

**Annual Report on the effectiveness of Safeguarding Vulnerable Adults by
Southend-on-Sea Borough Council's Adult Social Care Services
2013/14**

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Purpose of the report

- To provide the Southend-on-Sea Safeguarding Adults Board (SVAB), Chief Executive and the Leader of Southend Borough Council with information in order to give assurances about the functioning and effectiveness of safeguarding adults' investigations by the Council's People Department: Adult Social Care.
- To support Elected Members to discharge their safeguarding duties in relation to vulnerable adults.

This report should be read in conjunction with the 2013/14 Annual Report for the Southend-on-Sea Safeguarding Adults Board.

Recommendation

That the report is noted and priority areas for development in 2014/15 are endorsed.

Summary

Achievements

Southend Borough Council's Department of People- Adult Services mark several key achievements towards supporting adults to live lives free from fear and abuse. This ethos is delivered through through the strategic development of policies, procedures and projects as well as through operational duties of care. As lead organisation for the investigation of allegations of abuse, the Council delivers our statutory investigation responsibilities robustly, in partnership with people who use services and their support networks. A summary is provided below:

- Co-authoring and launch of the SET (Southend, Essex and Thurrock) Safeguarding Adults Guidelines (version 3).
- Multi-agency review of the SET (Southend, Essex and Thurrock) Mental Capacity Act and Deprivation of Liberty Safeguards policy and procedure.

- Participation in the Making Safeguarding Personal programme.
- Positive service user feedback.
- Joint partnership review and re-launch of the Family Focus Protocol.
- Partnership work with Council Departments to improve outcomes for health and wellbeing and ensure feelings of safety and protection of harm are imbedded through service planning and delivery.
- Partnership work with the SVAB and LSCB.
- Development and delivery of training for practitioners on domestic abuse and older people.

SECTION 1: Background

In 2014, the Safeguarding Vulnerable Adults Board, (SVAB) agreed that it would report separately from Adult Services regarding the provision and quality of safeguarding activity. This is the first Council focused Annual Report highlighting the dedicated response provided by the Council to the safeguarding agenda with respect to partnership development and investigatory function.

Statutory Responsibilities

Safeguarding Investigations

No Secrets: guidance on protecting vulnerable adults in care (DH 2000) dictates that local authorities play the key role in coordinating and investigating allegations of abuse against vulnerable adults. The Council holds the responsibility to work collaboratively with partners to support service users to live lives free from abuse and harm. In Southend, the Council leads on the management of allegations for people aged 18 and over who may have aging, physical or sensory needs and older adults with mental health needs. South Essex Partnership University NHS Foundation Trust leads on the investigation of allegations of abuse for people with mental health conditions from 18 to 65 years old. Investigations into allegations of abuse are governed by the *SET (Southend, Essex and Thurrock) Safeguarding Adults Guidelines*. These guidelines, written in partnership with the Southend Safeguarding Adults Board, Essex Safeguarding Adults Board and Thurrock Safeguarding Board, support investigation work in the geographical area of Essex.

Southend Borough Council' Department of People' maintains the statutory assessment responsibilities for all applications under the Deprivation of Liberty Safeguards. These assessments are governed by the SET (Southend, Essex and

Thurrock) Mental Capacity Act and Deprivation of Liberty Safeguards policy and procedure.

The Council and partners currently work towards supporting vulnerable adults under the auspices of safeguarding. A vulnerable adult is currently defined from the 1997 Consultation "Who Decides?" issued by the Lord Chancellor's Department, as a person over the age of 18:

"Who is or may be in need of community care services by reason of disability, age or illness; and is or may be unable to take care of unable to protect him or herself against significant harm or exploitation".

Deprivation of Liberty Safeguards

Southend Borough Council is the 'Supervisory Body' for all Southend and self-funding residents in care homes. There are 102 care homes in Southend. As of 1 April 2013, the Council assumed responsibilities as Supervisory Body for all Southend local authority/Southend Clinical Commissioning Group funded and self-funded people within long stay and acute hospitals. Since 2009, the Council has also been the Supervisory Body for Southend residents placed in care homes and hospitals outside of Southend.

In order to ensure that people are not arbitrarily deprived of their liberty, the Council receives Urgent Authorisations and Standard Authorisations from these settings and is required by statute to carry out up to 4 assessments for each referral. Specialist qualified assessors, called Best Interest Assessors, carry out assessments as independent entities of the Supervisory Body. An additional two assessments are commissioned by the local authority from a qualified Section 12 trained doctor, usually a psychiatrist. All six assessments are mandated in the Deprivation of Liberty Safeguards, as enforced by the Mental Capacity Act 2005.

The 'Supervisory Body' must carry out assessments usually within seven calendar days when an Urgent Authorisation is granted by a Managing Authority. The Council must carry out assessments within twenty one calendar days in cases where a Standard Authorisation alone is applied for. The Council can exercise no discretion as to which type of assessment is carried out. The Managing Authority, the Supervisory Body or a relevant third party can request a review of a current authorisation.

During 2013/2014, the Council employed nine Best Interest Assessors, who all have day to day assessment and management responsibility within social work teams. Two service managers who are qualified BIAs act as Signatories under the Safeguards.

During 2013/14, the Council received 60 applications from care homes and hospitals.

As a result of the Supreme Court judgement [**Judgment of the Supreme Court: P v Cheshire West and Chester Council and another and P and Q v Surrey County Council**] in March 2013, cost pressures have been identified. Work will be ongoing in 2014/15 to identify resources to meet the increasing demand for deprivation of liberty assessments.

SECTION 2: Key Areas of Work

The Department of People committed to lead on several key areas of work in partnership or on behalf of the Southend Safeguarding Adults Board (SVAB).

Experience tells us

Southend Borough Council seeks the views of people who have received support in relation to safeguarding adults' investigations. The Outcome Questionnaire is a face to face conversation with the person, their family member or advocate to gauge their views on the process and to identify learning. The questionnaire is offered to all service users unless there are issues of mental capacity or risk of escalating further harm. For people who may lack capacity to have consented to the investigation, the Independent Mental Capacity Advocate, (IMCA) advocate or family member acting in their best interest is asked for their views. The feedback from the questionnaire is then used to further improve services and inform training plans to ensure that staff provides quality interventions that support dignity and improve quality of life.

Preventable Fire Safety Deaths

Essex Fire and Rescue Services, the Southend-on-Sea SVAB and Southend Borough Council launched the new service, 'Preventable Fire Safety Deaths' in 2013. Southend Borough Council and Essex Fire and Rescue Services launched the scheme to increase awareness of fire risks among social care practitioners, domiciliary and community support providers, care home providers and voluntary agencies to enable them to identify 'at risk' adults. For example, people who smoke and have mobility problems will benefit from targeted prevention advice. Partner agencies were then encouraged to make referrals to the Fire and Rescue Service for free home fire safety checks to put in practical solutions to minimise their risk of

being harmed in a fire. The scheme has now been rolled out throughout Essex and is available to support adults aged 18 and over¹.

Infection Control, Norovirus and Influenza

The Council's Public Health, Safeguarding and Adult Contracts Team joined forces in October 2013 to host an event entitled: *Infection Control: prevention and control of healthcare-associated infections as well as Flu & Norovirus-Season Precautions*. Domiciliary and residential care providers attended the conference to learn more about what they can do to prevent or minimise the risk of vulnerable people becoming unwell because of winter health conditions such as flu. The SVAB, and the Department for People and the Department for Public Health will continue to work to identify joint initiatives that improve the opportunities for people to live well, free from the risk of harm.

Dental Care

The Council is working collaboratively with the University of Essex and Southend Clinical Commissioning Group to look at whether current training provision to the care workforce meets the needs of people who use services with reference to dental hygiene. The project, which is in the initial scoping stage, aims to provide carers and managers with the opportunity to refresh or gain new skills to support people to maintain their health through effective interventions to maintain or improve oral hygiene.

Quality Assurance

A targeted program of audit was carried out in 2013/14 and a report is being finalised for presentation to the SVAB.

Key Partnerships

SVAB Subgroups

Please see the SVAB Annual Report for 2013/2014, which details fully the work of the Board. The Council plays a key role in supporting and engaging with the subgroups to deliver against the SVAB Business Plan priorities. Below please find the key Council contributions towards the individual subgroups.

Quality, Monitoring and Audit Sub Group: Southend Borough Council continues to play the lead role in supporting the SVAB to deliver against the business plan. To

¹ Southend-on-Sea Borough Council, (2013) Outlook Magazine: Issue 27, Southend, Southend-on-Sea Borough Council.

this end, members of the Council's strategic and operational management teams participate in the SVAB action groups. The Council chairs the Quality, Monitoring and Audit Sub Group, which concentrates on monitoring the delivery against learning from Serious Case Reviews, learning from multi agency audits and works to ensure that safeguarding performance data is analysed and improvements and developments imbedded in practice.

SVAB & LSCB Training Sub Group: In 2014, the Southend Local Safeguarding Children's Board (LSCB) and the SVAB agreed to merge the work of the subgroups into one entity. A joint training strategy has been developed to which the Council has collaborated heavily. Focused work led by the Council has been undertaken to review the provision of domestic abuse training provided by the Council via Essex Police to internal staff and Board partners, especially in response to learning derived from Domestic Homicide Reviews and Serious Case Reviews.

SVAB & LSCB Community Sub Group: The Council has recently joined this newly merged group and looks forward to delivering against the SVAB business plan.

SVAB & LSCB E Safety Sub Group: The Council has recently joined this newly merged group and looks forward to delivering against the SVAB business plan.

Local Safeguarding Children's Board

Southend Borough Council's Adult Social Care takes its responsibilities for safeguarding children within the context of the work we do with families as paramount. Adult Social Care is represented both on the LSCB Board and the LSCB Executive, representing the needs of adult family members and carers. For example, in the last year, we have worked collaboratively with Children's Services and the LSCB and partners to deliver on the review of the Family Focus Protocol, which ensures that professionals across the partnership economy work proactively and collaboratively to ensure that interventions within the home take into account the needs of all members of the family.

Adult Social Care is also represented in the work to prevent and support victims of child exploitation and sit on the Southend Child Sexual Exploitation Workgroup. We are also engaged in the Child and Family Poverty Workgroup, looking to increase the opportunities and life outcomes for people experiencing poverty and the ramifications.

Over the last 18 months, Adult Services' social workers have undertaken a series of e-learning training related to the needs of children, primarily child abuse awareness and child sexual exploitation. Practitioners have also attended specially commissioned safeguarding children training at Level 2 and 3, which was delivered

by the LSCB. Specialist training will continue on a rolling basis as part of the Council's training and development plan.

Southend Borough Council's People Department - Adults will continue to work proactively to ensure that practitioners are trained to have an awareness of the safety of children. We will continue to make referrals when appropriate and engage in plans to support children and their families.

Domestic Abuse

Southend Borough Council - Adult Social Care is a key partner in the delivery of domestic abuse support in Southend. As previously highlighted in Chart 7 above, 28.7% of all referrals during 2013/14 meet the criteria for classification as domestic abuse. Adult Social Care has a duty to support vulnerable adults who may be experiencing domestic abuse, which may occur alongside a myriad of other social needs. Adult Social Care is represented in the work of the Southend Domestic Abuse Strategy Group, which delivers against the Southend Domestic Abuse Strategy.

Adult Social Care is working to continuously review the provision of domestic abuse training to ensure that practitioners have the required skills to support people experiencing harm.

Adult Social Care makes referrals into and attends the Southend Multi Agency Risk Assessment Conference (MARAC). An experienced and appropriately trained operational manager attends MARAC twice monthly. Council practitioners and operational SVAB partners receive standard and advanced training from Essex Police to ensure that workers appropriately risk assess victims using the Domestic Abuse, Stalking and Harassment (DASH) risk assessment tool.

In 2013/14, Southend Borough Council provided training to Social Care practitioners on the issues of domestic abuse and older people.

Serious Case Reviews

There were no Serious Case Reviews in 2013/14.

SET Working Group

Adult Social Care is a lead member on the SET (Southend, Essex & Thurrock) Working Group. This group is responsible for the revision of the SET Guidelines in line with national and local policy change, legislation and learning. In 2013/14, the

SET Working Group reviewed and rewrote the SET Guidelines and launched Version 3 in April 2014.

Eastern Region Leads groups

Southend Borough Council is an active member in both the Safeguarding Adults Leads' group and the Deprivation of Liberty Leads' groups. Both groups are facilitated by the Association of Directors of Social Services and the Local Government Association. The group aims to deliver a forum for best practice, the development of robust policy and continuity of response to safeguarding concerns.

Anti Social Behaviour (ASB) Operational Board

Adult Services is represented on this board to ensure that people experiencing ASB or perpetrating ASB are appropriately identified if eligible to be offered a NHS and Community Care 1990 referral or require support from a safeguarding adults' perspective.

Training and Workforce Strategy

The Safeguarding Adults Service Manager works closely with the Council's Workforce Strategy Team to ensure that the training commissioned for providers and practitioners is appropriate and informed by national and local learning. The following courses were commissioned during 2013/2014, populated by attendance figures. Please note that not all courses are required for the audiences in attendance.

For 2014/15, the SVAB/LSCB Training Subgroup will kite mark all Safeguarding and MCA and DOLS training programmes. Southend Borough Council continues to work proactively with the Training Subgroup to embed the LSCB/SVAB Training Strategy.

COURSE	ATTENDANCE
1. Assessing Mental Capacity	55
SBC staff (Children's and Adults)	47
*Provider staff (domiciliary care, care homes, nursing homes, supported living)	2
*Partner Staff (SEPT, SUHFT, EOE Ambulance Trust, Police, Essex Fire and Rescue)	6
2. DASH Basic Awareness	11
SBC staff (Children and Adults)	6

Partner Staff (SEPT, SUHFT, EOE Ambulance Trust, Police, Essex Fire and Rescue)	4
3. DASH Marac Advanced	8
SBC staff (Children's and Adults)	7
Partner Staff (SEPT, SUHFT, EOE Ambulance Trust, Police, Essex Fire and Rescue)	0
4. DOLS - What Carehomes and Hospitals Need to Know	29
SBC staff (Children and Adults)	3
Provider staff (domiciliary care, care homes, nursing homes, supported living)	26
5. MCA DOLS - Refresher for Interface with Safeguarding and Court of Protection	41
SBC staff (Children and Adults)	40
Partner Staff (SEPT, SUHFT, EOE Ambulance Trust, Police, Essex Fire and Rescue)	1
6. MCA DOLS - Refresher for Managers of Residential Homes	35
SBC staff (Children and Adults)	0
Provider staff (care homes, nursing homes)	35
7. Mental Capacity Act (Full Day)	14
Provider staff (domiciliary care, care homes, nursing homes, supported living)	14
8. Mental Capacity Act (Half Day)	86
SBC staff (Children and Adults)	10
Provider staff (domiciliary care, care homes, nursing homes, supported living)	76
Partner Staff (SEPT, SUHFT, EOE Ambulance Trust, Police, Essex Fire and Rescue)	3
9. Safeguarding Vulnerable Adults from Abuse for Managers	42
Provider staff (domiciliary care, care homes, nursing homes, supported living)	36
Partner Staff (SEPT, SUHFT, EOE Ambulance Trust, Police, Essex Fire and Rescue)	0
3rd Sector Staff (SAVS, Voluntary agencies etc)	6
10. Safeguarding Vulnerable Adults from Abuse - Raising Awareness	383
SBC staff (Children and Adults)	29

Provider staff (domiciliary care, care homes, nursing homes, supported living)	350
3rd Sector Staff (SAVS, Voluntary agencies etc)	4
11. Safeguarding Vulnerable Adults from Abuse - Investigator Skills	38
SBC staff (Children and Adults)	38
3rd Sector Staff (SAVS, Voluntary agencies etc)	0
12. Champions - MCA/DOLS	19
SBC staff (Children and Adults)	3
Provider staff (domiciliary care, care homes, nursing homes, supported living)	16
Partner Staff (SEPT, SUHFT, EOE Ambulance Trust, Police, Essex Fire and Rescue)	0
3rd Sector Staff (SAVS, Voluntary agencies etc)	0
13. Champions - MCA/DOLS Review	3
SBC staff (Adults & Children)	0
Provider staff (domiciliary care, care homes, nursing homes, supported living)	3
14. Champions - MCA/DOLS Annual Review	7
SBC staff (Adults & Children)	0
Provider staff (domiciliary care, care homes, nursing homes, supported living)	7

SECTION 3: Progress on Delivery against SVAB 2013/14 Action Plan

The SVAB will report separately and in depth against the objectives of the SVAB Business and Action Plan. Illustrated below are key contributions from the Council to meet the aims of the plan.

Business objective	Delivery outcome
<u>Care Act Project Board</u>	Safeguarding is represented on the Council's Care Act Project Board. The Council contributed to the Care Act regulation consultation from a safeguarding perspective. The Council is working collaboratively with SVAB to ensure that the organisation is prepared for the implementation of the Act.

<u>Quality Provision of Care</u>	<p>Safeguarding Adults is represented in a variety of meetings which examine the current quality of services within the community and hospitals/care homes. The Council meets monthly with contract partners and health partners in the Southend Clinical Commissioning Group to look at quality, safety and current functioning of commissioned services. Safeguarding is also represented at the Quarterly Information Sharing Meeting with the Care Quality Commission, SET local authorities and Health.</p> <p>Council safeguarding is also represented as member of the Essex Quality Surveillance Group, chaired by NHS England.</p>
<u>Yearly Statutory Return</u>	<p>Southend Borough Council complied with statutory requirements to report to government on safeguarding and deprivation of liberty applications received in 2013/14.</p>
<u>Best Interest Assessor and Section 12 Doctor Selection Criteria and Re-approval Procedures</u>	<p>Pan- Eastern Region procedures were approved and introduced in 2013/14 to ensure suitably trained practitioners and doctors are commissioned for Deprivation of Liberty work.</p>
<u>Large Scale Investigation Protocol</u>	<p>Adult Social Care developed a protocol during 2013/14, which has been submitted to the SET (Southend, Essex and Thurrock) Working Group to be rolled out in the re-launch of the SET Guidelines in the spring of 2015.</p>

SECTION 4: Performance and Statistics

For 2013/2014, the Department of Health via the Information Centre changed the national data collection parameters regarding allegations of adult abuse. In previous years, statistics have been provided with reference to numbers of referrals received. From 2013, statistics are now collected regarding number of people allegedly experiencing abuse. The Department of Health- Information Centre has stated that due to the reduced size of the national return, there are no directly comparable data sets to compare and contrast from previous returns. Therefore, it is not possible to continue to report in the same way to provide year on year trend analysis comparator data as the parameters for collection have changed.

This report will cover headline trends and offer detailed analysis with reflection for learning.

Headline trends

- Local data regarding types of abuse people may experience is directly in line with data reported in England to the Health and Social Care Information Centre for 2013/14.
- First plateau of safeguarding referrals since the introduction of the SET Guidelines in 2008.
- Older people continue to be the subject to the highest percentage of safeguarding referrals, however are the highest demographic service user group in receipt of services.
- Neglect continues to be the most prevalent reported category of abuse.
- There is no consistent, year of year pattern as to the location where reported abuse occurs.
- In 2013/14, the highest prevalence of reports of abuse was for people living in their own homes. The numbers of referrals for people living within supported living schemes has continued to drop over the past four years.
- In 88% of all concluded cases, the risk to the individual has been removed or reduced. It is not possible to achieve the removal of risk in 100% of cases as some people make informed decisions to remain in contact with the alleged perpetrator and have capacity to make this decision.

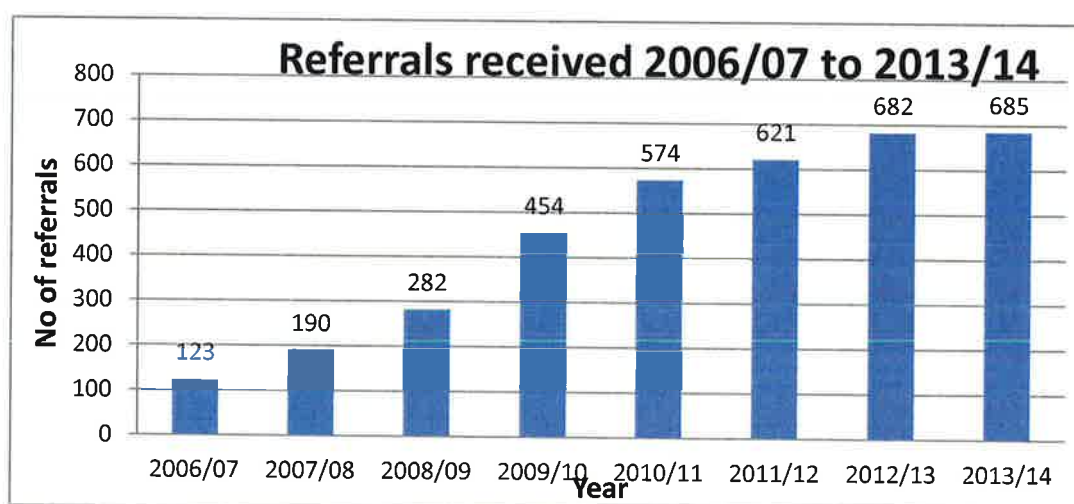


Chart 1: Referrals received

The rate of referral for 2013/14 equates to a 0.4% increase from 2012/13. The rate of referral has increased 10.3% in the last three years. Since data has been collected, there has been a 456% increase in referrals. This increase is attributed to a coordinated approach to detecting and reporting safeguarding, and due to increased awareness both locally through the work of the Council and the Safeguarding Adults Board and nationally through issues of public concern.

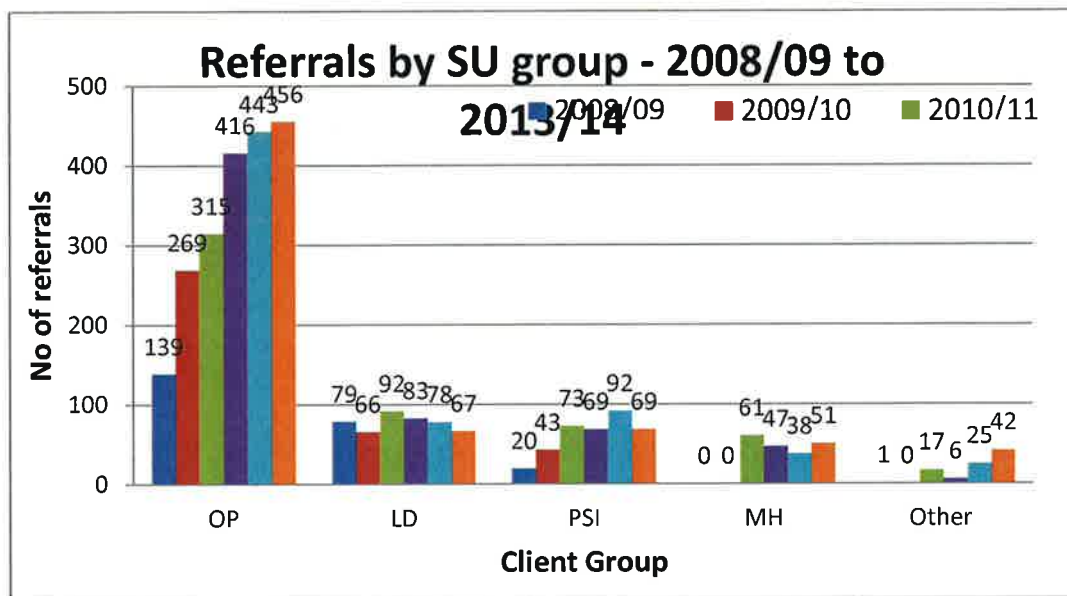


Chart 2: Referrals by service user group

Referrals are recorded by the main presenting need of the person. The categories illustrated are: people over 65, people with a learning disability, people with physical or sensory impairment needs and people with mental health conditions or other needs.

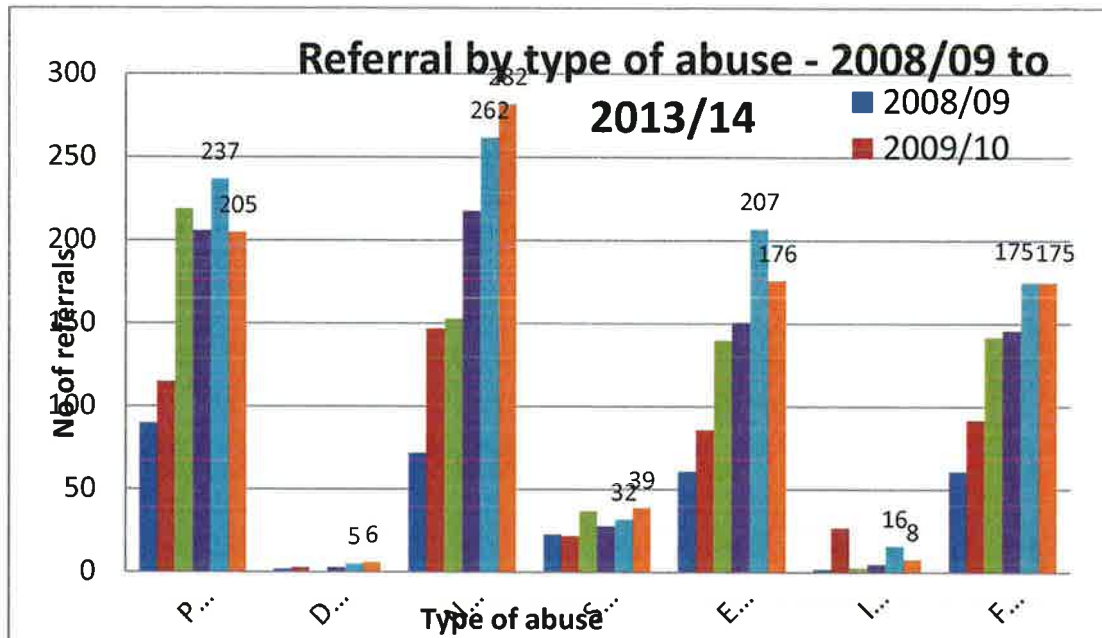


Chart 3: Referral by type of abuse

A person may be subject to allegations of multiple types of abuse. It should be noted that abuse types are recorded as part of the referral. It is possible that as the investigation progresses, there are other forms of abuse that are disclosed.

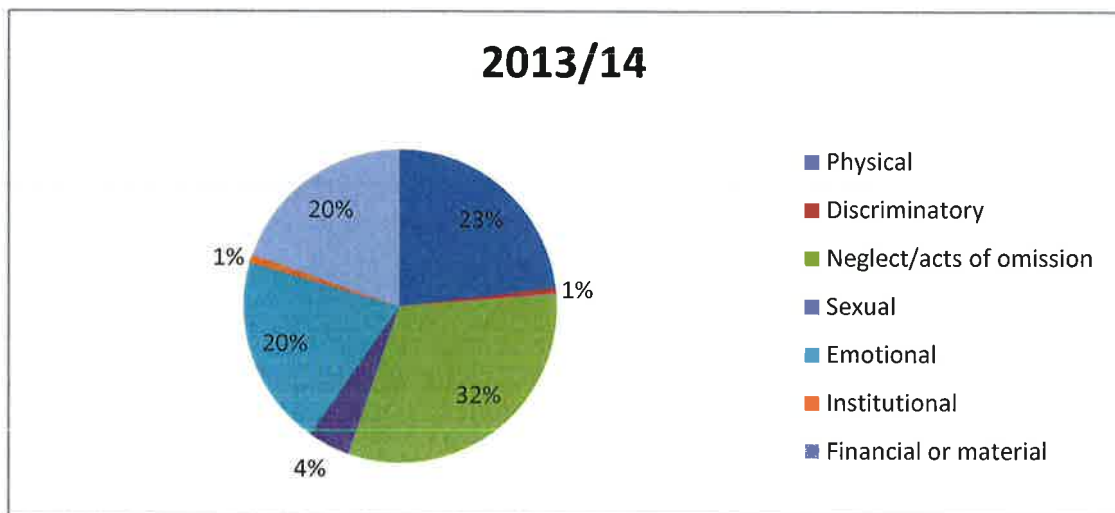


Chart 4a: Types of abuse by category and percentage-Southend

The types of abuse reported are broken down by category and percentage. In 2013/14, the predominate type of abuse is *neglect/acts of omission*.

HSCIC Safeguarding Adults Return 2013/14- ENGLAND

Type of Alleged Abuse or Risk	Percentage
Physical	27
Sexual	5
Psychological/ Emotional	15
Financial and Material	18
Neglect and Acts of Omission	30
Discriminatory	1
Institutional	4

HSCIC Safeguarding Adults Return 2013/14

Chart 4b: HSCIC ENGLAND comparator data

Using national comparator data from the Health and Social Care Information Centre data, Chart 4b highlights that Southend data, although from a much smaller sample size, reflects the national referral patterns with variations within a few percentage points.

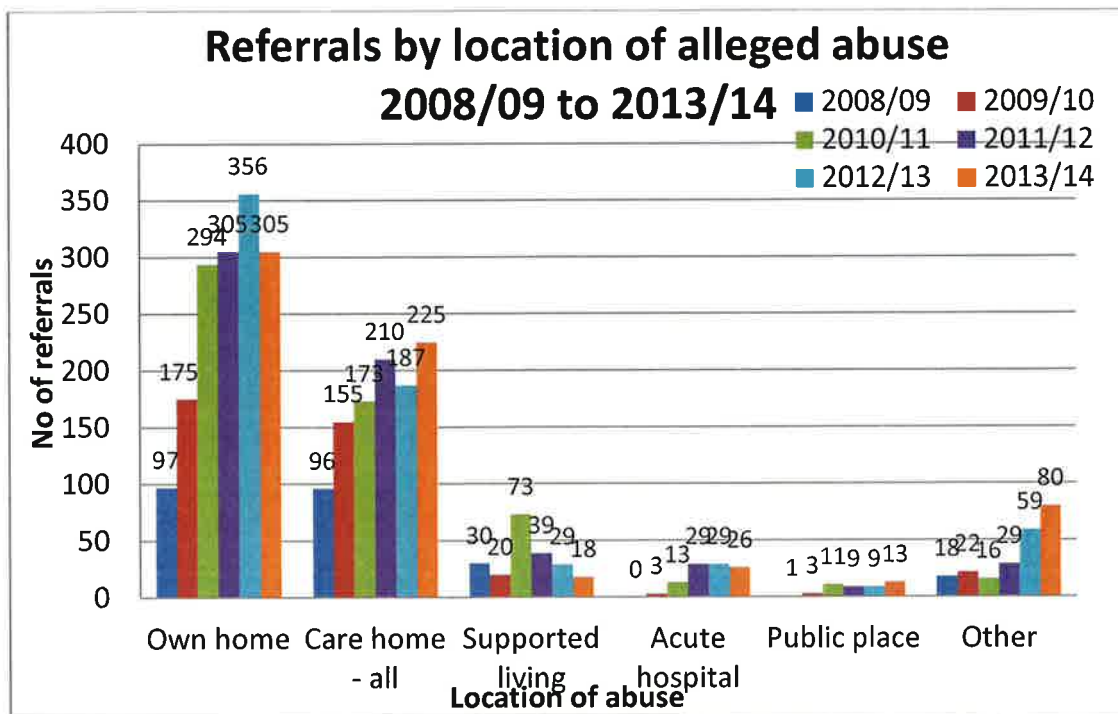


Chart 5

There has been a 14.3% decrease in allegations raised about people living in their own homes and a 20.3% increase in cases referred for people residing in care home settings. The location of the abuse does not assume that the alleged perpetrator is associated with the provision of location or service, so for instance, if a concern is recorded as occurring in a care home, it should not be assumed from the 'Location of the Abuse' statistics that the alleged perpetrator is associated with the care home. There has been a 35.6% increase in referrals in other locations. An example of another location could be recorded as such for a person residing in a care home who develops a pressure area the day after being admitted into the hospital. It would be unclear, until a root cause analysis was undertaken, where the pressure area developed, so it would be recorded as 'location unknown.'

Location of alleged abuse	2008/09	2009/10	2010/11	2011/12	2012/13	2013/14
Residential	39.7%	41.0%	29.8%	33.8%	28.0%	33.7%
Community	60.3%	59.0%	70.2%	66.2%	72.0%	66.3%

Chart 5a

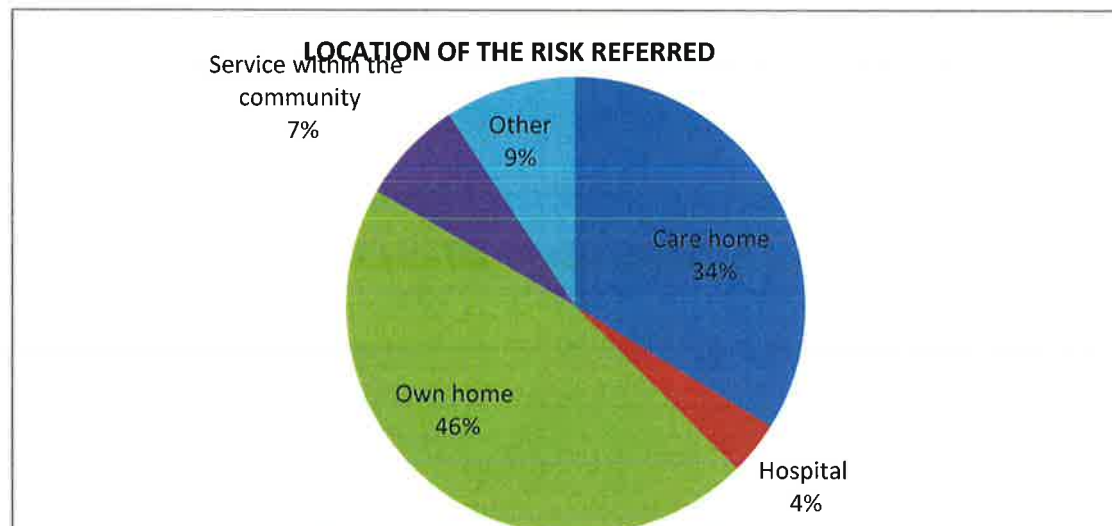


Chart 5b

Chart 5 and 5a and 5b: Referrals by location of abuse

In 2013/14, the highest prevalence of reports of abuse were for people living in their own homes. The numbers of referrals for people living within supported living schemes have continued to drop over the past four years. This is interesting to note, considering the trend of deregulation of care homes and introductions of new

schemes that has occurred across the sector during this time. The location of 'other' can cover a multitude of variable locations.

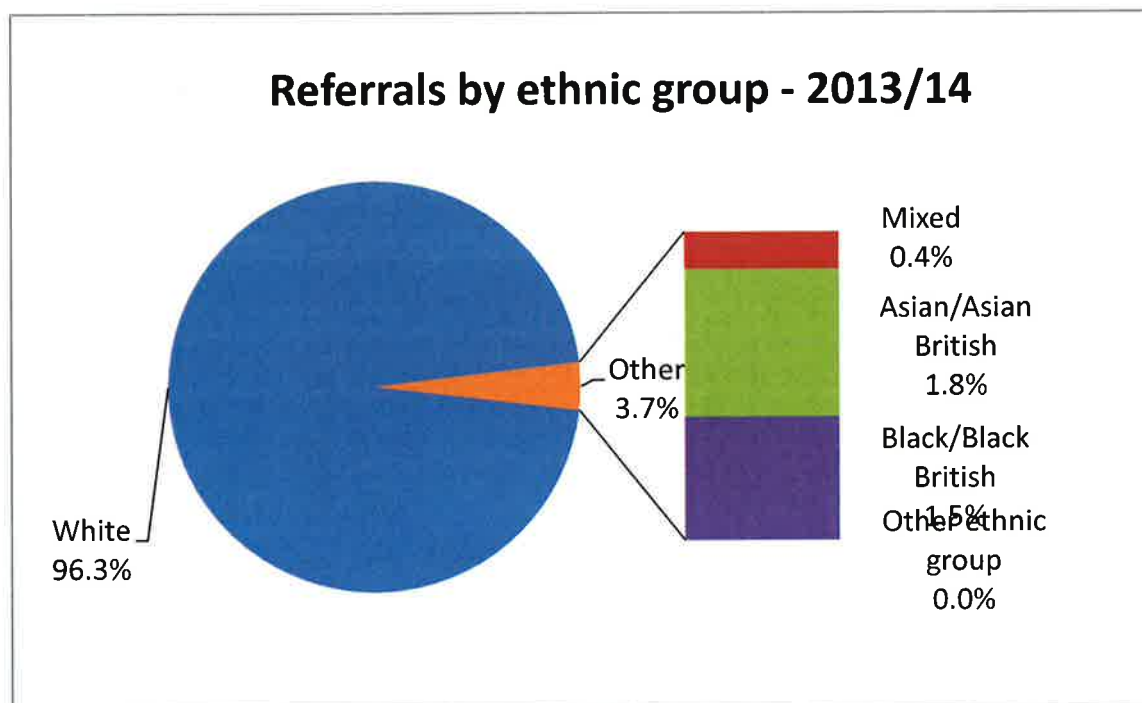


Chart 6

2013/14 Referral By Ethnicity	NUMBER	%	2011 CENSUS %
White	642	96.3%	92%
Mixed	3	0.4%	2%
Asian/Asian British	12	1.8%	4%
Black/Black British	10	1.5%	2%
Other ethnic group	0	0.0%	1%

667

Chart 6a

Chart 6 and Chart 6a: Referrals by ethnic group

Office of National Statistics comparator data

Charts 6 and 6a feature the numbers of referrals broken down by ethnicity compared to local percentages depicting the ethnic makeup of Southend. For illustrative purposes, 1.8% of all safeguarding referrals for 2013/14 were reported regarding Asian/Asian British adults. People who describe themselves as Asian/Asian British make up 4% of the total population of Southend-on-Sea.

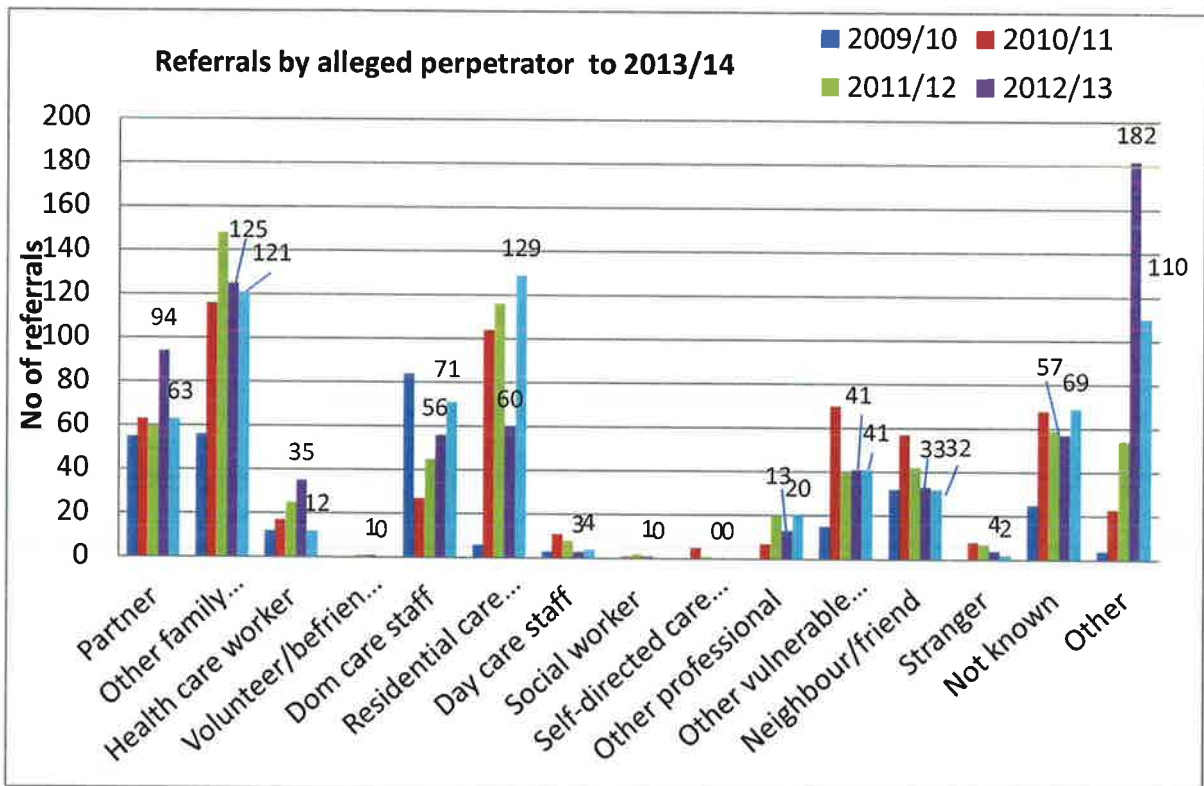


Chart 7: Referrals by alleged perpetrator

Chart 7 illustrates the relationship between the victim and the alleged perpetrator. 20% of all alleged abuse is reportedly perpetrated by residential care home staff. 11.1% of referrals are allegedly perpetrated by domiciliary care staff, providing support to people within their community based accommodation or home.

28.7% of all safeguarding referrals meet the definition of domestic abuse. The Home Office definition of domestic violence and abuse now states:

“Any incident or pattern of incidents of controlling, coercive or threatening behavior, 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*

Controlling behavior is: a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behavior.

Coercive behavior is: an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.”

This definition, which is not a legal definition, includes so called ‘honour’ based violence, female genital mutilation (FGM) and forced marriage, and is clear that victims are not confined to one gender or ethnic group (Home Office 2012).”

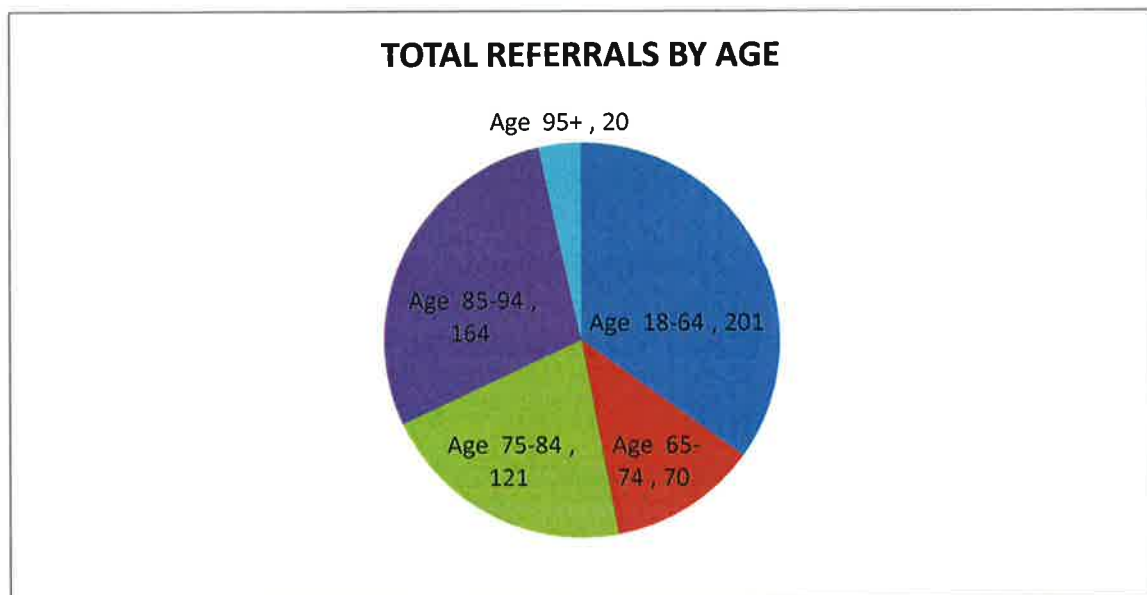


Chart 8: Total referrals by age

Chart 8 illustrates the referral rate by service user age. The total number of referrals for each age bracket are also listed. The highest prevalence is for working aged adults, followed by people from aged 85-94.

POPULATION BY AGE BAND

	Age					TOTAL
	18-64	65-74	75-84	85-94	95+	
TOTAL	105501	15184	10548	5066		136299
Proportion	77%	11%	8%	4%	0%	

The adult population is 77% of the total but only accounts for 35% of referrals.

Chart 8 a

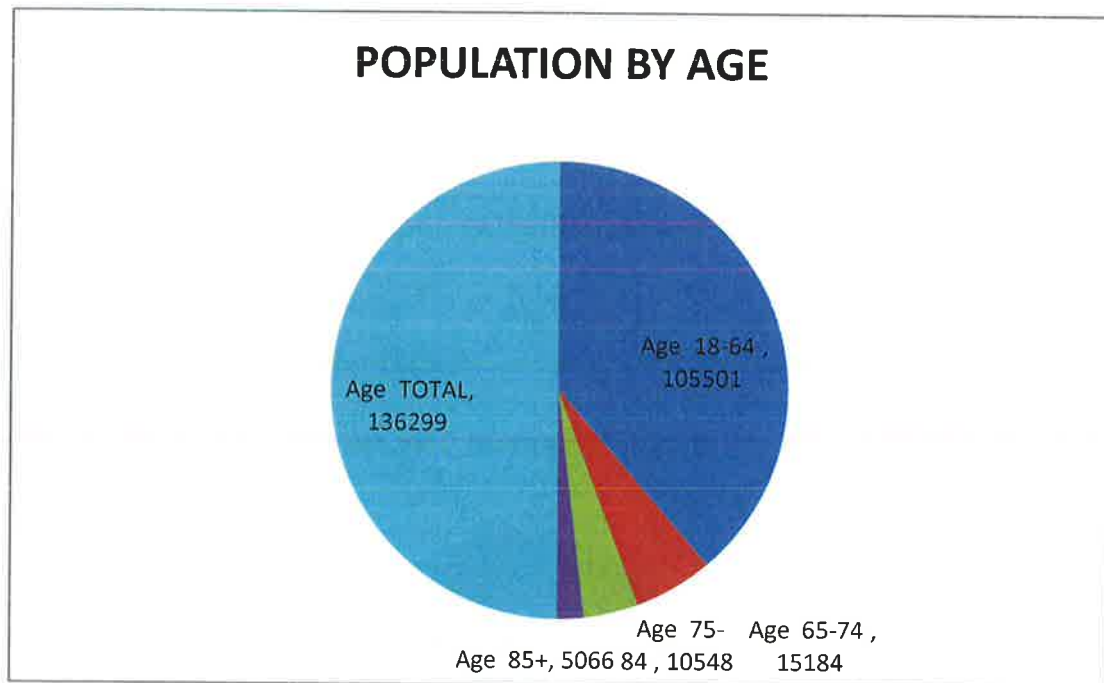


Chart 8b

SERVICE USERS		
18-64	1438	26.1%
65+	4076	73.9%
total	5514	

POPULATION		
18-64	105501	77.4%
65+	30798	22.6%
total	136299	

Adults make up around 3/4 of our population. But 1/4 of the service users.

Older People make up 1/4 of the population but account for 3/4 of service users.

This pattern is roughly repeated in the proportion of referrals by age.

Chart 8 c

Charts 8a and 8b depict the proportion of referrals received split by age and the proportion of the general population split by age in Southend. These charts show that adults aged 18-64 make up 77% of the population in Southend whilst this group accounts for only 35% of the safeguarding referrals received. From people 75 years old and upwards, this accounts for 11% of the total population of Southend, conversely this age group had 49% of the safeguarding referrals. This would not be unusual as the majority of people in receipt of services from Southend Borough Council are over the age of 65.

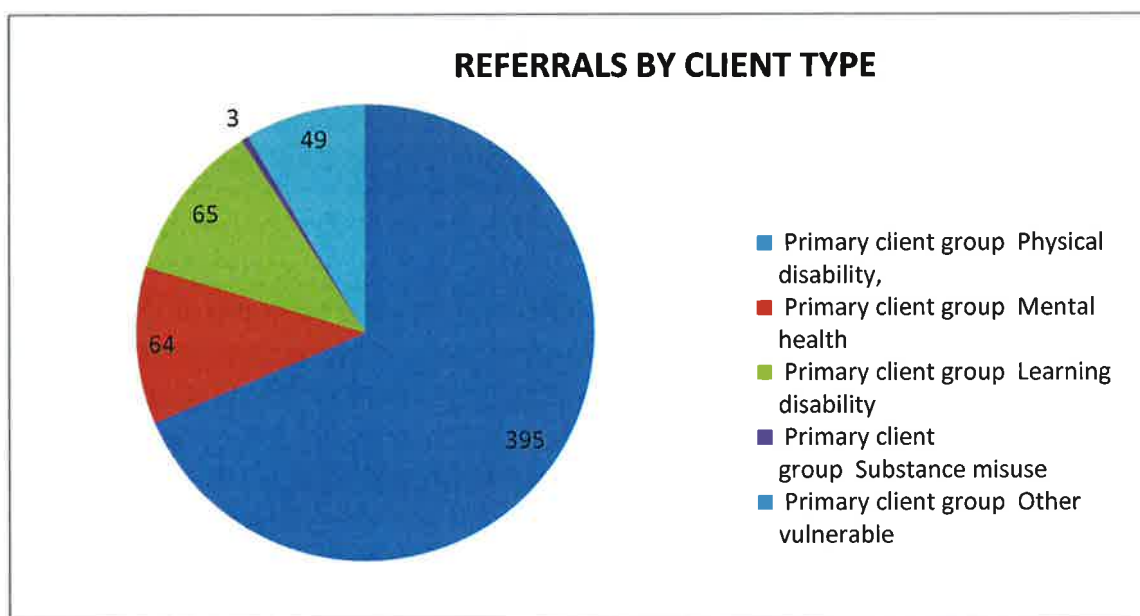


Chart 9: Referrals by client type

Each person referred to the Council under safeguarding procedures is classified as having a 'primary client type' as their main, predominate need for support. In 2013/14, 68.7% of all referrals were for people classified as having a physical/sensory impairment. 11.1% of people are classified as having predominantly mental health related needs with 11.3% of people having learning disability related needs 8.52% of people have other vulnerabilities. 0.52% of all referrals were for people who had primary substance misuse needs.

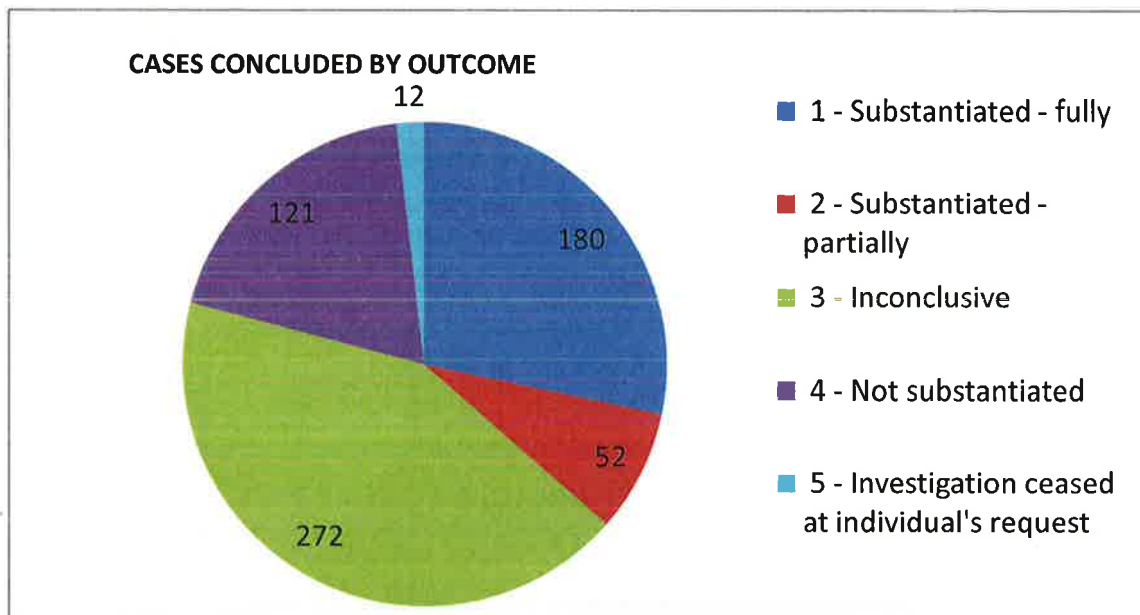


Chart 10: Case conclusion by outcome

This chart illustrates the number of case concluded by the outcome of the investigation. 42.7% of cases reached the conclusion of *inconclusive*, meaning that it could not be established on balance of probabilities whether abuse occurred. 8.16% of cases reached the conclusion of *partially substantiated*. 28.2% of cases reached a conclusion of *substantiated* where, on balance of probabilities, it would established that the allegation occurred and was abusive in nature. 19% of allegations were deemed *not substantiated* as there was evidence to confirm that on balance of probabilities, abuse did not occur. 1.88% of investigations *ceased at the request of the alleged victim*. This action was taken as the adult had capacity to make this decision and there was no threat to any vulnerable adult.

FOR THE REFERRALS RECEIVED AND CONCLUDED IN 2013/14

DURATION (DAYS)	CASES OPEN/CLOSED	AVERAGE TIME (DAYS)
1-28 DAYS	174	11
29-91 DAYS	154	55
92+ DAYS	136	177
DURATION (DAYS)	CASES OPEN/CLOSED	
1-28 DAYS	174	38%
29-91 DAYS	154	33%
92+ DAYS	136	29%
	464	

FOR THE REFERRALS RECEIVED AND NOT CONCLUDED IN 2013/14

DURATION (DAYS)	CASES STILL OPEN
1-28 DAYS	13
29-91 DAYS	48
92+ DAYS	65
	126

Chart 11

For the referrals open and closed in 2013/14:

Roughly 1/3 of all referrals are open and closed within one month. 1/3 of cases are opened and closed within 2-3 months. 1/3 of cases take longer than three months to conclude the investigation due to the complexities of the individual circumstance. In effect, just over 2/3 of referrals are closed within three months of initial referral. For the referrals received but not concluded during 2013/14, 10% were received less than one month before year end. 38% of the referrals had been open between 2-3 months before year end. 52% had been received more than three months before year end. There is no nationally prescribed time periods that govern length of investigations.

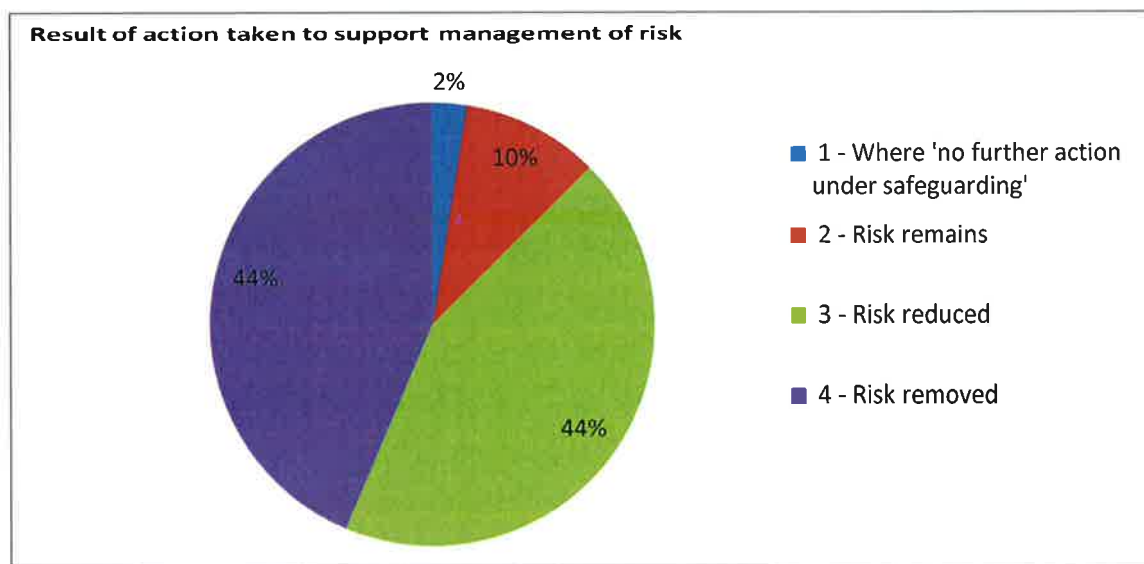


Chart 12: Risk

Chart 12 depicts the risk that remains after the safeguarding investigation has concluded. In 88% of cases, risks were either completely removed or reduced. An example of a risk removed is the conviction of perpetrator who is then referred to the Disclosure and Barring Service for consideration of suitability to work with vulnerable

people. Another example of risk reduction is the introduction of a court appointed deputy where there are concerns with regards to a family member's management of the money of a person who lacks capacity to manage this independently. There are occasions due to the choice of the service user in which they continue to be exposed to the identified risk of violence or harm; however they have the ability to make these informed decisions.

SECTION 5

Key Priority Development Areas in Safeguarding for Department of People: Adults 2014/15

Adult Services is working at strategic and operational levels to deliver a programme of work to support statutory responsibilities and the Council's Corporate Plan whilst assisting the SVAB to deliver the objectives of the SVAB Business Plan.

Objective	Aim	Delivery progress	Performance Indicator
Prevention and empowerment	Improve feelings of safety whilst accessing the community	Southend Borough Council is working with SHIELDS and BATIAS to support the delivery of the Keeping Safe Sticker scheme.	60% awareness of people with a learning disability as facilitated by the SHIELDS Councillors via a questionnaire.
	Demonstrative leadership and engagement in SVAB Action Groups	To continue to play a key role in supporting the efficient delivery of the SVAB Business Plan objectives through leadership in the Action Groups.	Through engaged attendance and participation and delivery of associated action plan, highlighting any mitigating risks.
Personalisation	Making Safeguarding Personal	Southend Borough Council and the Southend SVAB have applied and been accepted to	77% overall positive feedback from service users via the Outcome Questionnaire

		<p>implement the Making Safeguarding Personal agenda. To ensure that services and interventions place service users at the heart of what we do. To ensure that service users are supported proactively to take risks if they have capacity to do so.</p>	<p>process.</p> <p>To address issues of practice through revision of the SET Guidelines and through the Training Subgroup.</p>
Support, advocacy and intervention	Support to younger and adult male victims of sexual violence	Adult Social Care to work with Public Health, the Child Sexual Exploitation Workgroup and the SVAB and LSCB to ensure there is adequate provision to support males who may experience sexual violence.	Support the work of Health to ensure that the psychosocial aftercare needs are met through the identification of local resource to meet this need.
	Supporting adults with complex needs	Work with the Council's Housing Team, Supporting People Team and Drug and Alcohol Commissioning Team to roll out a programme to support people with complex needs who are experiencing homelessness.	Support the work being led by the Council's Housing Service and the Drug and Alcohol Team

	Explore a triage of referrals system	Explore with the LSCB and the SVAB and key partners whether a triage mechanism for safeguarding referrals adds benefit to the investigation outcomes and to the experience of the service user.	Support the multiagency work to explore this area with the SVAB and LSCB
	Imbed the Family Focus Protocol	Ensure the imbedding of the Family Focus Protocol across Adult Services so that information is shared in the best interests of service users and families so that families have the support they require to live lives free from fear and abuse.	70% of all Adult Services assessment practitioner staff are aware and working in line with the Family Focus Protocol
	Support people who engage in hoarding behaviour	Adult Social Care to lead work with partners to identify appropriate pathways to support people who self neglect and hoard belongings at the detriment of their safety or wellbeing.	Development of a pathway map of services Ensure that 70% of Council assessment staff demonstrate an awareness of the services that are available to support people around this area of need through workforce development

Governance and Quality Assurance	Dynamic informatics systems for safeguarding and deprivation of liberty referrals	Ensure that systems can provide intelligent information to comply with statutory and local requirements to aid management and quality assurance.	100% compliance with data returns to the SVAB Quality Monitoring Subgroup and statutory reports for the Information Centre.
	Support the Safeguarding Adults Board to assume statutory footing via the Care Act implementation	Provide lead strategic advice and support to the SVAB towards working to ensure the Board is prepared for strategic footing.	Trough positive engagement with the SVAB Subgroups
	Ensure that the investigation functions and processed are complaint with the Care Act implementation- duty to cause an enquiry	Lead the Council's work and input into the redevelopment of the SET (Southend, Essex and Thurrock) Safeguarding Adults guidelines. Ensure that all training commissioned by the Council is compliant with the legislation.	Contribute to the revision of the SET Safeguarding Adults Guidelines, which when completed will be endorsed by the SVAB.

SECTION 6

Overall Summary

Performance in safeguarding continues to be strong, with the rate of referrals consistent, which demonstrates a high level of local awareness of safeguarding issues.

The Council continues to contribute strongly into the development of the SVAB as it makes its' journey to become a statutory board. There are many areas of development and improvement that have been highlighted in the report and planned for the coming year.

Endorsed by:

Date:

Southend-on-Sea Council Corporate Director for People	12 November 2014
Southend-on-Sea Borough Council Cabinet	