action	Impact and activities that will be undertaken in the next year
All Board agencies and services they have commissioned abide by the agreed Multi Agency Procedures. These Procedures were initially written before the Care Act came in therefore they needed to be fully revised to ensure they were compliant with the new legislation. Initially, the Board had a multi-agency task and finish group established specifically to re-write the Multi Agency Procedures. In January 2015, Adult Social Care requested this multi agency group was disbanded as they wished to re-write the procedures on their own. This was in recognition of their leading role on safeguarding. The Board agreed to this with an implementation date of end of April 2015 for all 3 new sections. The implementation date was not achieved. A first section was completed by end of April 2015, however, it was not until later in the year that another section was completed. There remained 1 section outstanding at the end of this reporting period therefore the revision has not been completed in this reporting period. (Action 6)	This delay has required remedial action to be undertaken. At the end of this reporting year discussions were taking place to resolve the issues and finalise the procedures. It can be reported that the final section was completed, signed off by the Board and made available on the website in the current year.
Board members made a commitment to review the impact of personalisation on Adult Safeguarding and to ensure processes support this programme. To have achieved this, Adult Social Care would need to provide the Board with evidence adults involved in safeguarding were always asked what outcomes they would like and it would be expected in most cases to meet those outcomes. However, the limitations of the current IT system used by Adult Social Care means that assurance can not be provided outcomes are being met. (Action 12)	It is essential that safeguarding activity supports the outcome that the adult wants. Without evidence this is being achieved, the agencies do not know whether safeguarding activity is improving people's lives. Adult Social Care have informed the Board that it's new IT system will enable this information to be gathered and shared with the Board in a timely fashion. This will come into effect from September 2016 onwards.

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The following actions were not started as planned and they require remedial action in the next year:

Action	Impact and activities that will be undertaken in the next year
Board members agreed there should be a review of safeguarding process following the implementation of the Care Act. This was to review the safeguarding process from the point of view of: i) the adults at risk ii) the carer iii) the referrer To consider communication, response times outcomes and the extent to which the adult at risk, carer and referrer were the centre of the process. It has not been possible to undertake this review due to a number of reasons. The fact that the Multi Agency Procedures were not completed during this reporting period meant it was not feasible to assess how well they were being implemented. In addition, the Adult Social Care IT system was not set up to provide information on outcomes. At the same time, the way safeguarding is responded to is changing as Surrey implements a Multi Agency Safeguarding Hub (known as the MASH). There is more information on the MASH later in this report. (Action 7)	The impact of this action not being achieved is there is a lack of information on what is working well and what could be done better. This is particularly looking at how the safeguarding pathway works for the adult at risk, carers and the person who raised the safeguarding concern. Action has been identified for the following year that is set out in the action below on the auditing of some of Adult Social Care's safeguarding case files.

Action	Impact and activities that will be undertaken in the next year
Board members agreed to undertake a review safeguarding case files. These were to share the learning from these with the Board to ensure the Board's vision is reflected in the adult at risk's experience of the safeguarding process. It was expected to focus on the multi-agency aspect of safeguarding, looking particularly at the way agencies engage with each other to safeguard adults at risk. It has not been possible to undertake this action. Adult Social Care have been involved in changing their practices to integrate with the Multi Agency Safeguarding Hub (MASH). This has taken longer than expected due to a number of factors such as challenges in recruiting to vacancies and the MASH being programme developing mid-year. Adult Social Care therefore reported to the Board that the safeguarding case file audit could not be done. (Action 8)	Without this work being completed, the Board is not fully informed as to whether its strategy and vision are aligned with agencies operational work. The following activities are taking place in the next reporting year to address these issues. The Board has appointed an external auditor with significant experience of safeguarding policies and processes to undertake an audit of safeguarding cases. This will enable the audit to be undertaken robustly and without withdrawing any Adult Social Care staff from operational duties The Board will receive regular updates on developments of the MASH in Surrey. This will enable the Board to be involved and to respond to changes in the way safeguarding is responded to.
Board members agreed that they should be assured of the effectiveness of multi-agency discharge planning for adults at risk leaving hospital. This followed the Rapid Improvement Event work led by Adult Social Care. Board members were informed that Adult Social Care had set up an on-going project in relation to hospital discharge and Adult Social Care agreed to submit a progress report. However, the report was not received during this reporting period. (Action 15)	There have been challenges in progressing this action as far as the Board would want. The Board will be undertaking further activities in the next reporting year to progress this action.

What has each sub-group of the Safeguarding Adults Board has done

The Board has 5 sub-groups that each work on a particular theme to support the Board. The information below sets out the key achievements and issues for each sub-group during the year, except for the Safeguarding Adults Review group whose activities are set out in a later section.

Quality Assurance and Audit (QA&A) Group

Chaired by Surrey Downs Clinical Commissioning Group this group assists the Surrey Safeguarding Adults Board with developing, promoting and ensuring good quality safeguarding practice. This year they have:

- Revised reporting template for agencies to the Board and agree to report QA&A to the board.
- Undertaken a brief audit of providers and referrers on their experience of the safeguarding feedback process.

Key challenges: It remains challenging for some agencies to send a representative the group. The Surrey Safeguarding Adults Board had a post for a Quality Assurance Manager, however, this vacancy was not filled within the year and this impacted on the group's work. This concern has been addressed in this current operational year

Training Group

Chaired by one of the acute hospital trusts, this group develop, implement, review and update the multi-agency training strategy for the protection of adults at risk and monitors, assesses and evaluates the uptake and impact of safeguarding training across Surrey and to ensure ongoing quality assurance. Activities they have undertaken this year include::

- Undertaken observation and quality assurance to ensure the training meets the required standards.
- Ensured a range of courses are offered that meet the needs of the Care Act and agency needs

Key challenges: It remains challenging for some agencies to send a representative the group. The group aspired to put on a conference for senior representatives of statutory organisations, however, this could not be achieved within the year due to non-availability of key note speakers. Action has been taken to remind partner agencies of their commitment via their signing the constitution and that Senior leaders in the organisations concerned have been tasked with resolving this issue.

Policy and Procedures Group

Chaired by Adult Social Care, this group reviews the Multi-Agency Procedures and other Protocols, Guidance and Procedures and updates as appropriate. Activities they have undertaken this year include::

- Produced a new first section to the Multi Agency Procedures.
- Revised the Key Safe Protocol that supports agencies to safely share the numbers to key safes for vulnerable adults.

Key challenges: The delays in revising the Multi Agency Procedures has meant the group spent longer focusing on this work then expected. This caused other areas of work to be delayed. This is being addressed in the new operating year

Health Group

Chaired by Surrey Downs Clinical Commissioning Group, this group ensures there is shared understanding and interpretation of current national and local guidance between all health organisations. It monitors safeguarding adult processes to ensure optimal performance and outcomes for adults, including processes around the Mental Capacity Act, Deprivation of Liberty Safeguards and PREVENT (the government programme to prevent radicalisation). Activities they have undertaken this year include:

- Established this new group and worked collaboratively with colleagues who are safeguarding children.
- Provided an opportunity to discuss safeguarding issues as they impact on families instead of separating issues into children and adults.
- Obtained funding to support the Mental Capacity Act seminar
- Fed back on health audits on Safeguarding

Key challenges: At times it has been challenging to manage the meetings that are held jointly with adults and children to facilitate better use of time for all members . However because the children's safeguarding agenda is so large this meant that the adults agenda was sometimes reduced. Actions have been taken to remedy this

In addition to the above sub-groups, the Surrey Safeguarding Adults Board has 5 local groups that are aligned as far as possible with Clinical Commissioning Groups and Adult Social Care Locality teams.

- South West Surrey Safeguarding Adults Group – includes the area covered by Guildford and Waverley Clinical Commissioning Group and the Adult Social Care locality teams in Guildford and Waverley.
- North West Safeguarding Adults Group – includes the area covered by North West Surrey Clinical Commissioning Group and the Adult Social Care locality teams in Woking, Runnymede, Spelthorne and Elmbridge.
- Surrey Heath Safeguarding Adults Group – covers the area covered by Surrey Heath Clinical Commissioning Group and the Surrey Heath Adult Social Care locality team.
- Mid Surrey Safeguarding Adults Group– includes the area covered by Surrey Downs Clinical Commissioning Group and the Adult Social Care locality teams in Mole Valley, Banstead, Epsom and Ewell.and in Elmbridge.
- East Surrey Safeguarding Adults Group Group – includes the area covered by East Surrey Clinical Commissioning Group and the Adult Social Care locality teams in Tandridge and in Reigate and Banstead.

These groups meet quarterly and provide a forum for each locality to discuss safeguarding issues, share information on effective practice, learn about new guidance and policies. They are able to report into the main Board any issues they want the Board to take action on or respond to. Representation on these groups comes from a wide range of organisations working with adults at risk of abuse and neglect, for example, voluntary sector, housing and advocacy services. The chair for each of the groups is either the Adults Social Care Area Director or a senior representative from the Clinical Commissioning Group.

One achievement for each of the groups is below as an example of their activity:

South West Surrey

This group had focused discussions on how the Care Act requires changes in practices and procedures. They have looked at the learning from national Serious Case Reviews and reports to improve practice locally.

North West Surrey

This group has shared the key learning from the Surrey Serious Case Reviews. They identified several had recommendations relating to agencies needing to improve information sharing and as a result the group has held a meeting looking closely at the enablers and barriers to effective information sharing.

Surrey Heath

This is a new group that formed so there could be a focus on adult safeguarding in this area that is the first area to introduce integrated care. They have agreed their Terms of Reference and membership.

Mid Surrey

The group looked in detail at the Care Act, discussed implications of the changes and agreed to cascade the briefing sheet on key new requirements.

East Surrey

The group met in December and shared the learning from the Camden Serious Case Review of ZZ, they updated their work plan and heard detail on how Surrey and Sussex Hospital Trust are responding to the requirements in the Mental Capacity Act

Safeguarding Adults Reviews and Serious Case Reviews

It is a statutory requirement under the Care Act that Safeguarding Adults Boards undertake a Safeguarding Adult Review in the following circumstances:

- when an adult in its area dies as a result of abuse or neglect, whether known or suspected, and there is concern that partner agencies could have worked more effectively to protect the adult.
- if an adult in its area has not died, but the Safeguarding Adults Board knows or suspects that the adult has experienced serious abuse or neglect.

There are three purposes to be fulfilled by the Safeguarding Adults Review, namely, to establish whether there are lessons to be learned about the way in which professionals and agencies work together to safeguard adults with needs for care and support; to establish what those lessons are, how they will be acted upon and what is expected to change as a result and to improve inter-agency working and better safeguarding of adults at risk including the review of procedures where there may have been failures.

Prior to the Act coming in, Surrey agencies had voluntarily agreed to undertake reviews which at that time were called Serious Case Reviews. The 2 types of review are very similar. There has therefore been a seamless transition in Surrey between the two processes.

When a professional or a resident has a concern that an adult has experienced abuse or neglect and they believe the above circumstances may apply, they can notify the Surrey Safeguarding Adults Board and ask them to consider undertaking a Safeguarding Adults Review. Below is a summary of the notifications sent to the Board during this reporting year, together with the reason why these cases were not subject of a Review.

1 notification related to an adult who had died in a house fire. The circumstances had been subject of a detailed review by the Fire Service and the Safeguarding Adults Board decided there would be no further learning to be achieved through a Safeguarding Adults Review. The representative from Surrey Fire and Rescue Service presented the findings and recommendations of their review to the Board so it could be cascaded to all member agencies.

1 notification related to an older man with deteriorating health. He had been discharged from hospital to a care home, however, he subsequently had to return to hospital after having a fall. The Safeguarding Adults Board were made aware Adult Social Care were conducting their own review of this case therefore it was agreed

the learning from that should come back to the Board and a Safeguarding Adults Review was not required at this time.

3 notifications were received where the information showed there may have been failings by a single agency, however, there was nothing to suggest there were failings in the way agencies worked together. For this reason, the Safeguarding Adults Board decided not to conduct a review.

2 notifications were received relating to circumstances when an adult had died. However, in those cases, whilst the deaths had been unexpected, there was no evidence of abuse or neglect that led to the harm experienced by the adult therefore a Safeguarding Adults Review was not required.

Serious Case Review 'Mr J and Mr Y'

In early 2014, the Board started a Serious Case Review into the circumstances leading to the death of a man who was assaulted by another resident in a care home. The reason for doing the review was that this involved 2 adults, both or them being adults at risk of abuse and neglect therefore the Board wanted to know what could be done to prevent tragic incidents like this in the future. This review was finalised in January 2016. The Executive Summary of this review has been published on the Safeguarding Adults Board webpages.

This review took longer to complete than expected and the Safeguarding Adults Board has learned lessons and implemented new processes to avoid such delays in the future.

Recommendations on how agencies could improve related to:

- Risk assessments – ensure they include potential risks to others as well as to the vulnerable adults.
- Access to mental health assessments – ensuring all staff know how these can be arranged.
- Caring for residents who are being nursed in the same area as those who are able to move around – consider whether they should reside in different areas of the accommodation.
- Discharge from hospitals – ensure a summery of care plans includes any episode of violence or threatening behaviour.
- Safeguarding meetings – ensure that where a serious safeguarding incident involves both a victim and a potential perpetrator who are both adults-at-risk, their issues are to be addressed through separate safeguarding meetings

For more details on this Serious Case Review, please see the Surrey Safeguarding Adults Board webpages at: http://www.surreycc.gov.uk/safeguarding-adults-serious-case-reviews

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Funding and Expenditure

The estimated running costs of the Safeguarding Adults Board are £290,000 per year. This includes staffing costs, the costs of an independent chair, any Safeguarding Adults Reviews and training / events. This was the first year the Safeguarding Adults Board had a pooled partnership budget in place. Agencies agreed to contribute in similar proportions to those made to the Safeguarding Children's Board. This marked a significant commitment on the part of partners to work together and jointly take responsibility for decision making and running the Safeguarding Adults Board.

The chart below shows the financial commitment each agency signed up to:

Organisation	Contribution £	Percentage of total
Clinical Commissioning Groups (split between 5 groups)	£117,450	40.5%
Adult Social Care	£117,450	40.5%
Surrey Police	£29,000	10%
NHS Trusts (spilt between 8)	£14,500	5%
Districts & Boroughs (split between 11)	£11,605	4%
TOTAL	**£290,005**	

The expenditure of the Safeguarding Adults Board was less than anticipated. This was due to a number of factors:

- Staffing – it was planned to have 3 members of staff in place from April 2015. These included 2 new posts for a Board Manager and a Quality Assurance Manager plus 1 existing post for an administrator. There were difficulties in the recruitment process which led to the Board Manager being in post from mid December 2015 and the Quality Assurance Manager was in post until the next financial year.

- Safeguarding Adults Reviews – it is not possible to know in advance how many, if any, will be undertaken in a year. There are costs involved in a Review because the Safeguarding Adults Board appoints and pays for an independent author for the reports. In this year, no Reviews were started therefore these costs were not spent.

- Training – the Safeguarding Adults Board sets aside £30,000 each year to support a programme of multi-agency, classroom based training. The training is provided free to any agency that pays into the pooled budget although a £12 administration charge is applied. Any other agency pays to attend the courses. This year there was an underspend on the budget as some courses had to be cancelled when insufficient delegates had signed up. Existing delegates would be moved to the next available course when there were greater numbers attending. The cancellation of courses resulted in some funds being unspent.

The funds in the pooled partnership budget that were not spent, have been carried forward to the next year. Agencies that contribute to the budget will therefore be paying a smaller amount in 2016 – 2017.

Safeguarding Adults Board priorities next year

Board members attended 2 events at the end of the reporting period to set the priorities for 2016 - 2017. A new Annual Plan has been devised and is publically available on the Board's webpages. The actions aim to deliver the agreed strategic priorities which are:

1) Communications
2) Training
3) To embrace a culture of learning
4) Highlighting types of abuse and neglect that are frequently hidden from professionals or are hard to detect.
5) Prevention of abuse and neglect
6) Assurance of Safeguarding practices

There are several key developments occurring in the next year that will support safeguarding adults at risk. Whilst it is anticipated these will deliver significant benefits, there are also risks attached to changes in processes. The Safeguarding Adults Board will ensure it is regularly updated on progress in relation to these. In particular this relates to:

The establishment of a Multi Agency Safeguarding Hub (MASH), that will be expected to receive safeguarding concerns relating to adults and children from the whole of Surrey. This is expected to be in place by early October 2016. This project is a major change in the way safeguarding concerns are responded to and whilst it can deliver substantial benefits in sharing information, there are challenges in recruiting staff and implementing IT systems.

Adult Social Care is implementing a new IT system in autumn 2016. Similar to the situation with the MASH, the new system is expected to deliver significant advantages, however, it will also involve many staff having to receive appropriate training and files being moved from one system to another.

Recruitment to vacant posts is proving challenging for all agencies. Surrey benefits from a vibrant job market where staff can easily move elsewhere. In addition, jobs in London are easily accessible and offer higher salaries for staff who are able to travel.

Finally, all partners are working in an environment where budgets are being cut but the demand for services remains as high as ever. All agencies are going to have to find innovative ways of delivering more for less.

To find out more about Surrey Safeguarding Adults Board see:

- the Surrey Safeguarding Adults Board webpages at: http://www.surreycc.gov.uk/social-care-and-health/surrey-safeguarding-adults-board
- Data on Surrey's population and health needs at: https://www.surreyi.gov.uk

Appendices

Appendix A – The Board: Organogram, Terms of Reference, membership of the Board and attendance at Board meetings.

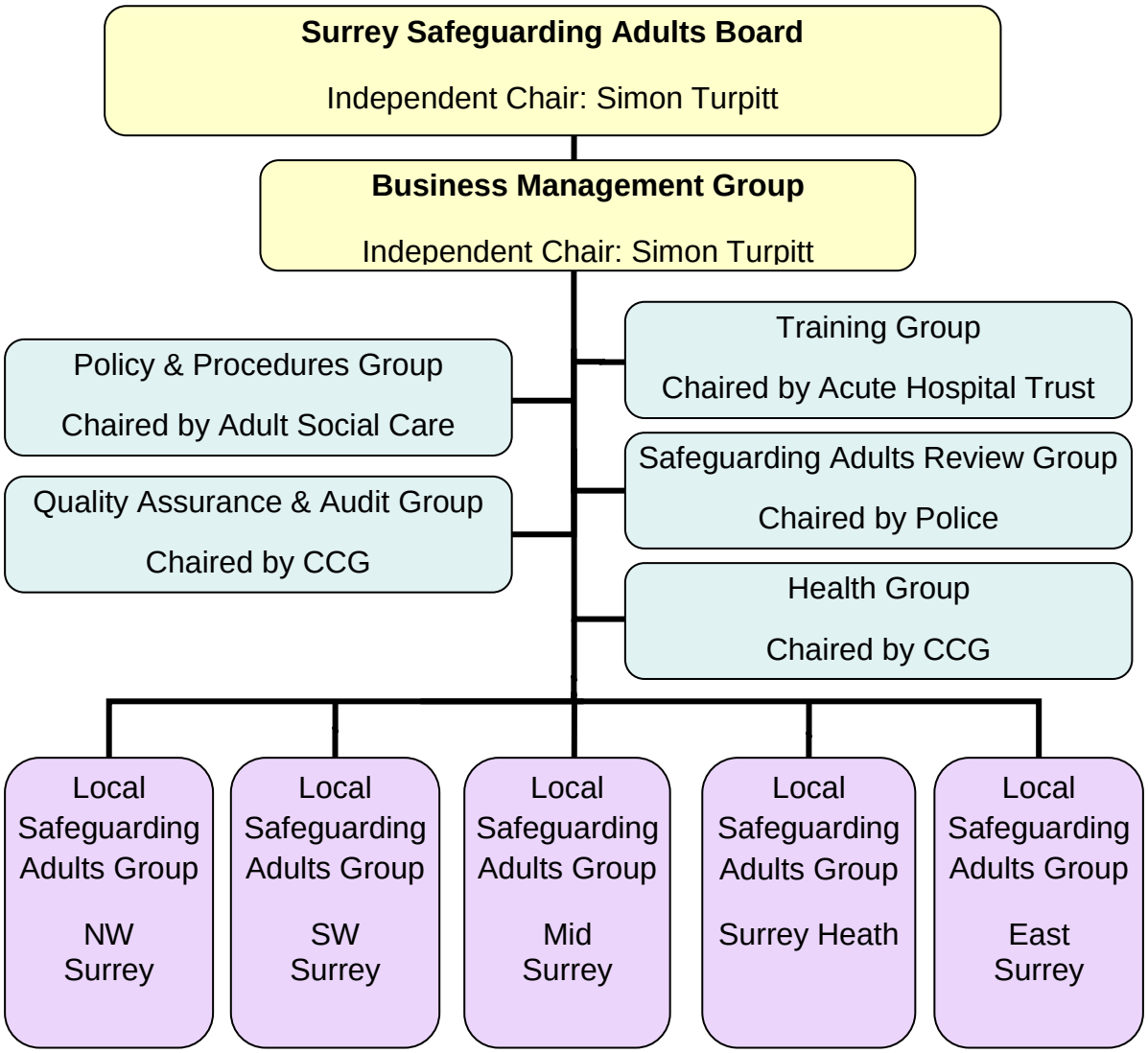
Appendix B – Safeguarding Adults Collection data submitted by Adult Social Care to the Department of Health

Appendix C – Raising awareness of safeguarding publicity campaign

Appendix D – Surrey Safeguarding Adults Board Annual Plan for 2015-2016

Appendix A – Information about the Surrey Safeguarding Adults Board

SSAB Organogram.



CCG = Clinical Commissioning Group

SURREY SAFEGUARDING ADULTS BOARD

TERMS OF REFERENCE

Policy statement

Surrey Safeguarding Adults Board's policy is to work with users, carers and other agencies to protect vulnerable adults from abuse, in line with the agreed procedures. Adults who are vulnerable will be treated in a way which respects their individuality and does not undermine their dignity or their human or civil rights. The decisions of all vulnerable adults will be respected unless there is a legal responsibility to intervene or where there is a risk to others.

The terms of reference for the Board are:

- To oversee the implementation and working of the Safeguarding Adults procedures, including publication, distribution and administration of the document
- The management of inter-agency organisational relationships to support and promote the implementation of the procedures
- To make links with other areas of policy and good practice guidance, including, contracting, care management and child protection within the statutory, voluntary and independent sectors
- To oversee the training strategy, and to maintain a strategic overview of Safeguarding Adults training
- To identify sources of funding required to implement the training and development needs associated with the procedures and to monitor the use of these resources
- To oversee the development of information systems which support the gathering of information necessary to carry out the evaluation of policy and practice
- To regularly review the monitoring and reporting of safeguarding adults concerns and investigations and to undertake a full review annually
- To make recommendations for revisions and changes necessary to the procedures, identified as a result of the monitoring process
- The promotion of multi-agency working in Safeguarding Adults, through formal events or information campaigns to ensure a wider professional and public understanding of adult abuse
- To support and advise operational managers working with abuse, through the local groups and sub groups
- To agree and maintain links with relevant corporate management groups
- Manage and support the work of the sub groups

Reporting and accountability

The Surrey Safeguarding Adults Board (SSAB) is constituted under "No Secrets" March 2000, Section 7 Guidance.

The SSAB manages the work of the local groups and the subgroups. Chairs of the above group will be members of the SSAB and provide annual reports to the SSAB as part of the business planning process.

The SSAB will set the key priorities of the sub groups, against the annual business plan.

The annual business plan will reflect:

- National requirements/guidance
- Relevant performance indicators
- Identified local needs.

SSAB Membership

Voluntary sector / User led organisations	Action for Carers (Surrey) Age UK, Surrey Surrey Coalition of Disabled People Surrey 50+
Emergency Services	Ambulance Services Surrey Police Surrey Fire and Rescue Service
Housing	Anchor Trust - Housing
Hospital / Acute Trusts	Ashford & St Peters NHS Foundation Trust Frimley Park Hospital NHS Foundation Trust Royal Surrey County Hospital NHS Foundation Trust St Helier & Epsom University Hospitals NHS Trust Surrey & Sussex Healthcare NHS Trust
Community Health providers	CSH Surrey First Community Health & Care Sensory Services by Sight for Surrey Virgin Care Surrey and Borders Partnership NHS Foundation Trust

Regulators, regional and representative organisations	Care Quality Commission NHS England Surrey Care Association
District and Borough Councils	Guildford Spelthorne Tandridge
Surrey County Council	Director of Adult Social Services, Interim Assistant Director for Service Delivery, ASC Business Intelligence Manager, ASC Area Directors, Interim Head of Safeguarding and Quality Assurance, legal services, Trading Standards.
Clinical Commissioning Groups	Surrey Downs CCG – hosting adult safeguarding in Surrey East Surrey, North West and Surrey Heath CCGs attend in their capacity as chairs of Local Safeguarding Adults Groups
Probation Service	Kent Surrey & Sussex Community Rehabilitation Company Ltd (formerly Probation) National Probation Service
Prison Service	Prison Governor at Highdown
Chairs of Local Safeguarding Adults Groups	
Cabinet Member for Adult Social Care, Wellbeing and Independence	
Surrey Safeguarding Children's Board Partnership Support Manager	
Community Safety Partnership	

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Appendix B – Safeguarding Adults Data

Safeguarding Adults Collection (SAC) 2015 - 2016

Data submitted by Adult Social Care to the Department of Health

Background

From 2015/16 onwards, the Department of Health introduced a new annual safeguarding statutory return called the Safeguarding Adults Collection (SAC). This superseded the Safeguarding Adults Return (SAR) which was submitted for the previous two years, and the Abuse of Vulnerable Adults (AVA) annual return which was submitted for the three years before that.

This report, where possible, compares Safeguarding data submitted by Surrey County Council Adult Social Care for the 2015/16 SAC with previous years' data submitted in the AVA and SAR returns. The source of this data is from the Adult Social Care Database (AIS).

Please note: data concerning 'Source of Referral', 'Nature of Abuse', 'Location of Abuse' and ‘Source of Risk' from 2013-14 onwards are based on 'referrals completed in the year‘, in comparison with earlier years taken from AVA submissions where data was based on 'new safeguarding referrals received in the year'.

This data is collected by Adult Social Care for the Department of Health as opposed to the Safeguarding Board and is not required to deliver explanations to variances and therefore as such is just data without being able to properly be turned into knowledge and action. Whilst it is useful for some context, the Board needs data which it can verify, turn into knowledge and then act upon and has set up for use next year a data set that will give us meaningful information that we can interrogate and act upon.

Definitions

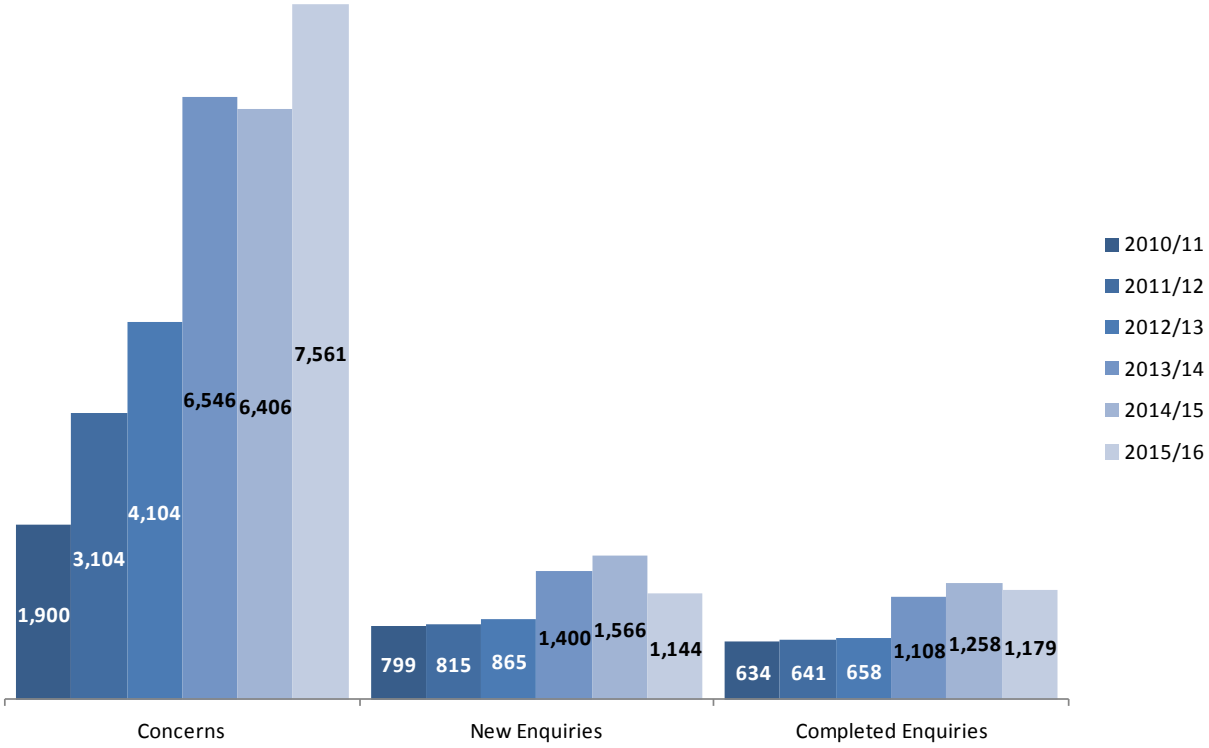
Safeguarding Concern

This is when a concern is raised where an adult at risk may have been, is, or might be, a victim of abuse. This is normally the first contact between the person raising the concern and the council about the alleged abuse. For example, if an individual phoned a council and expressed a concern that their elderly neighbour was being physically abused, this would be counted as a concern.

Safeguarding Enquiry

A safeguarding enquiry is where a concern is assessed by the council as meeting the local safeguarding threshold and a full safeguarding investigation is deemed necessary.

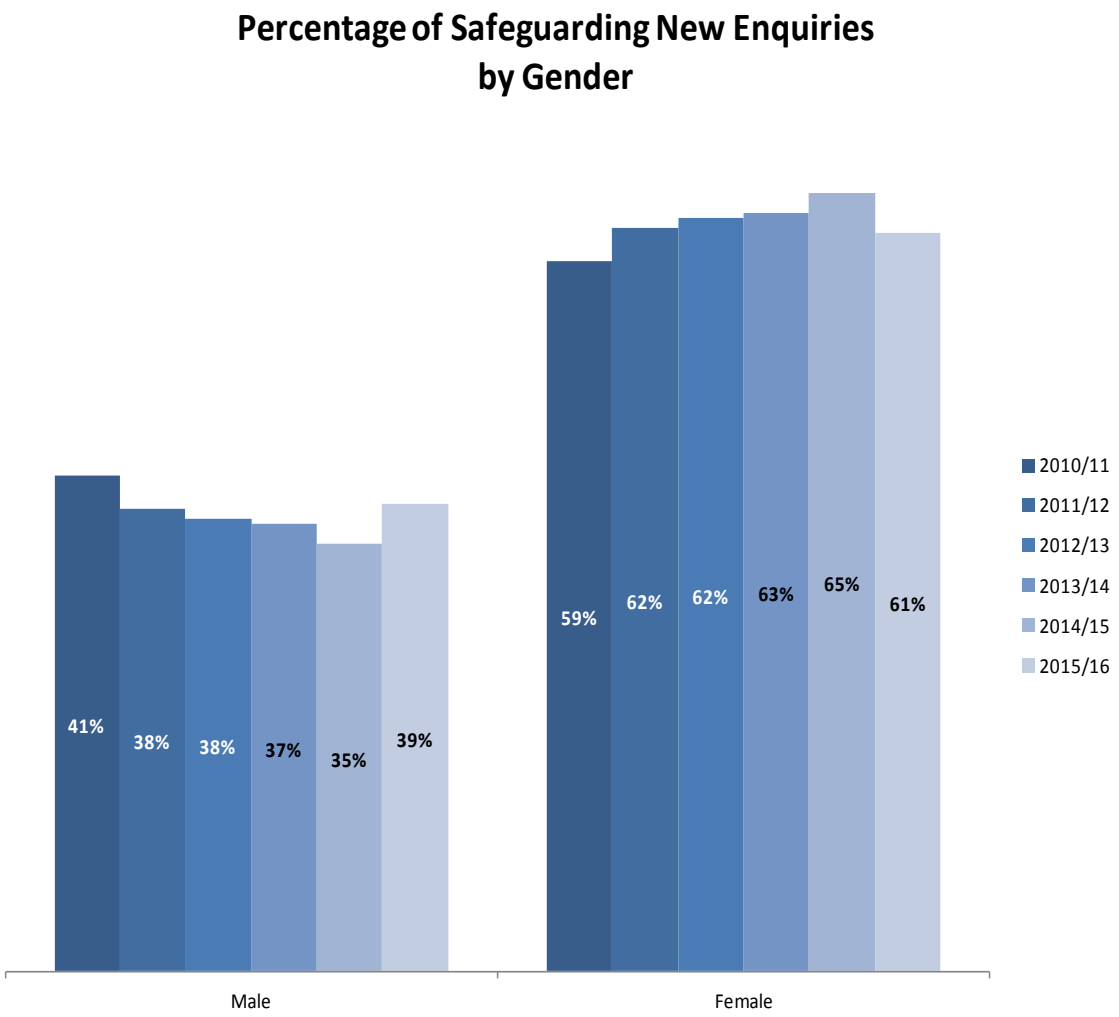
Number of Safeguarding Concerns, New Enquiries and Completed Enquiries



	Concerns	New Enquiries	Completed Enquiries	Concerns to Enquiries conversion rate
2010/11	1,900	799	634	42%
2011/12	3,104	815	641	26%
2012/13	4,104	865	658	21%
2013/14	6,546	1,400	1,108	21%
2014/15	6,406	1,566	1,258	24%
2015/16	7,561	1,144	1,179	15%
% change between 2014/15 & 2015/16	18%	-27%	6%	-38%

- 7,561 Concerns were received in 2015/16. This was a big increase compared with 2014/15 (6,406 Concerns).
- 1,144 Safeguarding Enquiries were received in 2015/16, which represented a decrease of 27% compared with 2014/15.
- The increase in Concerns and decrease in new Enquiries means that the proportion of Concerns that progressed to Enquiries decreased to 15% in 2015/16 (from 24% in 2014/15).
- 1,179 Safeguarding Enquiries were completed during 2015/16, which was a decrease of 6% compared with 2014/15.

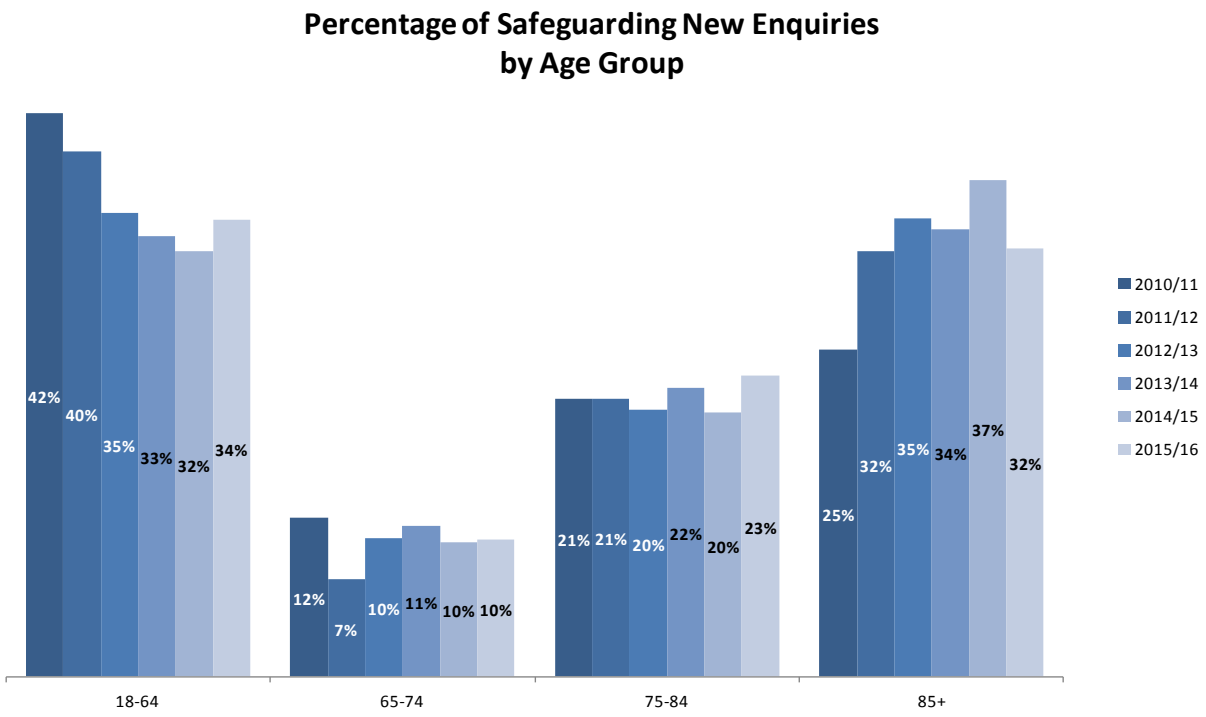
Safeguarding Enquiries by Gender



	Male	Female
2010/11	41%	59%
2011/12	38%	62%
2012/13	38%	62%
2013/14	37%	63%
2014/15	35%	65%
2015/16	39%	61%

In 2015 -2016 39% of adults at risk were male and 61% were female. The proportion of males saw a small increase for the first time but overall the gender breakdown of adults at risk has been fairly stable over the last few reporting year.

Enquiries by age group



	18-64	65-74	75-84	85+	Not recorded
2010/11	42%	12%	21%	25%	0
2011/12	40%	7%	21%	32%	0
2012/13	35%	10%	20%	35%	0
2013/14	33%	11%	22%	34%	0
2014/15	32%	10%	20%	37%	1%
2015/16	34%	10%	23%	32%	0

- In 2015/16 the 18-64 age group saw a small increase in the proportion of new Enquiries for the first time since 2010/11 but overall the proportion in this age group has been fairly stable for the last few reporting years.
- The 65-74 and 75-84 age groups also remain relatively stable.
- The 85+ age group shows the biggest change, a decrease of 5% since 2014/15

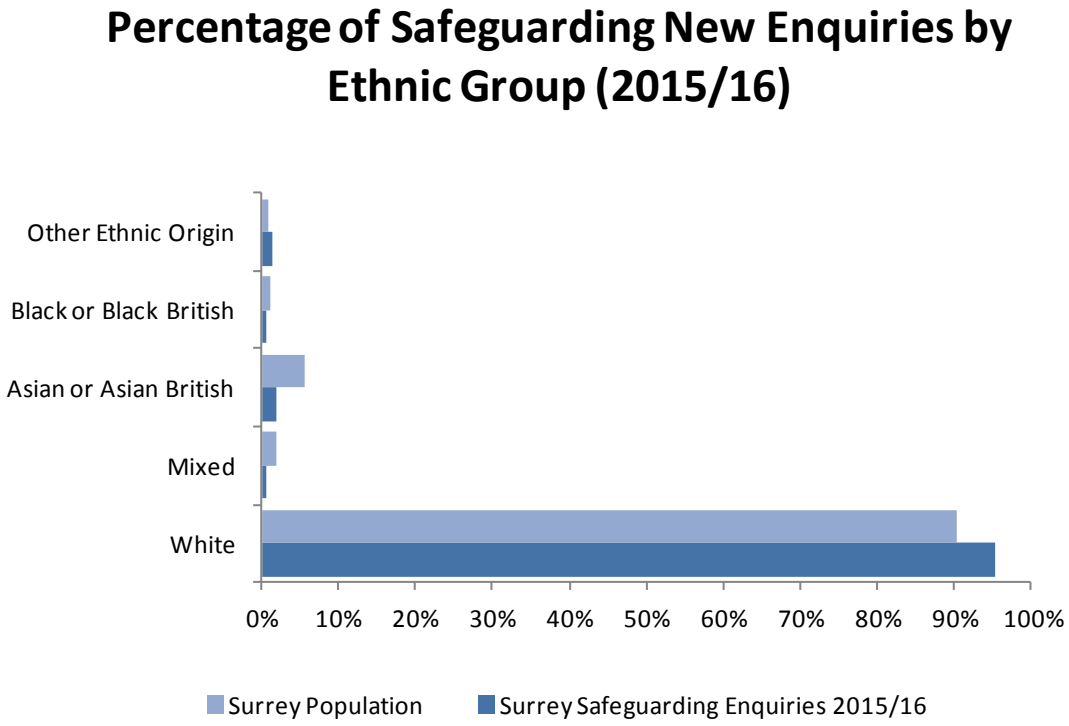
Enquiries by primary support reason and age group

Year	Physical Support		Sensory Support *[previously included with 'Physical Disability, Frailty and Sensory Impairment']*		Learning Disability		Mental Health		Support with Memory & Cognition *[previously included with 'Mental Health (including Dementia)']*		Social Support *[previously included with 'Substance Misuse' or 'Other Vulnerable People']*		No Support Reason *(previously included with 'Other Vulnerable People')*		All Primary Support Reasons
	18-64	65+	18-64	65+	18-64	65+	18-64	65+	18-64	65+	18-64	65+	18-64	65+	Age Not Known
2010/11	11%	40%	-	-	23%	3%	8%	12%	-	-	1%	2%	-	-	-
2011/12	9%	41%	-	-	21%	2%	9%	15%	-	-	0%	3%	-	-	-
2012/13	9%	46%	-	-	20%	3%	6%	13%	-	-	1%	4%	-	-	-
2013/14	9%	48%	-	-	17%	4%	7%	12%	-	-	2%	6%	-	-	-
2014/15	7%	44%	1%	2%	13%	2%	7%	4%	0%	8%	1%	4%	3%	4%	1%
2015/16	6%	41%	1%	1%	14%	2%	7%	4%	0%	12%	2%	2%	4%	3%	0%

- There has been a further small decrease in the proportion of adults at risk whose primary support reason is Physical Support. Until 2014/15, Sensory Support was also included with Physical Support.
- There was a 4% increase in the primary support reason of ‘Support for Memory and Cognition. Until 2014/15 this was previously included with Mental Health.

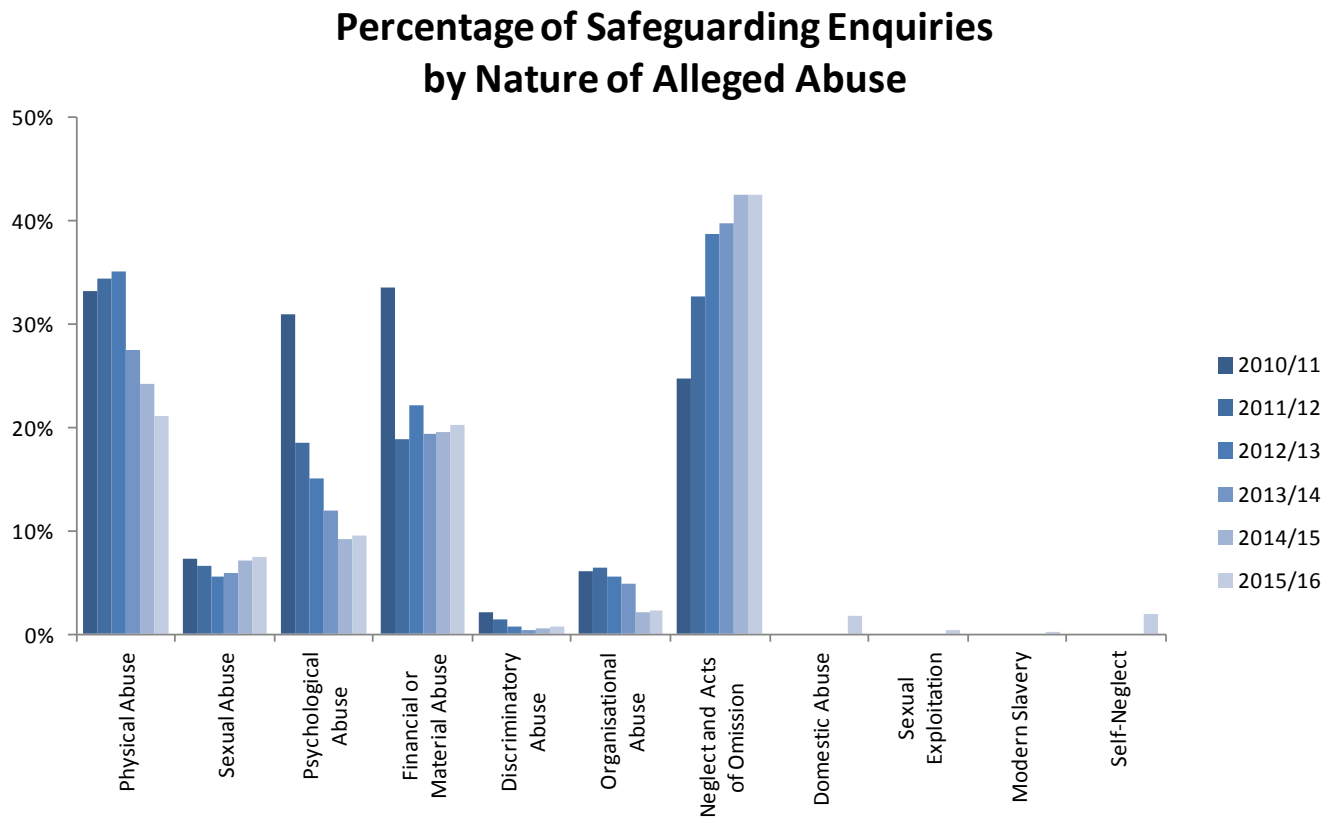
Enquiries by ethnic group

Surrey population figures are from the 2011 Census



- There has been no significant change in the ethnic breakdown of adults at risk for the last four years although the proportion where ethnicity was not known (either refused or not yet obtained at the time of the safeguarding incident) has increased each year. In 2015/16 the proportion not known represented 11% of all new Enquiries.
- Of those where ethnicity was known, in 2015/16 95% of adults at risk were from the White ethnic group, as they were in the previous two reporting years. This is 5% higher than the percentage in the general population in Surrey.
- The proportion of adults at risk from the Asian or Asian British ethnic group was the same as in 2014/15 (2%) and is still lower than the percentage in the general population in Surrey (6%).

Nature of alleged abuse

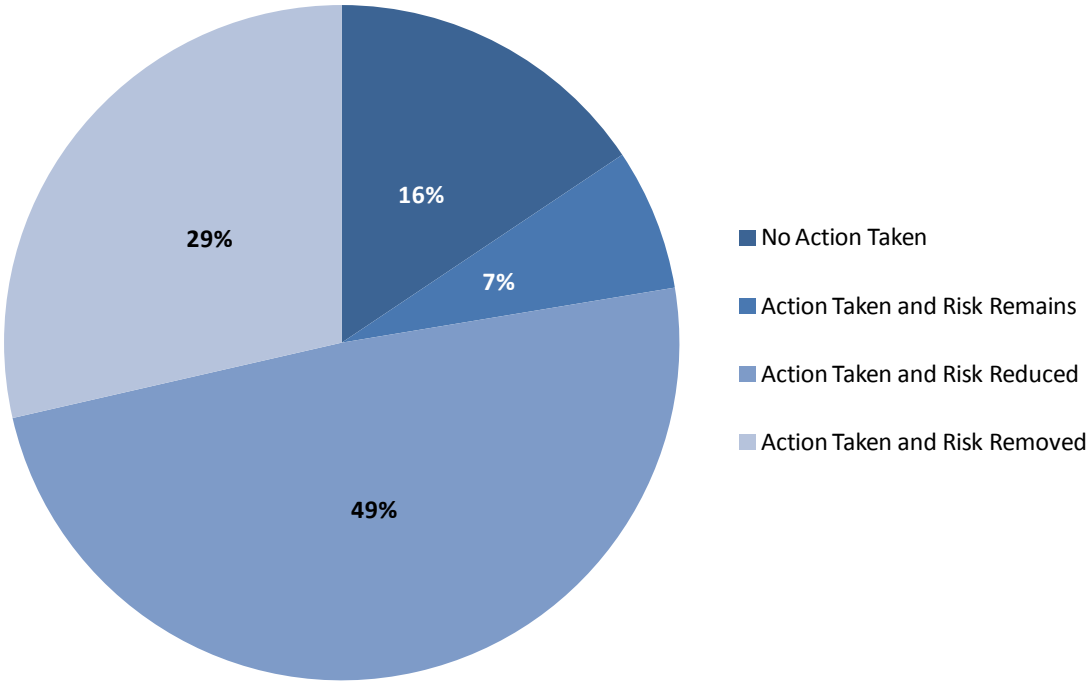


	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16
Physical abuse	33%	34%	35%	28%	24%	21%
Sexual abuse	7%	7%	6%	6%	7%	7%
Psychological abuse	31%	19%	15%	12%	9%	10%
Financial or Material abuse	34%	19%	22%	19%	20%	20%
Organisational abuse	6%	7%	6%	5%	2%	2%
Neglect & Acts of Omission	25%	33%	39%	40%	43%	43%
Domestic abuse	-	-	-	-	-	2%
Sexual exploitation	-	-	-	-	-	0
Modern slavery	-	-	-	-	-	0
Self-neglect	-	-	-	-	-	2%

Please note: multiple abuse types can be recorded for a single Enquiry. Percentages therefore add up to more than 100%.
All figures are rounded to the nearest whole number so figures below 1% may appear as 0%.

- Neglect and Acts of Omission remains the largest proportion (43%).
- In 2015/16 there was a small decrease in the proportion of Physical abuse (from 24% in 2014/15 to 21%) and there has been a continuing decrease over the last four reporting years.
- In 2015/16 the Department of Health introduced four new abuse type categories: Domestic Abuse, Sexual Exploitation, Modern Slavery and Self-Neglect. Figures for these were low (4% between them) and they offset the small decrease in the proportion of Physical Abuse.

Percentage of Completed Safeguarding Referrals by Action and Result (2015/16)



- In 2015/16 the majority of completed Enquiries had an outcome of Action Taken and Risk Reduced (49%).
- 29% of completed Enquiries had an outcome of Action Taken and Risk Removed while 16% had No Action Taken.
- In 7% of completed Enquiries the outcome was Action Taken and Risk Remains.

Mental Capacity

	2015/16
Adults involved in a safeguarding enquiry who lacked mental capacity	**30%**
- of which: support was provided by an advocate, family or friend	37%
Adults involved in a safeguarding enquiry who did not lack mental capacity	**70%**

- 30% of Enquiries indicated that the adult at risk lacked mental capacity to make decisions related to the safeguarding Enquiry.
- Of those, it was recorded that 37% were supported by an advocate, family or friend. This is an area of concern for ASC and further investigation into the reasons why this figure is low are being planned.

Making Safeguarding Personal – were the adults desired outcomes met

	2015/16
Individual was asked and desired outcomes were expressed	**48%**
of which: fully achieved	*62%*
partially achieved	*31%*
not achieved	*7%*
Individual was asked but no outcomes were expressed	**0%**
Individual was not asked	**52%**
Don't know	**0%**
Not recorded	**0%**
TOTAL	**100%**

- This was introduced by the Department of Health in 2015/16 and recording in Surrey started in September 2015.
- The proportion of adults at risk who were asked what their desired outcomes were was 48% of all enquiries completed during 2015/16. This figure reflects that the fact that recording of this information only started halfway through the reporting year.
- Of those who were asked and who expressed a desired outcome, 62% fully achieved their outcomes, 31% were partially achieved and 7% were not achieved.

Safeguarding Adults Collection (SAC) 2015/16 - Summary of Key Findings

- Low conversion rate of Concerns to Enquiries. Adult Social Care are investigating the reasons for this.
- Mental Capacity: Data indicates that there was a low proportion of adults lacking capacity, who were supported by an advocate, family member or friend. Adult Social Care are investigating the reasons for this

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Appendix C – Raising awareness of safeguarding publicity campaign

Details of raising awareness of safeguarding publicity campaign

Date: **November/December 2015**

Run by Adult Social Care Communications team on behalf of SSAB

Highlights

- 1,006 clicks on the online adverts generated through Google
- 1,171 visits to the Safeguarding web pages
- 74,235 impressions on the advert placed on the Metro online newspaper and 17 clicks from the advert to the Board's

Objectives

- **Raise awareness of adult abuse in Surrey**
- **Inform people what action to take if they experience abuse**
- Encourage people to report cases of abuse.

Target audience

- Older People
- Carers and families
- Friends and neighbours
- GPs (secondary audience).

Strategy and tactics

A repeated countywide campaign ran for one month using a mix of traditional communications channels and digital:

- Campaign creative – We used the same artwork that had been designed for the previous campaigns earlier in the year to get consistency of message .
- Radio advertising – We used the existing radio advert, which ran on the three main Surrey radio stations for two weeks.
- Online advertising –Google search advertising ran for the duration of the campaign. Metro online was also used to reach people who may be reading the online paper.
- Social media – Regular Tweets were uploaded encouraging residents to look out for the signs of abuse.
- Online – A web banner was uploaded onto the SCC website, this was then pulled through to the intranet for staff information.
- Surrey Communications Group – Information was provided to the Surrey Communications Group with detailed information on the campaign. We also included visuals that could be used on the group's websites.
- Issues monitor – Information was used in issues monitor, which is sent out every Friday to MP's and key figures in the community.
- Communicate – Information was included in the e-newsletter which is sent out weekly to members.

Campaign impact

Social media

Twitter
There were a total of 10 Tweets over the campaign period and these generated:

- Four likes
- Six Retweets

Metro online
There were 74,235 impressions of the advert and 17 clicks from Metro online to the protecting adults from harm webpages.

Google display ads

- There were 418,432 impressions of the advert placed through Google
- There were 1006 clicks on the adverts which took visitors through to the surreycc.gov.uk/protectingadultsfromharm webpage.

Web stats 2015
October 1,098 visits
November 1,171 visits showed an increas during the campaign (this reads that there were 1171 increased visits in Novemeber I don't think that's what we mean?)
December 737 visits

Calls to the Adult Social Care helpline 2015/16
October 2,856 calls (+0.4% from last year)
November 2,832 calls (+12.6% from last year)
December 2,506 calls (+10% from last year)
January 2,868 calls (-3.9% from last year)

(**Source**: Achiever database)

Number of Safeguarding Alerts 2015/16 received by the Adult Social Care helpline

October	157
November	184 showed an increas during the campaign
December	155
January	160

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Appendix D – Training data

The Board uses funding from their pooled partnership budget to put on a programme of multi agency training that any agency or individual in Surrey can access. The Board is committed to the benefits of classroom based, multi agency training as a way to achieve the best learning experience for delegates.

The Board has a Competency Framework that describes what level of training should be undertaken by people in different roles and agencies. This helps employers achieve a competent workforce by ensuring the training matches the skills the person needs to attain.

Below is a list of the courses made available and attended in this reporting year.

Making Safeguarding Personal (level 1 course) – aims to provide an enhance understanding of the key changes under the Care Act and how it is applied in day to day practice.

Self Neglect Awareness (level 2 course) – aims to give delegates the knowledge to identify self neglect, have a working knowledge of the Mental Health Act and Mental Capacity Act and understand the role key partners play in managing self neglect within the safeguarding pathway

Supporting the Process (level 2 course) - aims to enable the learner to recognise and identify potential abuse/neglect, being aware of risk management including those individuals with fluctuating mental capacity.

Managing Safely (level 3 course) – aims to improve the knowledge, skills and expertise of managers in respect of safe recruitment, supervision and management of staff who work with adults at risk. It also imparts knowledge of prevention, multi-agency working, the legal framework and national and local developments in Safeguarding Adults.

Provider led enquiries (level 3 course) – aims to give delegates the confidence and competence to undertake safeguarding enquiries and to construct an enquiry report that meets legal requirements.

Internal Management Reviews (level 4 course) – aims to enable participants to contribute to the Safeguarding Adult Review process by producing Internal Management Reviews (IMRs) in a consistent format,

which look openly and critically at organisational practice and make recommendations to improve future practice.

Numbers of people trained by the Board

Individual agencies will also have their own training programmes for their staff therefore this does not reflect the whole picture of staff training just the numbers trained by the Board.

SSAB Training Programme 2015 - 2016		
Course Title	**Training Level**	**Numbers attending**
Making Safeguarding Personal	1	44
Self Neglect Awareness	2	141
Supporting the Process	2	35
Managing Safely	3	49
Provider led enquiries	3	41
Internal Management Reviews	4	8

All member agencies who do not use the Board's multi agency training have to report to the board the levels and numbers trained so we can be assured that staff have the required skills in Safegaurding.

Appendix E – Surrey Safeguarding Adults Board Annual plan for 2015-2016

Surrey Safeguarding Adults Board

Annual Plan 2015 – 2016

Key Priorities for Surrey Safeguarding Adults Board
1 Achieving good outcomes for adults at risk and carers
2 Responding to reported abuse
3 Leadership
4 Safeguarding Adults Board
5 Safeguarding Adults Reviews: Safeguarding Adults Reviews (SAR), Multi Agency Reviews (MAR) and Reviews undertaken by other Boards/Partnerships
6 Making Safeguarding Personal
7 A Competent workforce

ACTIONS		
Action	**Owning sub-group or Board member & start date**	**Target delivery date**
1. Board's constitution *Key Priorities: 3 & 4* To implement a new constitution for the Board.	Start date: 1/4/15 Ownership: SSAB Chair	31/3/16
2. Performance Framework *Key Priorities: 1,3 & 4* To implement a new Performance Framework for the Board including data collection from statutory agencies and reporting from all sub-groups.	Start date: 1/4/15 Ownership: All Board agencies except the voluntary sector. Monitored by: BMG	1/6/15
3. Board's Annual Report *Key Priorities: 3 & 4* 3a) Require all responsible agencies to report against their contribution to the Board and the delivery of the plan for the Annual Report.	Start date: 1/4/15 Ownership: SSAB Chair Monitored by: Cabinet Associate for Safeguarding Adults	1/6/15
3b) Present the Board's Annual Report to SCC Cabinet and ensure it is available on the Board's webpages.	Start date:1/10/15 Ownership: SSAB Chair Monitored by: Cabinet Associate for Safeguarding Adults	1/11/15

ACTIONS		
Action	**Owning sub-group or Board member & start date**	**Target delivery date**
4. Care Act implementation *Key Priorities: 3 & 4* All Board agencies will implement the Care Act In particular: • Compliance with the Information Sharing Protocol (14.24) • Understanding roles & responsibilities (14.40) • Cooperation with partner agencies (14.51) • All staff and volunteers trained in safeguarding (14.86) • Accurate records are kept (14.87) • Know how they contribute to safeguarding adults (14.122) • Know what they have done to deliver the objectives and actions of this strategic plan (14.126) • Reported all concerns about abuse and neglect (14.170) • Chief officers sign off contributions to Strategic Plan and Annual reports (14.191)	Start date: 1/4/15 Ownership: All Board agencies except the voluntary sector. Monitored by: SSAB chair	31/3/16
5. Self Assessment Audit *Key Priorities: 4 & 7* 5a) All relevant Board members to undertake a safeguarding self assessment audit tool and associated Action Plan.	Start date:1/4/15 Ownership: All Board agencies except the voluntary sector. Monitored by: SSAB chair	1/7/15

ACTIONS		
Action	**Owning sub-group or Board member & start date**	**Target delivery date**
5b) To actively engage in the Board's 'Challenge and Support' event.	Start date:1/7/15 Ownership: All Board agencies except the voluntary sector. Monitored by: SSAB chair	1/11/15
6. SSAB Multi-Agency Procedures *Key Priorities: 1 & 2* 6a) To review and revise the SSAB Multi-Agency Procedures, Information and Guidance as required to ensure it always reflects current safeguarding best practice. 6b) To review the above document 6 months after revisions have been made in response to the Care Act.	Start date: 1/6/15 Ownership: Policy & Procedures group chaired by ASC Monitored by: SSAB Chair	31/3/16
7. Review of safeguarding process *Key Priorities: 1,2 & 6* Following the implementation of the Care Act, to undertake a review of the safeguarding process from the point of view of: i) the adults at risk ii) the carer iii) the referrer To consider communication, response times outcomes and the extent to which the adult at risk, carer and referrer were the centre of the process.	Start date: 1/10/15 Ownership: Quality Assurance & Audit group chaired by Surrey Downs CCG Monitored by: SSAB Chair	30/3/16

ACTIONS		
Action	**Owning sub-group or Board member & start date**	**Target delivery date**
8. File audit review *Key Priorities: 1,2 & 3* Undertake multi-agency case file audits and share the learning from these with the Board to ensure the Board's vision is reflected in the adult at risk's experience of the safeguarding process.	Start date: 1/4/15 Ownership: Quality Assurance & Audit group chaired by Surrey Downs CCG Monitored by: SSAB Chair	1/12/15
9. Safeguarding Communications Strategy *Key Priorities: 3,4 & 7* Develop and implement a multi-agency communications strategy in relation to safeguarding, making use of social media.	Start date: 1/4/15 Ownership: ASC Communications Team Monitored by: SSAB Chair	30/12/15 & ongoing
10. Working with self-funders and hard to reach groups *Key Priority: 7* To identify and undertake activities to raise awareness of adult safeguarding with: i) people who do, or who may, fund their own or another's care; ii) people who have characteristics that make them less willing or less able to engage with statutory services.	Start date: 1/4/15 Ownership: Local Safeguarding Adults Groups chaired by: East – East Surrey CCG Mid - ASC SW - ASC NW – NW Surrey CCG Monitored by: BMG	31/3/16

ACTIONS		
Action	**Owning sub-group or Board member & start date**	**Target delivery date**
11. Learning from national SARs, MARs, SCRs & Domestic Homicide Reviews (DHRs) *Key Priority: 5* 11a) Agree the process by which national SARs (adults), MARs, SCRs (childrens) and DHRs are identified and the lessons learned are implemented by Board agencies.	Start date:1/4/15 Ownership: Policy & Procedures chaired by ASC Monitored by: SSAB chair	1/7/15
11b) Where themes emerge from Reviews, the Board will support agencies to understand the lessons learned and recommendations through learning events and communications.	Start date:1/4/15 Ownership: Policy & Procedures chaired by ASC Monitored by: SSAB chair	31/3/16
12. Making Safeguarding Personal *Key Priority: 6* Review the impact of personalisation on Adult Safeguarding and ensure processes support this programme.	Start date: 1/6/15 Ownership: Policy & Procedures chaired by ASC Monitored by: SSAB chair	1/11/15
13. Training *Key Priorities: 1 & 7* 13a) Review the effectiveness of the Board's multi-agency Training Programme 2014-15 and prepare the Programme for 2015-16.	Start date: 1/4/15 Ownership: Training Group chaired by Acute Trust – ASPH / RSCH Monitored by: SSAB chair	1/6/15 & ongoing

ACTIONS		
Action	**Owning sub-group or Board member & start date**	**Target delivery date**
13b) To review the effectiveness of safeguarding knowledge and evaluation of practices following safeguarding training.	Start date: 1/7/15 Ownership: Training Group chaired by Surrey Care Assoc Monitored by: SSAB chair	31/3/16
13c) To review the Board's Competency Framework to ensure it delivers the benefits anticipated.	Start date: 1/4/15 Ownership: Training Group chaired by Acute Trust – ASPH / RSCH Monitored by SSAB chair	1/6/15 & ongoing
14. Effective sharing & use of information – for learning and prevention *Key Priorities: 1,2 & 6*	Start date: 1/4/15 Ownership: Local Safeguarding Adults Groups chaired by: East – East Surrey CCG Mid - ASC SW - ASC NW – NW Surrey CCG Monitored by: SSAB chair	31/1/16
15. Effective multi-agency discharge planning for adults at risk leaving hospital *Key Priorities: 1 & 7* Rapid Improvement Event (RIE) work will be re-energised and audited.	Start date: 1/9/15 Ownership: Quality Assurance & Audit chaired by Surrey Downs CCG Monitored by: SSAB chair	30/3/16

ACTIONS		
Action	**Owning sub-group or Board member & start date**	**Target delivery date**
16. Ensuring voices of carers and adults at risk are heard by the Board *Key Priorities: 1 & 6*	Start date: 1/4/15 Ownership: 1) All Board members 2) Local Safeguarding Adults Groups chaired by: East – East Surrey CCG Mid - ASC SW - ASC NW – NW Surrey CCG Monitored by: SSAB chair	30/3/15
17. Mental Capacity Act & Deprivation of Liberty Safeguards *Key Priority: 7* Improving knowledge and application of the law.	Start date: 1/4/15 Ownership: All Board members Monitored by SSAB chair	30/6/15

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