

# Lewisham

## Safeguarding Adults Board

---

A working partnership to prevent abuse



# Lewisham Safeguarding Adults Board Annual report

---

April 2015 – March 2016

# Contents

Executive Summary	3
Introduction	4
What does Safeguarding Adults mean?	4
What are the main types of abuse?	4
Safeguarding Adults Principles	7
Key Achievements of the Board 2015–16	8
Achievements of the Sub-groups	9
Adult Safeguarding Board Member reports 2015–16	11
● London Borough of Lewisham Adult Social Care	11
● Lewisham Clinical Commissioning Group (LCCG)	16
● South London and Maudsley NHS Foundation Trust	20
● Safer Lewisham Partnership	22
● Metropolitan Police Lewisham	24
● London Fire Brigade	25
● London Ambulance Service NHS Trust	26
● Healthwatch Bromley & Lewisham	27
● Voluntary Action Lewisham	28
London Borough of Lewisham Safeguarding Data 2015–16	29
Looking ahead to 2016–17	33
Lewisham Safeguarding Adults Board Team Contact Details	37
Safeguarding further reading	37
Key community groups	37

## Executive Summary

Lewisham Safeguarding Adults Board (LSAB) are pleased to present the second Annual Report 2015–16, following on from the 2014–15 Annual Report.

There were some significant changes over the last few months of 2015–16; one of which is the departure of the former LSAB Chair, Chris Doorly. Chris was very influential in her efforts to shape and prepare the board for the challenging regulatory changes set out in the Care Act 2014. LSAB would like to take this opportunity to thank Chris for her hard work and commitment to the board. Aileen Buckton, Executive Director and Director of Adult Social Care is covering the vacancy, as interim chair, whilst the recruitment of the new chair takes place.

LSAB would like to extend its appreciation to the board members, external organisations and external stakeholders who have contributed to this report. LSAB is grant funded by the following board member organisations; Lewisham Adult Social Care, NHS Lewisham Clinical Commissioning Group, Lewisham & Greenwich NHS Trust, South London & Maudsley NHS Foundation Trust, Metropolitan Police Service, and the National Probation Service (now split into the National Probation Service and The London Community Rehabilitation Company Ltd). The board received a voluntary contribution from the London Fire Brigade.

An additional change outlined in the 2014–15 annual report was the recruitment of the LSAB Business Team that consists of; Business Manager, Development Officer and Board Administrator. The business team came into post by December 2015. The LSAB Business Team has been working hard to assist the board to meet their 2015–16 objectives set out in last year's report.

The board aims to build on its adult safeguarding successes from 2014–15 with the implementation of the Care Act 2014 and the London Multi-agency Adult Safeguarding Policy & Procedures. Multi-agency working is key to the LSAB achieving its aims and objectives and this has been demonstrated through a collaborative approach to revising safeguarding policies, safeguarding adults training, and circulating safeguarding adults data.

LSAB abides by the principle that “Safeguarding is Everybody’s Business”; this is echoed by board members raising awareness of abuse and neglect and how abuse is reported. Creating positive outcomes for people is of prime importance to the board and this is being achieved by partner organisations incorporating ‘making safeguarding personal’ at a strategic and operational level. The board is engaging with community and voluntary groups, and faith organisations to promote the safeguarding of adults at risk in Lewisham.

## Introduction

This report looks at the Lewisham Safeguarding Adults Board in its first statutory year of operation 2015–16, working together to keep adults safe in Lewisham.

### What does Safeguarding Adults mean?

In summary the board aims to:

- Promote awareness of what abuse is, how to stay safe and how to seek help;
- Establish what being safe means to the person being abused and how that can be best achieved;
- Learn lessons and make changes that will prevent abuse or neglect from happening.

<b>What are the main types of abuse?</b>	
<b>Abuse Type</b>	<b>Definition</b>
<b>Domestic Abuse</b>	Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over, who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass but is not limited to the following types of abuse: Psychological; Physical; Sexual; Financial; Emotional. Domestic Abuse includes Controlling and Coercive.
<b>Disability Hate Crime</b>	Any criminal offence, which is perceived, by the victim or any other person, to be motivated by hostility or prejudice based on a person's disability or perceived disability. The Police monitor five strands of hate crime, Disability; Race; Religion; Sexual orientation and Transgender.
<b>Discriminatory Abuse</b>	Discrimination on the grounds of race, faith or religion, age, disability, gender, sexual orientation and political views, along with racist, sexist, homophobic or ageist comments or jokes, or comments and jokes based on a person's disability or any other form of harassment, slur or similar treatment. Excluding a person from activities on the basis they are 'not liked' is also discriminatory abuse.
<b>Female Genital Mutilation (FGM)</b>	Procedures that intentionally alter or injure female genital organs for non-medical reasons.
<b>Forced Marriage</b>	A marriage in which one or both of the parties are married without their consent or against their will.

<b>Abuse Type</b>	<b>Definition</b>
<b>Financial or Material Abuse</b>	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, or the misuse or misappropriation of property, possessions or benefits.
<b>Hate Crime</b>	Any criminal offence committed against a person or property that is motivated by hostility towards someone based on their disability, race, religion, gender identity or sexual orientation.
<b>Honour Based Violence</b>	Includes domestic violence, concerns about forced marriage, enforced house arrest and missing person's reports.
<b>Human Trafficking</b>	The supply of people and services to a customer, all for the purpose of making a profit.
<b>Mate Crime</b>	When vulnerable people are befriended by members of the community who go on to exploit and take advantage of them.
<b>Modern Slavery</b>	Slavery, servitude and forced or compulsory labour.
<b>Neglect and Acts of Omission</b>	Ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, social care or educational services, and the withholding of the necessities of life such as medication, adequate nutrition and heating. Neglect also includes a failure to intervene in situations that are dangerous to the person concerned or to others, particularly when the person lacks the mental capacity to assess risk for themselves.

<b>Abuse Type</b>	<b>Definition</b>
<b>Organisational Abuse</b>	The mistreatment, abuse or neglect of an adult by a regime or individuals in a setting or service where the adult lives or that they use. Such abuse violates the person's dignity and represents a lack of respect for their human rights.
<b>Physical Abuse</b>	Assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.
<b>Psychological Abuse</b>	Emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.
<b>Restraint</b>	Unlawful or inappropriate use of restraint or physical interventions. Someone is using restraint if they use force, or threaten to use force, to make someone do something they are resisting, or where an adult's freedom of movement is restricted, whether they are resisting or not.
<b>Sexual Abuse</b>	Rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.
<b>Sexual Exploitation</b>	Exploitative situations, contexts and relationships where adults at risk (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities.

## The board's approach is underpinned by the six Safeguarding Adults Principles

<b>Safeguarding principle</b>	<b>What does this mean for you?</b>
<b>1. Empowerment</b>	"My voice is heard to make decisions about what makes me feel safe and the outcomes I want."
<b>2. Prevention</b>	"I receive clear information about what abuse is and where to seek help."
<b>3. Proportionality</b>	"I know that professionals will keep me involved as much as I am able to."
<b>4. Protection</b>	"I receive clear information about reporting abuse and I receive continued help and support throughout the process."
<b>5. Partnership</b>	"I know all the professionals involved are working hard and sharing information safely to provide the best outcome for me."
<b>6. Accountability</b>	"I am aware that everyone involved in my care and support needs are responsible for the actions they take that affect me."

Lewisham Safeguarding Adults Board adopted the London Multi-agency Adult Safeguarding Policy & Procedures from April 2016.

## Key Achievements of the Board 2015–16

- **Multi-agency working**

Organisations are clear about their internal governing roles and responsibilities and are working collaboratively to respond to reports of abuse and neglect.

- **LSAB away day**

This workshop took place in June 2015, to discuss the changes outlined in the Care Act 2014, Making Safeguarding Personal (MSP), the review of governance structures and the relationship between LSAB and commissioning.

- **Safeguarding Adults Policy and Procedures**

Ensuring the new statutory duties under the Care Act 2014 for safeguarding adults were implemented and understood among board members and partner organisations.

- **LSAB Compact**

The board has revised and updated the LSAB Compact in line with current legislation. The compact was signed and agreed by board members.

- **LSAB Strategy 2015–18**

The board produced a strategic 2015–18 plan setting out its vision and aims. Further details on this plan will be explored in the '[Looking ahead to 2016–2017](#)' section of this report.

- **Re-forming Sub-groups**

The terms of reference for all the Sub-groups and the outputs required were reviewed to determine if there were SMARTer ways of achieving the desired outcomes, to ensure we are making effective use of member's time.

- **Communication Strategy**

A two year communication strategy has been produced to support safeguarding, awareness raising and partnership working. This involves service users and carers.

- **Information Sharing Agreement**

The board has updated its Information Sharing Agreement between the Metropolitan Police Service, London Borough of Lewisham and Lewisham Safeguarding Adults Board. This agreement sets out how confidential and sensitive information is shared between the agencies to comply with the Data Protection Act 1998, whilst making reference to the Human Rights Act 1998.

- **Care Act Compliance Presentations**

Board members have updated their internal governance procedures to comply with the changes outlined in the Care Act 2014. At present, South London and Maudsley NHS Foundation Trust, London Borough of Lewisham and Lewisham & Greenwich NHS Trust have presented their compliance plans to the board.



## Achievements of the Sub-groups

### **Safeguarding Adults Review Panel (SARP)**

The Safeguarding Adults Review Framework has been updated in line with the Care Act 2014 and the London Multi-agency Adult Safeguarding Policy & Procedures. There were no Safeguarding Adult Reviews (SAR's) undertaken in 2015–16, but four cases were referred to the board in March 2016 of which two cases are likely to meet the SAR criteria. These cases will be discussed in depth with the Safeguarding Adults Review Panel (SARP) and if it is decided that a SAR will be conducted, the multi-agency outcomes, findings and learning will be published in the 2016–17 LSAB Annual Report.

### **Quality and Performance Sub-group**

The LSAB Quality Assessment Framework has been updated in line with the London Multi-agency Adult Safeguarding Policy & Procedures. Further development work is due to continue on this framework to ensure that the board has better oversight of any potential safeguarding activity.

### **Workforce Development**

The board members have been incorporating Making Safeguarding Personal into their staff training content

ensuring it is compliant with the Care Act 2014 and London Multi-agency Adult Safeguarding Policy & Procedures.

### **Policies & Procedures**

Board members have been provided with updates to the Care Act Statutory Guidance and the London Multi-agency Adult Safeguarding Policy & Procedures.

Lewisham Adult Social Care, Lewisham and Greenwich NHS Trust and Lewisham CCG have worked in partnership to ensure that the Serious Incident (SI) investigation and Root Cause Analysis (RCA) process in relation to the investigation of pressure ulcers and Safeguarding processes are aligned.

### **Communication & Engagement**

The board has formed strong safeguarding working links with the following community based agencies, these include; Community Connections, Lewisham Disability Coalition, Voluntary Action Lewisham, Healthwatch Bromley and Lewisham, Carers Lewisham and Positive Ageing Council.

**Members of the board's Business Team have attended and facilitated at the following events:**

**Lewisham Pensioners Forum Meeting, January 2016** – This forum was well attended and focused on issues that affect older people in the borough. The Chair of the forum reported that there could be an increase in safeguarding adult awareness among the older generation. The board's business team plans to deliver a presentation at a future forum meeting to raise awareness of safeguarding issues that affect the older population in Lewisham.

**Advice Lewisham open day, February 2016** – This open day was held in Lewisham Council Civic Suite and provided an insight into current safeguarding advice and information being provided to people living in Lewisham. The board intends to promote safeguarding adults information at future Advice Lewisham open days and forum meetings.

**Positive Ageing Council Meeting, March 2016** – This meeting was attended by over 100 members and provided an opportunity for the board to raise awareness of abuse and advise people on how to raise a safeguarding alert. Booklets on what abuse is and how to seek help, promoting the Social Care Advice & Information Team (SCAIT) were distributed, supplied by Independent Age.

# Adult Safeguarding Board Member reports 2015–16

## From board member organisations and key partners

The following reports are provided by the partners responsible for protecting adults in Health and Social Care settings.

### London Borough of Lewisham Adult Social Care

#### **Safeguarding Overview 2014–15**

- Adult Social Care (ASC) have revised their Adult Safeguarding policy and procedures in line with the Care Act 2014 and the revised London Multi-agency Adult Safeguarding Policy and Procedures.
- Adults who have difficulty engaging in the safeguarding investigation process have received the provision of advocacy.
- Processes are now in place to assist with the regular auditing of safeguarding casework to identify good practice and areas for improvement.
- Responding effectively to the increase in demands of Deprivation of Liberty Safeguards (DoLS) applications.
- Revised safeguarding pathway following the restructure of ASC and the development of Neighbourhood teams. Practice guidance developed to include new abuse types and to ensure a more robust and consistent approach to managing safeguarding concerns.
- Training with duty staff around risk assessment and protection planning.

## What was achieved in 2015–16?

- Plans made to update the Client Database to incorporate Making Safeguarding Personal (MSP) so that clients are fully engaged with the safeguarding process.
- Development of a DoLS team to ensure requests under the Deprivation of Liberty Safeguards were managed effectively.
- Additional Best Interest Assessors trained.
- Review of safeguarding pathways implemented in 2014-15 following integration of the Social Care Advice & Information Team (SCAIT) and the Neighbourhood teams.
- Safeguarding Adults Training was developed in line with current legislation to improve practice.
- Enhanced partnership working around pressure ulcer care referral pathways, in partnership with Lewisham Clinical Commissioning Group (LCCG) and Lewisham and Greenwich NHS Trust ensuring that the Serious Incident (SI) and safeguarding processes are aligned.
- Close partnership working between LB Lewisham, LCCG, NHS England and Care Quality Commission (CQC) in relation to a major enquiry involving Organisational abuse.
- Positive feedback from Association of Directors of Adult Social Services (ADASS) and CQC in relation to the management of the closure of two nursing homes following liquidation.

## What are their Safeguarding plans for 2016–17?

- Ongoing implementation of the London Multi-agency Adult Safeguarding Policy & Procedures, launching and embedding Lewisham Practitioners Protocol.
- Redesign of safeguarding pathway and workflow processes in line with the Care Act 2014 and the London Multi-agency Adult Safeguarding Policy & Procedures.
- All staff to receive training with focus on identifying and recording individual's identified outcomes or wishes.
- Embedding the principles of Making Safeguarding Personal across all adult services.
- Development of a Community Pressure Ulcer panel in partnership with LCCG and Lewisham and Greenwich NHS Trust to oversee and review all pressure ulcer investigations, and identify those cases involving potential neglect which would require a Section 24 safeguarding enquiry.
- In partnership with the Royal Borough of Greenwich, REED and Training Provider, review safeguarding training requirements and commission additional training for Enquiry Officers and Safeguarding Adult Managers (SAMs).
- Reviewing working functions between SCAIT and Multi-Agency Safeguarding Hub (MASH).

## **Making Safeguarding Personal (MSP)**

MSP aims to facilitate a shift in emphasis from processes to a commitment to improve outcomes for people at risk of harm. The key focus is on developing a real understanding of what people wish to achieve, recording their desired outcomes and then seeing how effectively these outcomes have been met in a Section 42 Safeguarding Enquiry.

In 2015–16 work began on developing a new safeguarding module in the LAS system, Lewisham's client database, to ensure that Adult Social Care (ASC) can record and capture people's desired outcomes in safeguarding interventions. A set of forms were developed to enable us to record the outcomes people want at the start of safeguarding activity. At the end of safeguarding activity, follow-up discussions take place to see to what extent their desired outcomes have been met, and to ask specific questions to help us evaluate the effectiveness of the safeguarding intervention and to better understand people's experience of the whole process. Recording the results in this way will be used to inform practice and provide aggregated outcomes information for the board. After an initial testing phase the new system will go live in the summer of 2016–17.

## **Mental Capacity**

The Mental Capacity Act Deprivation of Liberty Safeguards (MCA DoLS) came into effect on 1st April 2009. They protect the human rights of adults at risk by providing for the lawful deprivation of liberty of those people who lack the capacity to consent to arrangements made for their care or treatment in either hospitals or care homes, but who need to be deprived of liberty in their own best interests, to protect them from harm.

The safeguarding board has a responsibility to oversee how these duties are carried out and receive regular reports on the use of restrictions or restraints granted by the authorisation of a DoLS order by the supervisory body (the Local Authority).

Unlike many other Local Authorities, Lewisham Adult Social Care did not have to implement a waiting list for DoLS assessments. In line with national trend, Lewisham experienced a ten-fold increase in the number of applications received in 2014–15, receiving 351. This upward trend continued in 2015–16, rising by 41%, and 592 applications were made under the safeguards. The percentage of referrals leading to an authorisation also increased from 65% to 80% in 2015–16.

Since 2009 Lewisham Adult Social Care established close working relationships with a number of independent Section 12 trained mental health assessors in the South East region, and we have established links with Doctors in other parts of the UK where Lewisham residents are placed.

Although 2015–16 presented a number of new challenges for the DoLS service which resulted in delays in completing all six qualifying assessments. A total of 72% of all assessments were completed within the statutory timescales of seven or twenty one days. Where delays did occur, the vast majority, (75% for urgent requests and 70% for standard requests) were only delayed by one to ten days.

## Lewisham Clinical Commissioning Group (LCCG)

### **Safeguarding Overview 2014–15**

**Pressure Care Initiatives** – A review of the 2014–15 cohort of people is to be undertaken to look at what has happened since the learning, and what actions or practice issues should change or be put in place to prevent a reoccurrence in the form of a local action plan.

### **Serious Incidents (SI's)**

LCCG takes a serious view of all incidents resulting in patient harm regardless of the degree of harm caused, and, including where there has been no harm or a “near miss”. Healthcare providers that we commission are able to learn from the incident and able to take action to try and prevent it from happening again. NHS England has a nationally agreed process for learning from the most serious incidents known as the NHS Serious Incident Framework. The framework applies to those “events in health care where the potential for learning is so great, or the consequences to patients, families and carers, staff or organisations are so significant, that they warrant using additional resources to mount a comprehensive response.

LCCG's role in relation to Serious Incidents (SI's) reported by NHS providers is to seek assurance

that the provider has robust processes to identify, investigate and learn from the rare occasions when things go seriously wrong. Providers quickly inform the CCG when a SI has occurred and the CCG and provider work together to agree the type of investigation that is required. Almost all SI's are investigated by the provider themselves using a Root Cause Analysis method but sometimes an independent investigation is carried out. The investigation report is reviewed by clinical experts commissioned by the CCG to ensure that factors that contributed to the incident and root causes have been identified along with credible action plans to reduce the possibility of the incident occurring again. The CCG follows up with the provider to ensure that the recommended actions have been fully implemented.

The CCG also seeks to assure itself that patients affected by the incident and their families have been involved in the investigation and that their concerns and questions have been addressed. During the financial year 2015–16 the CCG was informed of 16 Serious Incidents by our main mental health provider and 51 by our local acute hospital.



## **LCCG Assurance Deep Dive Review into Safeguarding – January 2016**

LCCG participated in the NHS England deep dive review of Safeguarding Adults and Children as part of the assurance process for CCG's in 2015–16. Areas of good practice is listed below. NHS England and London Region have included this information in their London overview report.

### **Areas of good practice identified**

**Governance, Systems and Processes** – LCCG have employed a Primary Care Adult Safeguarding Nurse instead of a named General Practitioner (GP) to support adult safeguarding in general practice and primary care. This role will also support training on domestic violence sourced via Identification and Referral to Improve Safety (IRIS) project. The Safeguarding Children & Adults commissioning policy has been updated to incorporate Female Genital Mutilation (FGM) and Prevent. This was assured as outstanding post sign off.

**Workforce Development** – The current position for Safeguarding Adults training compliance across providers is about 80%. Prevent training is also being introduced.

**Capacity levels in CCG** – LCCG has drafted their supervision policy for staff and safeguarding leads that was signed off January 2016, this policy was assured as outstanding post sign off.

**Assurance** – LCCG are leading the Risk Summit process, that provides a mechanism for key stakeholders to come together collectively to share and review information when a serious concern about the quality of care has been raised. Work is underway for the LCCG to gain oversight on all services providing healthcare provisions within LCCG boundaries.

The outcome of this deep dive will feed into the overall LCCG assurance process to report at a regional and national level.

## Lewisham and Greenwich NHS Trust

### **Safeguarding Overview 2014–15**

Lewisham & Greenwich NHS Trust updated their policy last year in line with the Care Act 2014 and the updated London Multi-agency Adult Safeguarding Policy and Procedures that has been available on their intranet site since January 2016. Safeguarding training that is mandatory to all new staff was also changed to match legislation.

### **Serious Incidents (SI's)**

The trust has robust governance frameworks in place in relation to SI's and safeguarding adults and children, throughout the organisation. Each division holds a Divisional Governance meeting with speciality governance meetings feeding in to these. Individual SI's are shared through this forum and the action plan monitored. The Divisional Governance meetings report to the trust's Quality and Safety meeting chaired by the Medical Director. Issues from this meeting are escalated through integrated governance to the trust board. The trust undertakes reviews of the learnings from SI's at the Outcomes with Learning Group which has Divisional representation and also reports to Quality and Safety.

The trust has assurance groups for Adult Safeguarding and Children and Young People Safeguarding that report into the trust's safeguarding adults, children and young people committee. Issues from this committee are escalated through Integrated Governance to the trust board.

### **What was achieved in 2015–16?**

- Growth of the adult safeguarding team to include expertise in domestic violence and adults with learning disabilities.
- Review of safeguarding adult's policy in response to the Care Act 2014.
- Flagging system in place for adults with learning disabilities, triggering automatic referral to Learning Disabilities Lead (QE site).

## **What are the key challenges?**

- Introduction of the Care Act 2014 – Significant impact on adult safeguarding services and how the statutory duty will be met.
- Challenges for an acute trust in safeguarding adults at risk when working with multi agency partners across different boroughs and different adult safeguarding boards.
- Maintaining an awareness of developing risk to adults at risk such as the increase in modern slavery in the UK.
- Ensure that the trust's policies cater for up and coming need.

## **What are their Safeguarding plans for 2016–17?**

- To focus more on the six safeguarding principles.
- Mental Capacity Assessments / Best Interest Process / Deprivation of Liberty processes explored in line with current legislation.
- To focus more on modern slavery.

## South London and Maudsley NHS Foundation Trust (SLAM)

### **Safeguarding Overview 2014–15**

Safeguarding leadership and governance processes for both children and adults within the trust have been strengthened to ensure that the trust meets its statutory duties and responsibilities to protect children and adults who are at risk from abuse and neglect. As a result, the trust Safeguarding Adults at Risk policy has been reviewed and revised to ensure compliance with the Care Act 2014.

### **Serious Incidents**

The trust has robust governance frameworks in place in relation to serious incidents (SI's) and safeguarding adults and children, at different levels throughout the organisation. At a trust-wide level, SI's and safeguarding adults and children reports are presented to the Quality Sub Committee (QSC) on a regular basis. There is an escalation process in place to highlight issues of concern or learning to the trust board, to give assurance on regulatory compliance, patient safety and quality. There is also a trust-wide Safeguarding Adults Committee, which is attended by the SI team which also escalates any concerns to the QSC and trust board. Each Clinical Academic Group (CAG) has a CAG Executive which provides governance and assurance on SI's and safeguarding at a service and team level and oversees action plans and 'lessons learned' forums to disseminate and embed learning across the teams.

## What was achieved in 2015–16?

- SLAM's mandatory training requirements includes Prevent awareness training (both basic and face to face workshops), Safeguarding, Mental Capacity Act and Deprivations of Liberty Safeguards training. Compliance targets for Safeguarding Adults level 1 & 2 training is 85%. The target for Prevent and Wrap training is 85% by April 2018.
- Work was undertaken to improve the interface between SLAM's Serious Incident (SI) process and safeguarding adult's activity. Staff at SLAM can now update their database as to whether an incident or issue relates to a safeguarding adult concern and whether an alert has been raised to Lewisham Adult Social Care.
- SLAM continued to strengthen its internal safeguarding adult's governance arrangements, this has enabled better escalation of safeguarding concerns. The September CQC (Care Quality Commission) inspection demonstrated that there continues to be work required to improve the internal safeguarding infrastructure and to ensure better safeguarding adults awareness and practice across the organisation.

## What are their Safeguarding plans for 2016–17?

- **Active Monitoring** – Improve data from internal databases to create better trust-wide pathways and borough reports on safeguarding activities and outcomes.
- **Incidents & Allegations** – Streamlining of interface between NHS SI Investigations and Care Act 2014 – Section 42 Safeguarding Enquiry processes.
- **Review of Trust Safeguarding Infrastructure** – Director of Social Care to lead review of structure. Need to ensure an identified lead with robust safeguarding training expertise to support safeguarding work at a borough level.
- **Review of Training** – Some trust staff will be required to undertake additional safeguarding adults training in light of the pending 'NHS England safeguarding adults: Roles & competencies for health care staff' guidance.

## Other board member agencies responsible for protecting adults in the community

### Safer Lewisham Partnership

The Safer Lewisham Plan 2016–17 notes that while Domestic Abuse offences rose in 2015 by almost 25%; the increase in incidents (i.e. police call-outs) has been much smaller at just over 4%. This indicates that improved detection and higher arrest/charging rates may be a contributory factor.

### Athena – Lewisham’s Violence against Women & Girls (VaWG) Service

In April 2015, an innovative new VaWG service – Athena – was commissioned, providing a single point of access (via a telephone helpline) to support anyone (men, women and children) experiencing any form of gender-based violence in Lewisham. This includes human trafficking, sexual violence, prostitution, domestic violence, stalking, forced marriage, so-called ‘honour’-based violence and female genital mutilation (FGM).

The service comprises:

- Team of Independent Gender-Based Violence Advocates,
- Team of community outreach workers,
- Community-based health advocate,
- IRIS (identification & referral to improve safety) project advocate educator (an established scheme in UK) for GPs,
- Early intervention worker,
- Team of specialist Vietnamese outreach workers,
- Familial abuse worker,
- Team of learning and development child support staff,
- Provision of refuge (shelter) accommodation,
- Delivery of training to other professionals.

## Female Genital Mutilation (FGM) Awareness Raising

To ensure that FGM awareness was raised across the borough, an FGM Action Plan was developed. Professionals working in safeguarding, community midwifery, public health, the voluntary sector and crime reduction were all part of the group developed to raise awareness among local communities, health professionals and schools.

### **What are their safeguarding plans for 2016–17?**

Strategic needs assessment priorities for 2016–17 includes: All strands of violence against women and girls with particular focus on domestic abuse, sexual abuse, and female genital mutilation (FGM). This includes male victims within the defined strands of human trafficking, sexual violence, prostitution, domestic violence, stalking, forced marriage and 'honour'-based violence.

To read more on the [Safer Lewisham Partnership Plan 2016–17](#).

## Metropolitan Police Lewisham

### **The role of the police in adult safeguarding**

Although the police are a mandatory member of the Lewisham Safeguarding Adults Board (LSAB) by virtue of Section 43 of the Care Act 2014, they are not an agency responsible for the provision of care. The police role in adult safeguarding is related to their policing function.

The core duties of the police are:

- Prevent and detect crime,
- Keep the peace,
- Protect life and property.

### **What was achieved in 2015–16?**

A vulnerability & adults at risk policy has been implemented in compliance with the London Multi-agency Adult Safeguarding Policy & Procedures, and to complement the 'One Met' MPS Strategy 2013-2017. Some core points are:

- Earn and strengthen the trust and confidence of every community,
- Prevent crime and bring more offenders to justice,
- Improve our policing capability whilst driving down costs,
- Embed a culture of professionalism in everything we do.

All staff have ready access through the intranet to the vulnerability and protection of adult's toolkit. This includes guides to the vulnerability assessment framework, primary and secondary investigation, mental capacity act and multi-agency response.

### **What are the safeguarding plans for 2016–17?**

Corporate training is in development for delivery which includes a training package for Multi-Agency Safeguarding Hub (MASH) staff about identification and managing adults at risk such as risk management, patterns of abuse, and training awareness packages for Borough Professional Development Days, the Hate Crime Awareness events and the Mental Health and Policing Presentations.



## London Fire Brigade (LFB)

### What was achieved in 2015–16?

- The LFB started the process of reviewing and publishing their Safeguarding Adults policy and duties in line with the London Multi-agency Adult Safeguarding Policy and Procedures and the Care Act 2014.
- LFB commissioned and developed a new training package to be rolled out to all brigade staff in 2016 which will comply with both the Care Act 2014, Mental Capacity Act (MCA), Prevent and the London Multi-agency Adult Safeguarding Policy and Procedures.
- As a result of a recommendation from a Safeguarding Adult Review LFB worked with the London Ambulance Service (LAS) in arranging a pilot to provide Home Fire Safety Visits to high risk hoarders.
- Despite LFB non-statutory status on local safeguarding adults boards, it has demonstrated its commitment to safeguarding by offer of a £1,000 voluntary contribution to each of the 32 safeguarding adults boards (SAB's).

### What are their safeguarding plans for 2016–17?

- LFB have arranged for staff with specific Safeguarding duties within their role to attend Prevent (part of the Government counter – terrorism strategy) workshops.
- All staff will receive safeguarding training commencing September 2016 with the completion of a new training package.
- The information sharing agreement between LFB and LAS will be signed in May 2016 and then go live. The first eight weeks of the agreement will be analysed to assess information from LAS on how many individuals are demonstrating hoarding behaviour.
- LFB is aiming to renew their offer of a £1,000 voluntary contribution to each of the 32 SABs (to be shared with children's safeguarding boards) and will be writing to Chairs of Safeguarding Boards in September 2016.

## London Ambulance Service NHS Trust (LAS)

### **The role of LAS in adult safeguarding**

The London Ambulance Service NHS Trust has a duty to ensure the safeguarding of vulnerable persons remains a focal point within the organisation, and the trust is committed to ensuring all persons within London are protected at all times.

### **Local safeguarding activity during 2015–16**

A report has been produced by the head of safeguarding that provides evidence of the LAS commitment to effective safeguarding measures during 2015–16. There were 149 adult safeguarding concerns and 348 adult welfare concerns raised in Lewisham during 2015-16. The most common type of abuse reported nationally is Neglect & Acts of Omission.

Read the full [LAS Safeguarding Report 2016](#).

## Community based agencies assisting with protecting adults in the wider community

### Healthwatch Bromley & Lewisham (HWBL)

#### The role of HWBL

HWBL is committed to ensuring that adults at risk are not abused and that working practices minimise the risk of such abuse. The trustees, staff and volunteers have a duty to identify abuse and report it accordingly.

Trustee's responsibilities are to:

- Ensure volunteers are aware of the adults at risk need for protection.
- Notify the appropriate agencies if abuse is identified or suspected.
- Support and where possible secure the safety of individuals and ensure that all referrals to services have full information in relation to identified risk and vulnerability.

Staff and volunteers responsibilities are to:

- Be familiar with the adults at risk protection policy.
- Support adults who report abuse.

#### HWBL believe that adults at risk have the right to:

- Have alleged incidents recognised and taken seriously,
- Receive fair and respectful treatment throughout,
- Be involved in the process as much as possible.

## Voluntary Action Lewisham (VAL)

### **The role of VAL**

VAL believes that it is always unacceptable for any vulnerable adult or young person to experience abuse of any kind and recognises its responsibility to safeguard the welfare of all adults at risk and young people by a commitment to practice, which protects them from harm.

### **How will VAL protect adults in the community?**

- Raise awareness of the need to protect adults at risk and working in partnership with those adults, carers and other agencies to promote and safeguard their welfare.
- Ensure that staff in contact with adults at risk will have the requisite knowledge, skills and qualifications to carry out their jobs safely and effectively, also ensuring safe practice when working in partnership with other organisations.
- Ensure that when abuse is suspected or disclosed, it is clear what action must be taken.

### **Ethical practices of VAL**

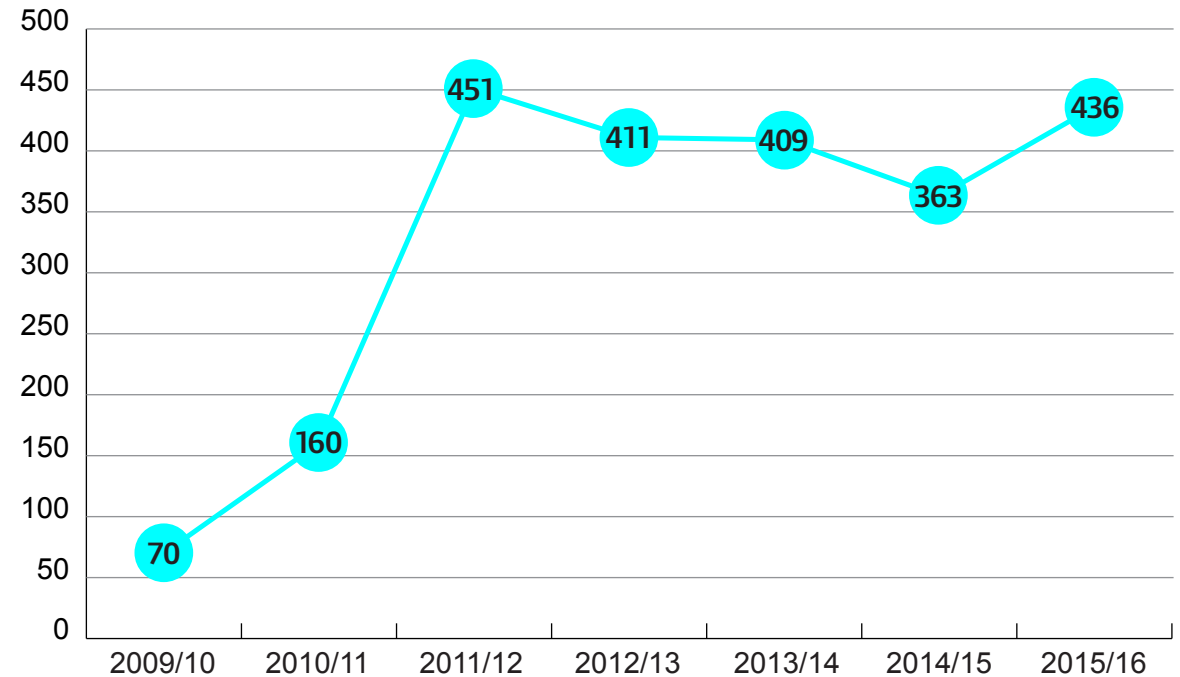
- All adults at risk should be listened to and their views taken seriously.
- All interventions must be people-centred and outcome focused.
- Joint working between agencies and disciplines is essential for the protection of adults and young people at risk.

## London Borough of Lewisham Safeguarding Data 2015–16

The Safeguarding Adults Collection (SAC) is a set of data measures that the board use to analyse the outcomes for adults at risk.

### Number of Enquiries

- In 2015–16 there were 436 enquiries raised in Lewisham. This is the first year in which the number of enquiries has increased after three consecutive years of decreases.
- The increase in enquiries may reflect an increased understanding of safeguarding due to the implementation of the Care Act 2014.
- This increase may also be due to enquires that related to a particular provider located within the borough, but not commissioned by Lewisham Council or Lewisham Clinical Commissioning Group.
- In comparison with 2014–15 Lewisham's rate per 100,000 population has seen a rise from 122 to 144. Based on last year's data, Lewisham remains under the comparator group average for the number of enquiries raised.



## Enquiries by age

- In 2015–16, 46% of safeguarding enquiries related to older adults aged 65+.
- Based on national benchmarking in 2014–2015, the 18–64 age group was the highest group, accounting for 36% of the total. 2015–2016 is the first year in Lewisham that there have been more enquiries for the 18–64 age group than the 65+ age group.
- The closure of a particular provider located within the borough may have had an impact on the increase as all of the patients were under 65 years old.

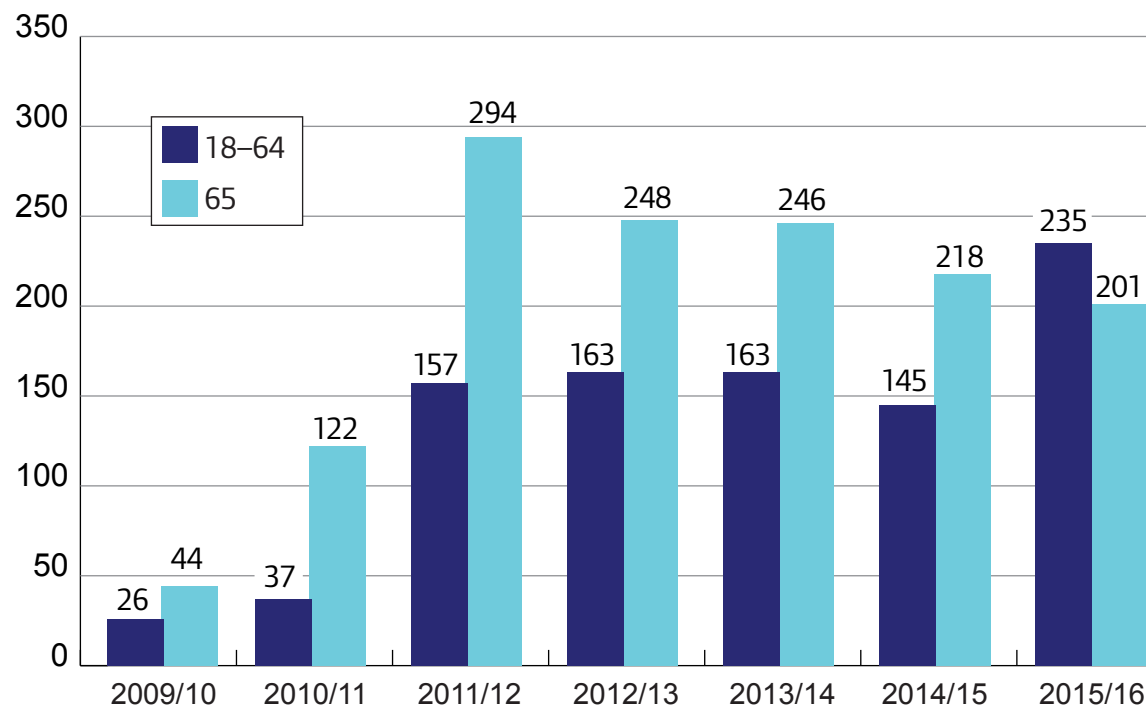
## Enquiries by gender

- In 2015–16, there was an equal percentage of enquiries for males and females. This remains consistent with 2014–15.

## Enquiries by ethnicity

- In 2015–16, the percentage of enquiries from the black and minority ethnic (BME) community (42%) was slightly lower than the overall borough profile for this community (46%).
- This has been a consistent pattern since 2009–10.

## Enquiries by age



## Type of abuse

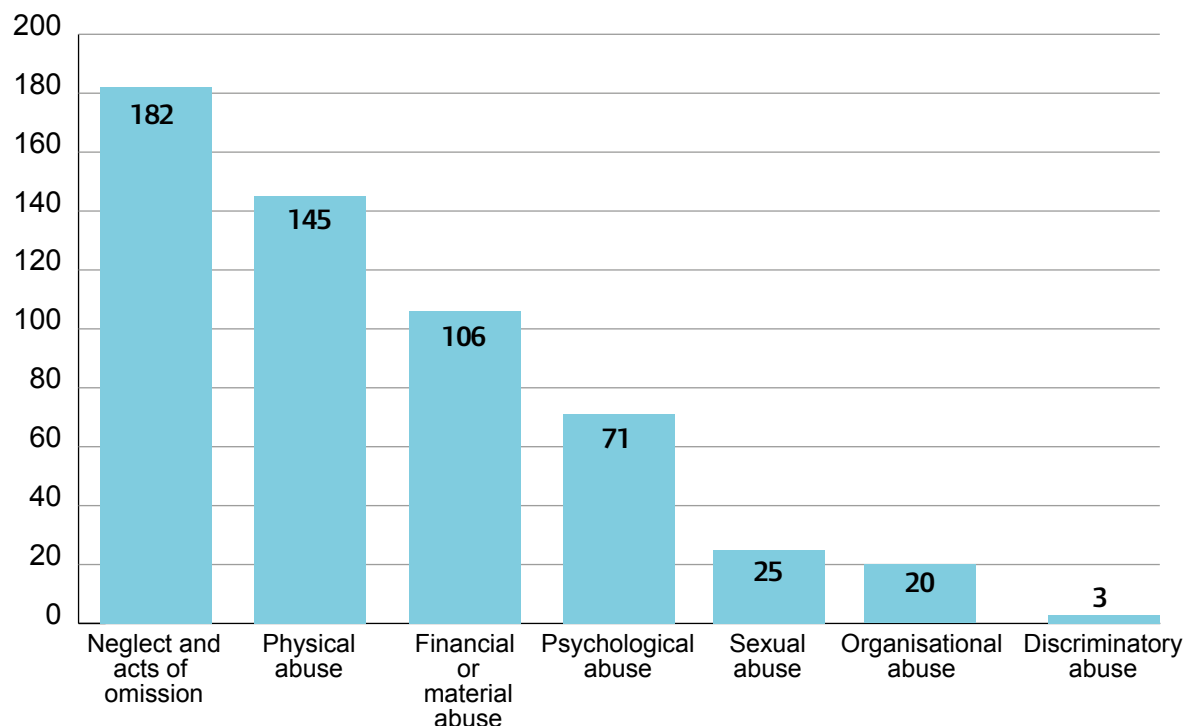
The most common type of risk reported for completed enquiries in both 2014–15 and 2015–16 is neglect and acts of omission, the majority of which relate to social care providers or support services. Improving the board’s oversight of quality of care provision is a key focus for the board in 2016–17 with plans to establish a quality assurance framework that will enable the board to identify areas of concern and prevent quality assurance issues developing into a safeguarding concern.

In 2014-2015 sexual abuse accounted for 5% of allegations across our comparator group. In 2015–2016 Lewisham reported 4.5% for Abuse Type “Sexual Abuse”. 20 were in the 18–64 age group, five were in the age groups 65+.

Of the 25 “Sexual Abuse” allegations, five were male, four were allegations against care staff; all of the allegations were unsubstantiated.

Five allegations that were in the 65+ age group were found to have taken place by other vulnerable adults in the same care environment.

Of the 16 female allegations in the 18–64 age group, 11 females were identified as coming from the “Learning Disabilities” service user group, of these 11, six were alleged to have taken place



by family members, three by other Social Care Professionals, two by other vulnerable adults.

The outcomes of these 11 case are as follows:

Outcomes	No. of cases
Unsubstantiated	3
Ceased at individuals request	3
Inconclusive	2
Substantiated/Part Substantiated	3

The other five allegations in this group were to females identified as having a “mental health” diagnosis.

## Location of risk

### Own Home

- In 2015–16 the most common location where the alleged safeguarding incident took place was the individual’s own home – 32% of the total 436 enquiries received.
- In 2014–15, 37% of alleged incidents took place in the individuals own home.

### Care Homes

- In 2015–16, 23% of enquiries where the alleged safeguarding incident took place is in Care Homes.
- In 2014–15, 31% of alleged incidents took place in Care Homes.
- These figures indicate that despite the increase in the total amount of referrals this year, there is a decrease in the amount of incidents that occurred in Care Homes.

### Hospital Setting

- In 2015–16, 18% of enquiries where an alleged safeguarding incident took place is in a Hospital Setting.
- This is an increase from the 9% of enquiries received 2014–15.

### Community Setting

- In 2015–16, 1% of enquiries received came from the community setting.
- This 1% is the same figure reported in 2014–15.

*Data provided is from the submitted Lewisham Safeguarding Adults Collection 2015–16.*

*This data is, as yet, ‘unvalidated’ by NHS Digital.*

*Should any significant difference emerge following validation an addendum to the annual report will be published.*



## Looking ahead to 2016–17

The Safeguarding data set out above is used to influence the priorities for the safeguarding board over the next year.

In 2016–17 the Board will focus on four priorities:

- 1. To continue to promote partnership working**
- 2. Prevention of abuse through training, awareness raising and information sharing**
- 3. Promote positive practice: Making Safeguarding Personal**
- 4. Safeguarding board development**

### Priority 1: Promote partnership working

Under this priority we have seven objectives:

- 1.1 Safeguarding, Domestic Abuse and Domestic Homicide interface: encourage multi-agency learning through Domestic Abuse learning and Domestic Homicide Reviews (DHR).
- 1.2 Work with Adult Social Care on the development of a Multi-Agency Safeguarding Hub (MASH).
- 1.3 Promote closer working between the board and Lewisham Safeguarding Children's Board (LSCB), with members that are representative on both boards and where areas of responsibility overlap.
- 1.4 Liaise with and learn from other Safeguarding Adults Boards (SAB's), including comparison of safeguarding adult collection data.
- 1.5 Set up a Safeguarding Housing Provider Forum (quarter 1) with the nine major social housing providers in the borough; dealing with all safeguarding issues.

1.6 Work with Strategic Housing to explore reviving the Multi-agency Hoarding Protocol and re-establishing the Hoarding Panel.

1.7 Workforce Development;

- Develop a Workforce Development and Audit Check Plan to ensure that providers (housing, residential care and nursing home providers) are clear about their safeguarding responsibilities relating to recruitment, staff training and competency assessment and how they will be audited.
- Publicise Safeguarding Adults Training available to member organisations and community organisations.
- Promote 'MeLearning' (online) training courses to encourage staff across all agencies to access and complete level 1 and level 2 safeguarding awareness courses.

## Priority 2: Prevention of abuse through training, awareness raising and information sharing

Under this priority we have eight objectives:

- 2.1 Promote and publicise the board's key messages about prevention of abuse to the public through community groups.
- 2.2 Explore the opportunities of developing an independent website for the board, possibly in partnership with the Children's Board.
- 2.3 Promote the voice of the user, carers and advocates to improve service feedback and improvement of safeguarding practice.
- 2.4 Work with Healthwatch Lewisham and Joint Commissioning to agree and plan for Healthwatch to survey adults who are in receipt of domiciliary care (homecare).
- 2.5 Promote and support the Identification and Referral to Improve Safety trail (IRIS - a general practice-based domestic violence and abuse training support and referral programme) alongside Community Safety, Lewisham Clinical Commissioning Group (LCCG) and Refuge.

- 2.6 Develop partnership working between the board and community based groups to reflect the voice of the wider community and raise adult safeguarding awareness among adults living in isolation, carers at risk, older adults, adults with learning disabilities, adults at risk of hate crime.
- 2.7 Engage with some of the many faith groups in Lewisham, in partnership with Voluntary Action Lewisham, by delivering an adult safeguarding awareness training programme to community or faith groups representing the harder to reach communities in the borough.
- 2.8 Complete the sign-off of the draft Information Sharing Protocol with the Metropolitan Police and Adult Social Care; and, review the need for other information sharing protocols.

### Priority 3: Promote positive practice: Making Safeguarding Personal

Under this priority we have eight objectives:

- 3.1 Building on the foundations built in year one, ensure the principles of Making Safeguarding Personal are embedded across all board partner organisations.
- 3.2 Develop and promote a comprehensive Safeguarding Adult Review Framework.
- 3.3 Safeguarding Adults Conference: explore options for a safeguarding conference, to promote the role of the Safeguarding Adults Board; provide best practice workshops for professionals (facilitated by expert speakers); provide stalls for local organisations and groups to promote their business / functions; and provide local networking opportunities.
- 3.4 Increase awareness of Prevent duty in the Counter-Terrorism and Security Act 2015.
- 3.5 Explore regular reporting from local NHS acute and mental health trusts and Lewisham Clinical Commissioning Group in relation to the analysis, themes and the number of completed Serious Incident Reviews taking place, which involve safeguarding concerns.

- 3.6 Explore the options for a local safeguarding protocol covering health provision.
- 3.7 Promote the Safe and Independent Living Service (SAIL) when it is launched: SAIL provides a quick and simple way to access a wide range of local services to support older people in maintaining their independence, safety and wellbeing.
- 3.8 Recognising the number of Serious Incidents investigated by health services (not all of which are safeguarding concerns) and identifying which lessons can be learned and applied across a range of settings.

## Priority 4: Safeguarding Board development

Under this priority we have seven objectives:

- 4.1 Review the Strategic Plan 2015 – 18 to bring in line with priorities post Care Act 2014 implementation and best practice guidance.
- 4.2 Promote the role and work of the board at suitable local events, local groups and voluntary sector providers.
- 4.3 Review the role and operation of board sub-groups.

- 4.4 Review the policy and procedure needs for the board, ensuring that board requirements are appropriately separated from other operational needs.
- 4.5 Agree Safeguarding Adults performance indicators with Adult Social Care in line with London Association of Directors of Adult Social Services (ADASS) guidelines and Making Safeguarding Personal (MSP).
- 4.6 Review the annual Safeguarding audits, suitably tailoring them to the function of the provider, with the aim of reducing the burden on auditees.
- 4.7 Board Development Away Day: explore options for a team building development day for the board members once the new LSAB Independent Chair is appointed.

## LSAB Business Team contact details

**Email:** [LSAB@lewisham.gov.uk](mailto:LSAB@lewisham.gov.uk)

**Secure Email:** [LSABGCSX@lewisham.gcsx.gov.uk](mailto:LSABGCSX@lewisham.gcsx.gov.uk)

**Tel No:** 020 8314 3117

[LSAB Website](#)

## Safeguarding further reading

**Care Act 2014, Chapter 14: Safeguarding Adults**

Care and Support Statutory Guidance

### **Easy Read version**

Making Sure the Care Act Works - Easy read version

### **London Multi-agency Adult Safeguarding Policy and Procedures**

Including glossary of Safeguarding Terms

Adult Safeguarding Policies from SCIE

Adult safeguarding: Types and indicators of abuse from SCIE

## Community Groups

[Community Connections](#)

[Lewisham Disability Coalition](#)

[Voluntary Action Lewisham](#)

(LSAB board member)

[Healthwatch Bromley & Lewisham](#)

(LSAB board member)

[Carers Lewisham](#)

[Positive Ageing Council](#)