



SAFEGUARDING
AduDONCASTER**its**

Annual Report
2015/16

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Glossary

CQC -	Care Quality Commission
DBHFT -	Doncaster & Bassetlaw Hospitals NHS Foundation Trust
DCCG -	Doncaster Clinical Commissioning Group
DMBC -	Doncaster Metropolitan Borough Council
DSAB –	Doncaster Safeguarding Adults Board
DSCB -	Doncaster Safeguarding Children Board
HMPS -	HM Prison Service
KSF -	Keeping Safe Forum
RDaSH -	Rotherham Doncaster and South Humber Mental Health NHS Foundation Trust
SYF&R -	South Yorkshire Fire & Rescue Service
SYP –	South Yorkshire Police



Chair's Foreword

I am pleased to introduce myself as the interim Director of Adults Health and Wellbeing and Chair of the Doncaster Safeguarding Adults Board. Although I have only been in the role for a short while I can clearly say that it has been a busy and challenging year for the Doncaster Safeguarding Adults Board and its partners.

April 2015 saw the implementation of the Care Act 2014 which placed Safeguarding Adult Boards on a statutory footing and led us to develop a new Board Constitution, setting out the requirements of the Board and its members. In addition the Board and its partners have been working hard in Doncaster, alongside our regional partners to ensure systems, policies, procedures and assurance frameworks are aligned to the requirements of the Care Act so that adults at risk are safeguarded and receive the best service that is **personal for them**.

The Board has continued to pursue its engagement agenda with great focus through a 'Keeping Safe Campaign' helping communities to respond to abuse and neglect. It has worked with the Doncaster Keeping Safe Forum, a community based forum that has been supported by the Board to grow in capacity and membership with the primary aim of getting the message out in Doncaster.

In addition the Board requested a Safeguarding Adults Peer Challenge which was undertaken in November 2015. The process identified a number of strengths and areas for development which are being responded to through a partnership action plan.

The Board has continued to meet on a quarterly basis and has been well attended by a range of agencies with commitment to working in partnership to safeguard adults at risk. The Board held its annual away day in February to assess progress against its strategic objectives, refresh the strategic plan and revise the Board structure to make sure it is fit for the future. The day was productive with a clear direction established and expressed in the new Strategic Plan 2016-19.

The Board are looking forward to pursuing their strategic objectives through 2016-17 and working in partnership with the community of Doncaster to make sure that **safeguarding is everyone's business**.

Kim Curry,
Interim Chair Doncaster Safeguarding Adults Board
Director of Adults, Health and Wellbeing

Membership of the board

Jo Miller
Chief Executive, Doncaster Metropolitan Borough
Council



Kim Curry
Interim Director of Adults Health and Wellbeing
Doncaster Metropolitan Borough Council



Pat Higgs
Assistant Director Care Management
Doncaster Metropolitan Borough Council



Councillor Glynn Jones
Lead for Safeguarding Adults



Mary Shepherd
Chief Nurse, Doncaster Clinical Commissioning Group



Doncaster

Clinical Commissioning Group

Andrew Russell
Deputy Chief Nurse, Doncaster Clinical Commissioning
Group



Doncaster

Clinical Commissioning Group

Neil Thomas
Superintendent, South Yorkshire Police



Susan Jordan
Chief Executive, St Leger Homes



Chris Prewett
Head of Nursing and Safeguarding
Rotherham Doncaster and South Humber NHS
Foundation Trust



Deborah Oughtibridge
Head of Safeguarding
Doncaster and Bassetlaw Hospitals NHS Foundation
Trust



Judith Wild
Sub-regional Senior Nurse, NHS England



Dawn Peet
South Yorkshire Fire and Rescue



Rosie Faulkner
Board Manager, Doncaster Safeguarding Children's
Board



Bill Hotchkiss
Head of Service Community Safety Doncaster
Metropolitan Borough Council



Maryke Turvey
Assistant Chief Executive, South Yorkshire Community
Rehabilitation Service



Julia Gordon
Inspector Manager, Care Quality Commission
(attends Board on annual basis by invitation)



Andrew Bosmans
Non-Executive Director, Healthwatch Doncaster



Sarah Mainwaring
Assistant Chief Officer, SY National Probation Service



Yorkshire Ambulance Service
represented by Doncaster Clinical Commissioning
Group

Angela Barnes
Project Support Officer, Doncaster Keeping Safe Forum
(attends Board on annual basis by invitation)



Governance during 2015/16

The Board has met on four occasions; overall there has been excellent multi-agency attendance (see Appendix 4). For transparency the Board's annual reports, safeguarding adults reviews and Board minutes are publically available and can be found at; www.doncaster.gov.uk/safeguardingadults. All work of the Board is underpinned by the six key principles of safeguarding;

Empowerment: Presumption of person led decisions and informed consent.

Prevention: It is better to take action before harm occurs.

Proportionality: The least intrusive response appropriate to the risk presented

Protection: Support and representation for those in greatest need.

Partnership: Local Solutions through services working with communities

Accountability: Accountability and transparency in delivering safeguarding

Board Structure

During 2015/16 the Board has had the following sub groups;

Business Coordination Sub Group

Chaired by Roger Thompson, Independent Chair of DSAB

The group coordinates and manages the core operational business of the Board allowing for the Board to focus on strategic safeguarding adults issues.

Engagement Sub Group

Chaired by Susan Jordan, Chief Executive of St Leger Homes

The group takes its work from the objectives set out in the DSAB Strategic Plan. Its main aim is to raise awareness of safeguarding adults in the community and get the message out that safeguarding is everyone's business.

Workforce Sub Group

Chaired by Chris Prewett, Head of Nursing and Safeguarding, RDASH

The group takes its work from the objectives set out in the DSAB Strategic Plan. Its main aim this year has been to develop a National Competency Framework for Safeguarding Adults and agree a multi-agency training programme for 2015/16.

Performance Sub Group

Chaired by Pat Higgs, Assistant Director of Care Management, DMBC

The group is responsible for developing a performance and assurance framework and monitoring the performance and quality of safeguarding adults work in line with national and regional data.

Policy and Practice Sub Group

Co-chaired by Deborah Oughtibridge, Head of Safeguarding, DBHFT and Pat Higgs, Assistant Director of Care Management, DMBC

This group has been on hold throughout 2015/16 due to a lack of attendance. The Board were informed of the issues relating to attendance of this group and this informed the Board away day in considering a revised Board structure for 2016/17.

Safeguarding Adults Review Panel

Chaired by Peter Horner, Public Protection Unit Manager, SYP

This group is responsible for establishing whether there are multi-agency lessons to be learned through the Safeguarding Adults Review process. Monitoring recommendations and action plans arising from Safeguarding Adult Reviews (SAR) / Learning Lessons Reviews (LLR) and sharing lessons learned across the partnership.

DSAB Key Achievements 2015/16

The Board set out to deliver its strategic objectives as identified in its strategic plan 2013-16 (refer to appendix 5). The Boards progress against its strategic plan during this period is presented overleaf.

DSAB Strategic Objectives 2015/16

Strategic Objective 1

To review the constitution of the DSAB in line with current legislation, statutory guidance, national and local priorities to safeguard adults at risk across Doncaster

What we said we'd do	What we've done	Still to do
<p>1.1 Embed South Yorkshire Procedures across Doncaster through the development and roll out of a formal launch.</p> <p>1.2 Revise the Board constitution to reflect the DSABs relationship with other Partnerships.</p> <p>1.3 Engage with Prison Services to understand the needs of the prison population with a view to embedding safeguarding.</p> <p>1.4 Develop Process for Overarching Safeguarding Cases.</p> <p>1.5 To revise the Memorandum of Understanding with CQC to clarify role and responsibilities across the multi-agency partnership to safeguard adults at risk</p> <p>1.6 Embed Joint Safeguarding Multi-agency Capability Framework in practice across the partnership.</p> <p>1.7 To review Doncaster Safeguarding Adults Policy and Procedures every 3 years</p> <p>1.8 Develop multi-agency training quality assurance process.</p>	<p>1.1 DSAB launched and embedded revised SY Procedures across Doncaster through a formal launch event.</p> <p>1.2 DSAB revised its constitution as a Board, all agencies have signed up to this and it has been published on the Boards webpage</p> <p>1.3 DSAB engagement with Prisons is not representative nor consistent, further work has commenced to engage with Prisons</p> <p>1.4 DSAB have developed a process for overarching safeguarding cases and this is accessible to the workforce</p> <p>1.5 The Memorandum of Understanding has been revised to clarify interagency relationships</p> <p>1.6 DSAB have worked in collaboration with Bournemouth University to revise the National Competency Framework, further work will be needed to embed this once adopted by the Board</p> <p>1.7 DSAB have revised the following policies during 2013-16;</p> <ul style="list-style-type: none"> • South Yorkshire Procedures • Safeguarding Adults Review Policy • Policy on Development and Management of Procedural Documents 	<p>DSAB have worked closely with Bournemouth University to revise the National Competency Framework in line with the Care Act 2014 requirements.</p> <p>DSAB will need to embed this once adopted by the Board. This is currently placed on the Workforce sub group work plan for progressing.</p> <p>DSAB have still to develop a multi-agency training quality assurance process. This is currently placed on the Workforce sub group work plan for progressing.</p> <p>Further work is on-going to engage Prisons and ensure representation at Board level is effective.</p> <p>Work is on-going to develop a new operational model for Safeguarding Adults to respond to the recommendations set out in the Safeguarding Adults Peer Review report and support the requirements of the Care Act.</p>

Strategic Objective 2

To deliver the DSAB Strategy through a Performance Framework, holding agencies to account and embedding lessons learned through robust governance and quality assurance processes.

What we said we'd do	What we've done	Still to do
<p>2.1 To review agencies and board substructure representation at Board to safeguarding adults at risk</p> <p>2.2 To review multi-agency representation at Board to safeguard adults at risk</p> <p>2.3 Revise the Board Strategic plan 2013-16 in line with emerging guidance / legislation</p> <p>2.4 Ensure robust work plan governance is in place to deliver the strategic plan and inform Board of its progress</p> <p>2.5 Ensure robust governance in place to assure the Board that actions from SCR/LLRs are being implemented</p> <p>2.6 Ensure robust risk management processes are in place (risk register) to identify, mitigate and inform the Board about risk in relation to achieving the Boards strategy</p> <p>2.7 To produce an Annual Report that provides clear and accessible information for the public and agencies detailing the work and achievements of the DSAB.</p> <p>2.8 To undertake a rolling programme of audit to provide; process and quality measures, quality assure appropriateness of referrals and implementation of actions to improve practice</p> <p>2.9 To produce a quarterly report that collates a dashboard of information relating to;</p> <ul style="list-style-type: none"> • Performance, outcome, process and quality measures, themes and trends 	<p>2.1 DSAB reviewed its substructure and multi-agency representation.</p> <p>2.2 DSAB reviewed its multi-agency representation at Board to include wider agencies as included within the Care Act 2014</p> <p>2.3 DSAB revised its Strategic Plan 2013-16 in line with the Care Act and emerging demands</p> <p>2.4 DSAB continued to provide robust work plan governance to inform the Board of its progress against its strategic plan</p> <p>2.5 DSAB revised the SAR Policy and Toolkit to ensure the Board have a robust process for considering and undertaking SAR's and learning and sharing lessons.</p> <p>2.6 DSAB continue to provide robust processes for identifying and managing risk in relation to achieving the Boards strategic objectives</p> <p>2.7 DSAB redesigned and produced a timely Annual Report with accessible information for the public and agencies, including a case study.</p> <p>2.8 DSAB undertook a re-audit of case files to measure improvement since the previous audit to drive continuous improvement in practice</p>	<p>The DSAB Performance and assurance framework needs to have a focus on outcomes for adults at risk.</p>

Strategic Objective 3

To develop a Safeguarding Adults Preventative Strategy that empowers adults at risk to protect themselves from abuse, supporting communities and people through effective risk management in personalisation of their care.

What we said we'd do	What we've done	Still to do
<p>3.1 Develop a Safeguarding Adults Preventative Strategy that outlines Doncaster's approach to preventing adults at risk from abuse to include;</p> <ul style="list-style-type: none"> Board's responsibility for self-neglect to inform management of adults at risk inform Strategy Proposed model to manage adults at risk through reportable concerns (low level concerns) <p>3.2 Implement Making Safeguarding Personal across the multi-agency partnership</p> <p>3.3 Implement Safeguarding Adults Communication Plan</p> <p>3.4 Embed a consistent approach to assessing mental capacity across partnership through assurance;</p> <ul style="list-style-type: none"> sign up to MCA Joint Agency Agreement formal launch of MCA1,2,3 forms across multi-agency partnership <p>3.5 To develop user satisfaction feedback mechanism</p>	<p>3.2 DSAB have developed a strategy to implement and embed Making Safeguarding Personal in practice however further work needs to take place to ensure it is embedded in practice across the partnership and will need to be considered as a priority in the revised strategic plan.</p> <p>3.3 DSAB have continued to implement its Communication and Engagement Plan. A public consultation is taking place to inform a new revised plan for 2016/17.</p> <p>3.4 DSAB have developed and signed up to the MCA Joint Agency Agreement across the partnership to provide a consistent approach to the Mental Capacity Act. In addition the MCA forms have been revised and launched and are accessible for use. on performance matters including information relating to performance, process, quality measures, themes and trends</p>	<p>DSAB have still to agree and develop a preventative strategy that outlines Doncaster's approach to prevention and early intervention, this will need to be considered as a priority in the revised strategic plan.</p> <p>DSAB should continue to drive the implementation of the Making Safeguarding Personal strategy across the partnership, holding agencies to account for embedding MSP in practice. Work to embed MSP and revise an operational model that can facilitate this is underway.</p> <p>DSAB should develop and implement a service user feedback mechanism to evaluate the effectiveness of services provided to adults at risk.</p>

Strategic Objective 4

To review the needs of adults at risk with due regard to economic, social and legislative changes regarding factors such as social issues, criminal behaviour, mental and physical health and wellbeing, with a view to improving / shaping services to better meet their needs.

What we said we'd do	What we've done	Still to do
<p>4.1 Engage with Joint Strategic Needs Assessment process to identify and assess the needs of adults at risk to prevent abuse across Doncaster.</p> <p>4.2 Assess the impact of legislation and statutory guidance providing regular updates to Board</p>	<p>4.1 DSAB have engaged with the Joint Strategic Needs Assessment process and is awaiting the outcome of this work.</p> <p>4.2 Regular updates regarding the review of welfare spending have been presented to the Board for information and consideration.</p>	

Working Together to Safeguarding Adults and Children

The Board have worked in partnership with Doncaster Safeguarding Children's Board to develop a joint safeguarding self-assessment and challenge process to facilitate participation of partner agencies, increase efficiency and reduce duplication.

The purpose of the self-assessment and challenge process is to assess and audit the effectiveness of safeguarding arrangements across partnership agencies. Providing an arena where partners will be held to account and challenged to provide evidence to support the information they have provided within their self-assessment.

This process was rolled out during 2015/16 and has been positively received by partner agencies. Joint work is on-going to identify key themes and an evaluation of the process itself, which includes learning and improvement of the process. The process will be repeated bi-annually.

Implementing Making Safeguarding Personal in Doncaster

Building on the Board's previous involvement in a national pilot for Making Safeguarding Personal the Board received and approved the Strategy to Implement Making Safeguarding Personal in July 2015. The strategy identifies a 2 phase approach to implementing the required changes, to a shift from process to outcomes for adults at risk. The strategy focussed on a number of areas including;

- Supporting the required culture change of the workforce
- Revising documentation, systems, policies and procedures to focus on outcomes for adults at risk
- Widening the DSAB Performance framework to include outcomes
- Preparing wider independent providers of health and social care for undertaking S42 enquiries
- Robust governance arrangements to drive the strategy through service delivery

Phase 1 of the strategy has focused on supporting statutory health and social care services, ensuring that outcomes are sought at the beginning of the safeguarding adults process and services are designed to meet this expectation. The strategy has been well received and continues to be driven by the multi-agency MSP Project Group who report to the Board. Moving forward Phase 2 of the strategy will be commenced to ensure wider agencies are engaged and have the required skills to undertake Section 42 enquiries where appropriate.

DSAB Keeping Safe Campaign

The Engagement sub group have been working hard to deliver the Board's Communication and Engagement Strategy of which the Keeping Safe Campaign is a key part.

In order to do this effectively consultations were carried out with staff and general public at the Keeping Safe Event held in November 2015 in addition a questionnaire was sent out to the public via St Leger Homes House Proud magazine.

The consultations highlighted three themes;

- **Communication** – the need to reach the most vulnerable people not linked to existing services
- **Raising awareness and education** – the need to continue to deliver training around safeguarding adults and keeping safe across Doncaster, with a focus on educating young people
- **Empowerment** – supporting people to feel comfortable to report abuse through peer support, training and appropriate feedback

In response to this and in line with the Communication and Engagement Strategy a 'Keeping Safe Campaign' is continuing to be rolled out to empower adults at risk to protect themselves from abuse by raising awareness of safeguarding adults and the reporting process.

The key messages of the campaign are;

- Everyone has the right to be safe, to be respected, to be heard
- Everyone has a role to play to make this happen
- If you see something, say something (If you see, hear or suspect that someone is being abused, report it)

A number of methods have been used to support the campaign such as; consistent branding, marketing, press and public relations, social media, safeguarding film, leaflets, posters, banners and business cards, see below;

Is somebody treating you or someone you know badly?



If you see, hear or suspect that an adult at risk is being abused please contact:

01302 737391
(Emergency out of hours 01302 796000)

Deaf community SMS Text 07979 031116
Police Non-emergency 105 / Emergency 999

Information can be given in confidence. You do not have to give your name.

Further information can be found at:
www.doncaster.gov.uk/safeguardingadults

Safeguarding Adults



Keeping Safe: How to help adults at risk of abuse

Safeguarding Adults

Everyone has the right to be safe, respected and heard

Everyone has a role to play to make this happen

Safeguarding Adults

USEFUL CONTACTS

Adult Contact Team For all enquiries 01302 737391	Care Quality Commission CQC 03000 616161
Deaf Community SMS Text 07979 031116	Police Non Emergency 101 Emergency 999
Emergency out of hours 01302 796000	

adultcontactteam@doncaster.gov.uk
www.doncaster.gov.uk/safeguardingadults



Keeping Safe: How to help adults at risk of abuse

Safeguarding Adults

Moving forward the campaign will be refreshed in line with the revised DSAB Communication and Engagement Strategy to ensure it continues to get the message out to the communities of Doncaster that safeguarding adults and keeping safe is everyone's business.

Launch of Revised South Yorkshire Procedures

The Doncaster Safeguarding Adults Board have worked closely with Sheffield, Rotherham and Barnsley Safeguarding Boards to review regional South Yorkshire Multi-Agency Safeguarding Adults Policy and Procedures. These were formally launched across Doncaster in October 2015.

Reviewing the procedures has been a challenging piece of work given the differing local systems in place across the region, however the procedures will further support organisations to deliver a high standard of service and ensure that safeguarding has a focus on outcomes for adults at risk.



www.doncaster.gov.uk/safeguardingfilm

Keeping Safe Event 2015

We held our annual event at the Doncaster Keep Moat Stadium on 19 November 2015 with 162 people attending with a mixture of professionals and members of the public. This is an increase from last year where 105 people attended.

The overall aim of the day was to raise staff and public awareness of developments within Doncaster to keep adults at risk safe within our communities.

The day focused on the following;

- **Introductions** - DSAB Independent Chair and the South Yorkshire Police and Crime Commissioner
- **“You said, we did”** - Communication and Engagement Strategy 2012-2015 Susan Jordan – Chief Executive of St. Leger Homes of Doncaster / Doncaster Safeguarding Adults Board member and Engagement Sub Group Chair
- **“If you see something, say something”** – Safeguarding film
- **“Our journey”** - Doncaster Keeping Safe Forum
- **“Growing the Safeguarding tree”** – working together activity
- **Care Act 2014 – what it means for Safeguarding Adults** - Anne Graves – Head of Service, Safeguarding Adults and Partnerships, Doncaster Council
- **“The white stuff – The individual behind the disability”** Blake Williamson – Independent employer and disability equality trainer
- **Making Safeguarding Personal** - Shabnum Amin, Safeguarding Adults Learning and Development Manager, Doncaster Council and Dead Earnest Theatre Company and members of Keeping Safe Forum
- **Phil’s story** – Case Study - Shah Rauf – Principal Social Worker Safeguarding Adults, Doncaster Council
- **Closing comments** - Jo Miller, Chief Executive, Doncaster Council



What people told us about the event

There was positive feedback about the event, with 64% of evaluation respondents rating it good. People in particular, welcomed the opportunity for networking and the sharing of information. Feedback provided will be used to inform and develop future events.

Safeguarding Adults Peer Review

The Director of Adults, Health and Wellbeing requested a peer review of the Doncaster Safeguarding Adults Board and operational Safeguarding Adults services in July 2015 and the following areas of focus included;

1. The ability of the Board to understand safeguarding in relation to the Care Act and embed across Partnership
2. There is a robust strategy in place to embed Making Safeguarding Personal in practice
3. The Board has good working relationships and is effective
4. How does the Board know it is effective at safeguarding adults

The Peer Review Team visited Doncaster on 17 November 2015 for 3 days and assessed a range of documents, interviewed the key strategic leads for safeguarding adults and attended 5 focus groups which gave them an insight to safeguarding adults practice across the multi-agency partnership.

The findings included areas of strength, areas for improvement and areas requiring urgent review. In response the DSAB have developed a multi-agency action plan to address the areas identified within the report. The full Safeguarding Adults Peer Review Report can be found at www.doncaster.gov.uk/safeguardingadults

Mental Capacity Act Review

The DSAB are committed to ensuring the Mental Capacity Act 2005 (MCA) is embedded and a consistent approach is being applied across Doncaster. The MCA Joint Agency Agreement was developed and formally launched across the partnership in July 2014 to seek a strategic approach to embedding the Mental Capacity Act across the partnership.

To follow on from this an independent review of compliance with the Mental Capacity Act 2005 was commissioned by partner agencies to assure the Board that MCA is being implemented by health and social care providers. The findings of the review will be used to inform the Board and improve practice in this area moving forward.

Revision of the National Competency Framework

Doncaster has played a key role in reviewing the National Competency Framework for Safeguarding Adults in collaboration with Bournemouth University throughout 2015/16. Ensuring the revised framework meets the requirements of the Care Act 2014 and is fit for purpose. This document is a resource for staff and managers across all agencies to support and assess the capability and needs of the workforce. Moving forward Doncaster will be implementing the competency framework across the partnership to ensure the multi-agency workforce have the required range of skills and abilities to enable them to support all people who may be at risk of harm and abuse.

DSAB Priorities for 2016/17

Good progress has been made during 2015/16 regarding the delivery of the Strategic Plan 2013-16 with 17 key deliverables completed and 7 on-going to be carried forward. This report demonstrates the commitment of DSAB partners during times of significant change in the architecture of Public Sector organisations, independent providers and increasing pressures due to budget restraints.

The Care Act 2014 puts a duty on Safeguarding Adults Boards to develop its strategic plan with local community involvement and the local Healthwatch organisation.

The Board held its annual away day in February 2016 to reflect and refocus on a long term direction for the Board in line with the requirements of the Care Act 2014 and the findings from a local community consultation facilitated by Healthwatch to ensure priorities were in line with public expectations. The day resulted in a refreshed strategic vision and plan for the Board and a revised sub structure that would support delivery of the 3 year Strategic Plan for 2016-19.

The following four refreshed key objectives were collectively agreed;

1. **Sharing and engaging** – Sharing information and engaging with the people of Doncaster
2. **Helping, empowering and supporting** - Provide quality safeguarding services when abuse or neglect is identified and putting adults at risk at the centre of what we do
3. **Prevention** - Ensure agencies are working together to prevent abuse or neglect and take appropriate action when needed
4. **Prepare** - Hold agencies to account for the services they provide

The draft Strategic Plan 2016-19 will be presented to the Board for approval and embedded across the partnership commencing April 2016.

Sub Group Chairs Reflections 2015/16

Business Coordination Group

The Business Coordination Group (BCG) is represented by the sub group chairs and is responsible for coordinating the core business for Safeguarding Adults on behalf of the Board in line with the Board constitution. The Business Coordination Group;

- Receives all core business on behalf of the Board to direct and respond to the needs of the sub groups. Through promoting a culture of positive challenge it will achieve the Boards strategic objectives, identifying strategic issues and escalating risks as appropriate.
- Monitors, reviews and reports all performance issues to the board;

1. Coordinating the boards business
2. Holding sub groups to account through positive challenge
3. Oversee all escalated risks to achieve the Boards strategic priorities, identifying action and making recommendations where appropriate to mitigate risk.

Although in its early days, the Business Coordination Group, has met six times during 2015/16 and has been well attended by the sub group chairs. In moving forward during the next twelve months, the Business Coordination Group will transform into the Prepare Group in line with the revised sub group structure and will continue to develop its agenda to ensure sub groups are held to account for delivering the strategic objectives and the core business and risks of the Board are managed as appropriate.

Pat Higgs

Chair, Business Coordination Group

Assistant Director of Care Management, DMBC

Engagement Sub Group

2015/16 has been yet another busy and successful year for the Engagement Sub Group. Attendance at our group meetings and additional Task & Finish Group Meetings has been good and a small but committed group of people from across a range of agencies continue to work together to deliver some very positive results.

Our activities continued to be in line with the Strategic Priorities determined by the Safeguarding Adults Board and focus mainly on raising awareness and involving a wider audience in understanding how it is everyone's business to keep adults safe in Doncaster.

Our key objectives and achievements in 2015/16:

- We continued to build on the successful launch of our "Keeping Safe" campaign and got our message out (via posters, leaflets, cards and visits to other agencies) to a wider audience.
- We continued to support the "Keeping Safe Forum" which grew both in number of engaged attendees and in terms of the positive impact it continued to make. None of this would have been possible without the commitment and dedication of Angela Barnes, our Keeping Safe Co-ordinator. A big thank you to Angela.
- We held an extremely successful "Keeping Safe Event" on 19th November 2015, which was well attended and well received. The South Yorkshire Police & Crime Commissioner spoke at the event and was extremely complimentary about how we promote and address "Keeping Safe" in Doncaster.
- We used the Keeping Safe Event to kick start our consultation on developing our new Keeping Safe Communication and Engagement Strategy; the Keeping Safe Forum have continued this consultation and work has continued throughout the year to draft the Strategy for 2016-2020 (this will be presented to Safeguarding Adults Board at its July 2016 meeting).

Overall, 2015/16 has been a very busy and rewarding year and our work in the Engagement Sub Group was recognised as making a valuable contribution, through our Keeping Safe Campaign, Keeping Safe Forum and our Annual Keeping Safe Event, by the Peer Review Team who visited Doncaster in November 2015.

As Chair of the Engagement Sub Group, I would again like to take this opportunity to thank my colleagues on the group for their dedication, enthusiasm, expertise and commitment. Special thanks to my Vice Chair, Julie Jablonski for 'always being there', to Sharon Fung and Shabnum Amin respectively in their roles as lead officer, both of whom, at different times of the year, have worked tirelessly to ensure we achieve our objectives:-

- Keeping Safe is everyone's business
- Everyone has the right to be safe, respected and heard
- Everyone has a role to play to make this happen

Susan Jordan
Chair, Engagement Sub Group
Chief Executive St Leger Homes Ltd

Performance Sub Group

The Performance sub group is responsible for the monitoring and reporting of key performance indicators to ensure effective delivery of procedures relevant to the Doncaster Safeguarding Adults Board agenda.

Our key objectives are to progress and update the Board on a regular basis on the progress of the Boards strategic objectives and a range of performance indicators on a quarterly basis, identifying key themes and trends to inform Board. Also to further develop the Performance Framework to include measures relating to quality, process and outcomes.

The Performance sub group have met 6 times and it has been a challenging year in terms of attendance. Despite this the sub group has maintained a good level of productivity.

The most significant challenge this year has been holding health and social care agencies to account over the timeliness of the safeguarding process. This has been an on-going risk throughout 2015/16 and to address this the sub group have escalated this risk to the Board for strategic challenge and action, in addition the membership of the sub group has been extended to include statutory health and social care providers to promote ownership of safeguarding adults' performance information and identify ways to address shortfalls.

The DSAB performance framework will change significantly moving forwards. The introduction of the Care Act 2014 and principles of Making Safeguarding Personal stress the need for performance frameworks to move away from traditional process and focus on outcomes for adults at risk. Work is on-going through the MSP Strategy to revise systems, processes and reporting frameworks to measure outcomes to ensure that services are in line with the Care Act 2014 and are meeting the needs and wishes of adults at risk.

Pat Higgs
Chair, Performance Sub Group
Assistant Director of Care Management, DMBC

Workforce Sub Group

This year has seen the Workforce Sub Group grow and become a stronger through active engagement from its members. Attendance and the beginning of the year was highlighted as a risk however with clarity of member roles and a real focus on a partnership approach to achieving the Boards priorities the group has made a lot of ground and remains to be a well-attended sub group.

One of the key successes has been the revision of the Bournemouth University National Competency Framework which the sub group took a leading role to develop. A committed group of members took a new approach and developed a framework that can be practically implemented across the workforce from independent providers, to Health Services and Adult Social Care. These changes were welcomed by Bournemouth University who have used this to develop the National framework.

The Workforce Sub Group continues to monitor the delivery of training and in particular this year a real need was identified to ensure the workforce receives updated training in line with the Care Act 2014. In response to this a number of enhanced courses have been arranged and are accessible to the workforce.

All training now reflects the principles of Making Safeguarding Personal and the requirement to focus on outcomes for adults at risk. This will ensure Making Safeguarding Personal is embedded within the workforce.

The Sub Group is also committed to the South Yorkshire Working Together Programme for Continued Professional Development conferences and training courses on specialised subjects.

Chris Prewett
Chair of Workforce Sub Group
Head of Nursing & Safeguarding, RDASH



Safeguarding Adults Review Panel

In 2013, the Safeguarding Adults Review Panel (SARP) was set up by the Board to take responsibilities for the following tasks:

- To consider whether a case meets the criteria outlined in the 'DSAB Safeguarding Adult Review Policy and Toolkit'.
- Where a case is assessed as meeting the Safeguarding Adult Review (SAR) criteria, the SARP will be responsible for the appointment of an independent author.
- Where the case does not meet the SAR criteria and there are lessons to be learned, the SARP should consider whether any single agency review is required.
- To oversee the quality of all SAR's and monitors recommendations and action plans and hold agencies to account for these.
- To identify key themes for audit once actions have been completed.

Safeguarding Adult Reviews

During the period 2015/16, the Panel has met on 5 occasions, has functioned well and made good progress ensuring that high priority has been given to the key task of the monitoring the actions in relation to serious case reviews/ safeguarding adult reviews, some involving significant public interest and media attention.

Previously some difficulties have been experienced with quoracy of the SAR Panel, as the requirement is for the three statutory agencies of Police, Health and Adult Social Care always to be present. This has improved throughout 2015/16 and no meetings have had to be cancelled.

Lessons Learned

The SAR Panel have concluded 1 Lessons Learned Review throughout 2015/16 and the following lessons were learnt and have been shared with the relevant agencies;

- Agencies involved are required to adequately document and communicate effectively. There is evidence within this review that this did not always happen.
- The Mental Capacity Act was not actively used when decisions were being made in relation to the Adults health care needs. These included decisions made in relation to wider screening and health care interventions. Use of this framework would have contributed to robust decisions being made that were in adults Best Interest.

- There is evidence within the review that there was a challenge bringing the multidisciplinary team together to discuss and agree a plan in relation to Adults health care needs. Although in this instance there may not have been a direct impact upon the Adults health, there is the potential, in the future for other people to be adversely affected by any delay.

Monitoring actions from Safeguarding Adult Reviews

In addition 2 action plans from previous Serious Case Reviews were completed and presented to Board for final approval and sign off.

Moving forward the Board has restructured to ensure it is fit for the future and a decision has been taken to hold the SAR Panel on an 'as and when required' basis. The Quality and Performance sub group will pick up the responsibility for monitoring outstanding actions arising from SAR's and audit processes to ensure lessons are learned throughout the partnership.

Pete Horner
Chair, SAR Panel
Public Protection Unit Manager, SYP



Doncaster Keeping Safe Forum



The Doncaster Keeping Safe Forum continues to be an enthusiastic group of people who are committed to working alongside the Doncaster Safeguarding Adults Board to raise awareness of Keeping Safe in Doncaster. Over the year the forum has attracted new members and worked to promote the Keeping Safe campaign in local communities.

To promote Keeping Safe in Doncaster

- The forum have held regular events for forum members during the year, with 10 meetings taking place over 2015/16. An average of 20 members have attended each of the meetings.
- The forum have had a presence at a number of events and meetings to promote the Keeping Safe Campaign, these have included information provided to groups for example MG Dons, DON Mag and at events including the Cantley Carnival and the Dragon Boat Race.

To be inclusive

- The forum has welcomed 54 new members during 2015/2016 and information about Keeping Safe is now distributed to 88 members.
- Forum events and meetings have encouraged all to become involved and share information about Keeping Safe within their organisation and community.

To provide information

- The forum has provided information on Keeping Safe at events and meetings on a range of topics, including Hate Crime, Scam Awareness, Personal Safety, Healthy Eating and Fire Safety.
- The forum has provided information via the dedicated Twitter feed @DoncasterKSF the account has 561 followers and averages 47 new followers each month. We have tweeted information about Adult Safeguarding, Fire Safety, Scam Awareness, Domestic Violence & many other Keeping Safe initiatives.

To represent the views of all in Doncaster

- The forum have represented the views of members in relation to the DSAB communication strategy, the Making Safeguarding Personal campaign, the Keeping Safe campaign material and the DSAB website.
- In November 2015 several members of the forum contributed to the Peer Review of services in Doncaster
- In March 2016 the forum invited members of the DSAB to attend their meeting to discuss engagement and the way forward, 5 members of the DSAB attended and they worked alongside forum members to look at engagement around adult safeguarding in the borough. From this meeting a wish list of actions and activities was produced .
- The model of engagement was shared with Barnsley Safeguarding Adults Board in December 2015 and a meeting is also planned to discuss the model with the East Riding Safeguarding Board in June 2016

To be reliable

- The forum have continued to hold regular meetings at set times providing members with advance notice of the date, time and topic.
- Representation for the forum at the Engage and Share sub-group has continued throughout the year with regular updates provided to the group on the work and activities of the forum

To be the Eyes, ears, voice & action for Keeping Safe

- The forum supported the planning and delivery of the DSAB Annual Keeping Safe event in November 2015
- Forum members have received Safeguarding Training during the year to help in their understanding of Keeping Safe and how to raise concerns
- The forum have responded to a number of consultations in relation to strategies and plans produced by the DSAB including Making Safeguarding Personal and the Communication and Engagement Strategy
- Forum members have continued to cascade information about the Keeping Safe campaign to colleagues, friends, family and within their communities.

Reports from Safeguarding Adult Board Partners

Care Quality Commission

In our approach to regulating, inspecting and rating services our inspectors use their professional judgement, supported by objective measures and evidence, to assess services against our five key questions.

Our approach includes our use of Intelligent Monitoring to decide when, where and what to inspect, methods for listening better to people's experiences of care, and using the best information across the system.

We rate services to highlight where care is outstanding, good, requires improvement or inadequate and to help people compare them.

The five key questions we ask

To get to the heart of people's experiences of care, the focus of our inspections is on the quality and safety of services, based on the things that matter to people. We always ask the following five questions of services.

- Are they safe?
- Are they effective?
- Are they caring?
- Are they responsive to people's needs?
- Are they well-led?

For all health and social care services, we have defined these five key questions as follows:

Safe	By safe, we mean that people are protected from abuse and avoidable harm.
Effective	By effective, we mean that people's care, treatment and support achieves good outcomes, promotes a good quality of life and is evidence-based where possible.
Caring	By caring, we mean that staff involve and treat people with compassion, kindness, dignity and respect.
Responsive	By responsive, we mean that services are organised so that they meet people's needs.
Well-led	By well-led we mean that the leadership, management and governance of the organisation assures the delivery of high-quality person-centred care, supports learning and innovation, and promotes an open and fair culture.

Our approach was launched on 1 October 2014. This approach was developed over time and through testing and consultation with the public, people who use services, providers and organisations with an interest in our work. We will continue to learn and adapt how the approach is put into practice. However, the overall framework, including our five key questions, key lines of enquiry, characteristics of ratings and ratings principles will remain the same until we have rated every adult social care service at least once.

Number of active registered locations in Doncaster

Sector	Total Locations
Adult social care	136
Hospital	18
Primary medical services	108
Total	262

Latest published ratings on those registered locations in Doncaster

Sector	Outstanding	Good	Requires Improvement	Inadequate	Total Locations
Adult social care		71	15	3	89
Hospital		2	3		5
Primary medical services	1	20	3		24
Total	1	93	21	3	118

Latest published ratings on registered locations in Doncaster, Yorkshire & Humber and National

Sector	Outstanding	Good	Requires Improvement	Inadequate
Adult social care Doncaster		79.8%	16.9%	3.4%
Hospitals Doncaster		40.0%	60.0%	
Primary medical services Doncaster	4.2%	83.3%	12.5%	
Adult social care Yorkshire & Humber	0.9%	66.4%	27.7%	5.1%
Hospitals Yorkshire & Humber		32.5%	62.5%	5.0%
Primary medical services Yorkshire & Humber	3.0%	90.0%	5.9%	1.1%
All sectors National	1.4%	70.5%	25.1%	3.0%

CQC Regulatory action in Doncaster

Sector	Compliance action	Improvement action	Report to another agency	Requirement notice	Warning notice
Adult social care	43	18	1	11	8
Hospital	4	3			2
Primary medical services	8	1		5	1
Total	55	22	1	16	11

CQC role in safeguarding

As a regulator the main responsibility of the Care Quality Commission (CQC) is to ensure that all health and adult social care providers have clear and robust systems in place to keep people who use their services safe, that there is clear governance and oversight of those systems and that they employ staff who are suitably skilled and supported.

The role and overarching objective of the CQC in safeguarding is to protect peoples' health, wellbeing and human rights; enabling them to live free from harm, abuse and neglect.

As a regulator we are keen to work with local safeguarding teams and to establish effective working relationships and we see this as part of our function. These relationships help keep people safe.

We commit to CQC representation at a SAB meeting at least once per year in each local authority area.

As a partner, as opposed to a member of the SAB, and a national regulator, the focus of our local inspection teams is on inspecting regulated services against our five key questions of safe, effective, caring, responsive and well-led. In doing this we work in partnership with local authorities and local CCGs to highlight areas of concern within regulated services. We will take regulatory action as appropriate.

We have implemented a specialist approach to the inspection of health and social care services informed by intelligent monitoring. This informs when and how we inspect health and social care services.

CQC has, and continues to, raise awareness amongst the general public about our role. We receive a significant number of contacts from members of the public, community organisations, local authorities and providers raising safeguarding issues. We use data to inform our intelligence and this results in appropriate and timely action in relation to safeguarding. The CQC statement on our role in safeguarding is available on our website here <http://www.cqc.org.uk/content/safeguarding-people>

NHS England

NHS England ensures the health commissioning system as a whole is working effectively to safeguard adults at risk of abuse or neglect, and children. NHS England is the policy lead for NHS safeguarding, working across health and social care, including leading and defining improvement in safeguarding practice and outcomes. Key roles are outlined in the Safeguarding Vulnerable People Accountability and Assurance Framework 2015.

Governance

This role is discharged through the Chief Nursing Officer (CNO) who has a national safeguarding leadership role. The CNO is the Lead Board Director for Safeguarding and has a number of forums through which to gain assurance and oversight, particularly through the NHS England National Safeguarding Steering Group (NSSG). The National Safeguarding Adults and Children Sub Groups and its Task and Finish Groups report into NSSG.

Yorkshire and the Humber has an established Safeguarding Network that promotes an expert, collaborative safeguarding system, which strengthens accountability and assurance within the NHS commissioning and adds value to existing NHS safeguarding work across Yorkshire and the Humber. Representatives from this network attend each of the national Sub Groups/Task and Finish Groups, which include topics around FGM, MCA, CSE, Prevent, Safeguarding Adults and Children. NHS England Yorkshire and the Humber aims to focus on working in collaboration with colleagues across the north region on the safeguarding agenda and the work on FGM and the CCG peer review process and regional conference is evidence of this.

Financial contribution

A financial contribution to local Safeguarding Adults Boards is made via the local Clinical Commissioning Groups.

Safeguarding Adults Training

In February 2016 NHS England published Safeguarding Adults: Roles and competencies for healthcare staff - Intercollegiate Document on behalf of the following contributing organisations - The Royal College of Nursing, The Royal College of Midwifery, The Royal College of General Practitioners, National Ambulance Safeguarding Group and The Allied Health Professionals Federation. The purpose of this document is to give detail to the competences and roles within adult safeguarding. The guidance is to be used for the training of healthcare based staff in the safeguarding of adults who may be at risk of harm, abuse or neglect. <https://www.england.nhs.uk/?s=intercollegiate+document>

Designated safeguarding professionals are jointly accountable to CCGs and NHS England and oversee the provision of level 3 training for primary care medical services. The main source of training for other primary care independent contractors is via e-learning training packages.

Preventative safeguarding adults work

NHS England Yorkshire and the Humber Safeguarding Network hosted a safeguarding conference on Challenges for Modern Day Safeguarding Practice on 11 March 2016. This conference was aimed at providing level 4 training for healthcare safeguarding adults and children professionals and leads in the North region. The aim was to increase understanding of challenges and issues of modern day safeguarding practice in relation to suicide and self-harm; trafficking and modern day slavery; trafficking victim/survivor support; Court of protection, community deprivation of liberty and CCGs responsibilities; Mental Capacity Act and Safeguarding Children; Think family primary care implementation and Self neglect and the Care Act.

On 1 February 2016 NHS England North region held a React to Red Conference to share innovation on safeguarding practice and the prevention and management of pressure ulcers across health and social care settings.

NHS England Yorkshire and Humber and Yorkshire and Humber Safeguarding Network have produced an FGM guide for health care professionals, which can be accessed in the link below:-
<https://www.england.nhs.uk/north/our-work/safeguarding/>

NHS England has also developed a Safeguarding Adults pocket book and Prevent pocket book for health care professionals.

Safeguarding Adults Performance

All safeguarding serious incidents and domestic homicide's requiring a review are reported onto the national serious incident management system – Strategic Executive Information System (STEIS). There is a process in place to jointly sign off GP IMRs relating to these safeguarding serious incidents as CCGs responsibilities for commissioning of primary care services is increasing.

NHS England works in collaboration with CCG designated professionals to ensure recommendations and actions from any of these reviews are implemented. Prior to publication of any child serious case reviews, serious adult reviews or domestic homicide reviews NHS England communication team liaise with the relevant local authority communications team regarding the findings and recommendations for primary care medical services.

Future intentions / direction for safeguarding

Over the last 12 months a focus on improving the lives of people with a with learning disabilities and/or autism (Transforming Care) has been led jointly by NHS England, the Association of Adult Social Services, the Care Quality Commission, Local Government Association, Health Education England and the Department of Health. The focus for the coming year will be on improving care and services for patients with mental health problems.

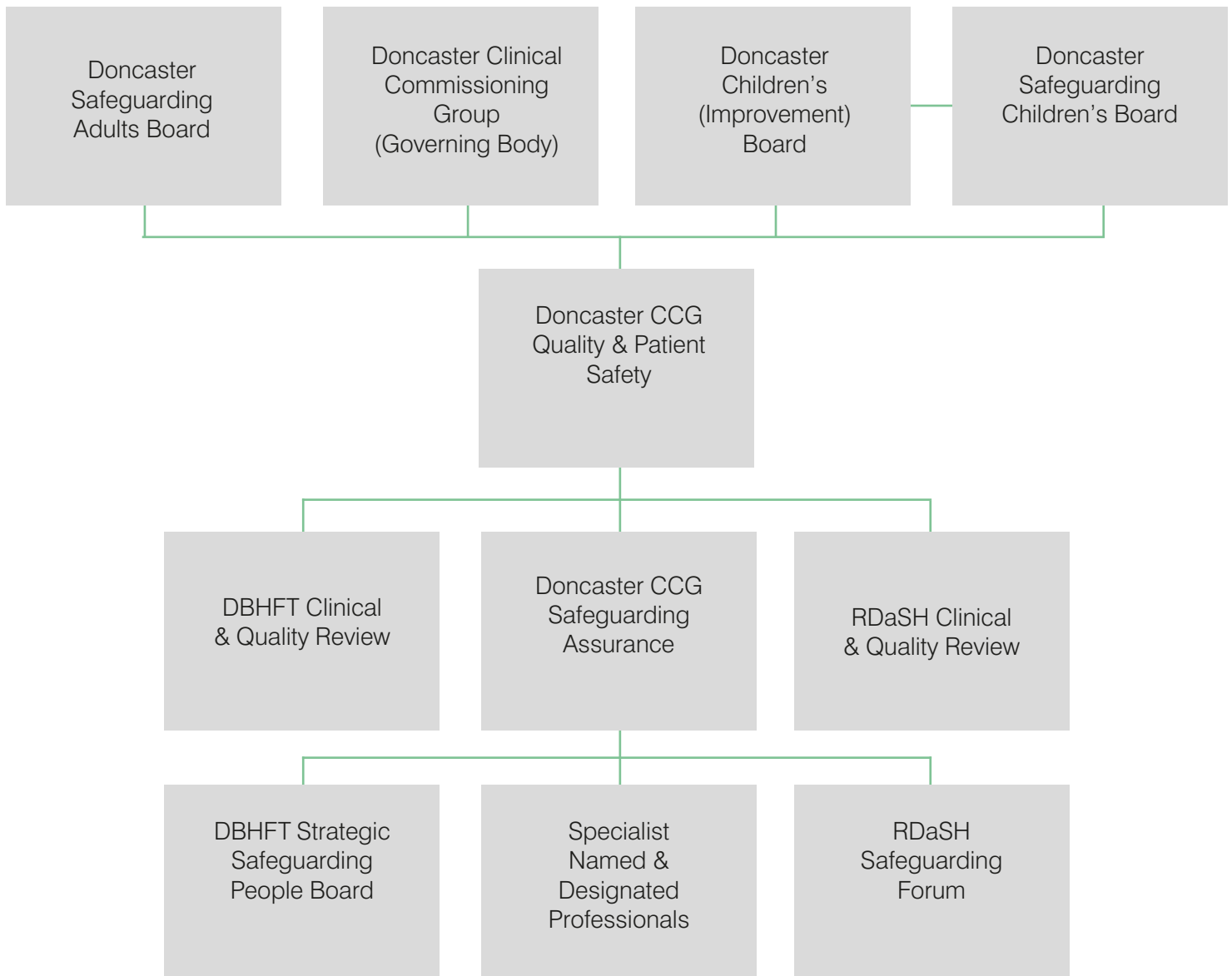
Doncaster Clinical Commissioning Group

As commissioners of high quality, safe healthcare, Doncaster Clinical Commissioning Group (DCCG) has responsibility for ensuring that the health contribution to safeguarding is discharged effectively across the whole local health economy through its commissioning arrangements and partnership working.

All healthcare providers commissioned by Doncaster CCG are accountable for the quality of the service they provide. The Doncaster CCG Safeguarding Assurance Group has the responsibility for Safeguarding within Doncaster and covers the commissioning responsibilities of the Doncaster CCG.

Governance

Doncaster CCG continues to monitoring quality via the safeguarding standards and safeguarding annual declarations which are included within existing and new contracts. During 2015/16 Doncaster CCG has received quarterly safeguarding reports from both main provider organisations which have been discussed and reviewed by the Doncaster CCG Safeguarding Assurance Group.



Doncaster CCG is required to have a Lead Professionals for Safeguarding Adults and a Lead Professional for Mental Capacity. These roles are fulfilled by a single post holder. The Designated Nurse provides professional advice on safeguarding adults matters to the Doncaster CCG, health professionals, Local Authority and Doncaster Safeguarding Adults Board. Doncaster CCG continues to commission Strategic Leads and Lead Professionals in the main health providers to ensure:

- Accountability for safeguarding adults within their organisation.
- Provide representation at the Doncaster Safeguarding Adults Board at a strategic level.
- Robust and effective governance systems exist within their organisation.

Safeguarding Adult Board Contribution

Doncaster CCG contributes both financial and with resource to the Doncaster Safeguarding Adults Board. The CCG is represented at the Board and Sub Group meetings by the Chief Nurse, Deputy Chief Nurse and/or Designated Nurse for Safeguarding Adults. Doncaster CCG supports all appropriate Safeguarding Adults work streams accordingly.

Safeguarding Adults Training

Safeguarding Adults Training sits in the mandatory training requirements for the Clinical Commissioning Group and is required on an annual basis or induction by all Clinical Commissioning Group staff. As of March 2016 there were 88% of Clinical Commissioning Group staff trained on level one safeguarding adults.

Low Level Concerns

The low level concerns that are raised within Doncaster CCG relate the patients within a Care Home setting or patients receiving Domiciliary Care. These concerns are managed via the Weekly Risk Meeting which is attended by the Local Authority and Doncaster CCG. Clear escalation processes are in place to support the more complex issues.

Future Intentions

In light of the organisational changes within Doncaster CCG and the Safeguarding Team, ongoing review of capacity and demand will take place during 2016/17.



South Yorkshire Police

In September 2015, the Safeguarding Adults Teams (SAT) were established at Doncaster and co-located with partners in Local Authority premises. Previously the team were incorporated within different departments across the organisation, and the restructure has provided specific police resources, delivering services at a local level. The team comprises of two detective sergeants, detective constables, and civilian investigators.

Governance

The roles and responsibilities of the team include the safeguarding and investigation of high-risk domestic abuse cases, including honour based abuse/force marriage, the investigation of adult rape and serious sexual offences, and the investigation of instances involving serious harm committed against vulnerable member of the community. The team work closely with partners from across the Borough, as well as local police officers and staff.

All reports of Adults at Risk are recorded by police officers, whether or not an investigation is required. In all cases where an Adult at Risk has suffered harm or is likely to suffer harm or is at risk of abuse, officer complete the relevant referral, and forwarded it to the Local Protecting Vulnerable People Unit, and relevant local Social Care agency. A specialist resource from the SAT is allocated to deal with the more serious and complex cases, and local officers continue to investigate low level concerns and crime.

South Yorkshire Police have policies and procedures that provide guidance to all staff, in relation to dealing with Adults at Risk and the investigation of potential offences. They have also worked closely with partners to revise procedures and instructions to support the Care Act 2014.

Safeguarding Adults Training

All frontline police officers and staff receive training in relation to Adults at Risk and safeguarding. There is also specific training in relation to domestic abuse. South Yorkshire Police specialist officers (SAT), also attend multi-agency training.



Doncaster and Bassetlaw Hospitals NHS Foundation Trust

The Director of Nursing, Midwifery and Quality is the Trust Executive Lead for Safeguarding supported by the Deputy Director of Nursing Midwifery and Quality and the Named Nurse. There is a Professional Lead for Safeguarding Adults and a Specialist Nurse for Safeguarding Adults. The Executive Lead chairs the Trust SSPB which oversees the safeguarding arrangements. Membership includes Safeguarding professionals and among others Heads of Nursing, Heads of Therapies, Medical staff and Matrons. Assurance is provided to the group by members representing their areas and care groups.

Governance

The SSPB oversees the safeguarding arrangements in the trust. Its purpose is to:-

- Provide leadership and strategic direction for maintaining, developing and implementing safe and reliable safeguarding systems and processes within the Trust.
- Provide the Trust Executive Group and the Board of Directors with assurance of the Trusts compliance with statutory regulations, obligations and standards in relation to safeguarding.
- To receive feedback and assurance from the Clinical Care Groups

Assurance

As well as the safeguarding board assurances are also provided to the CQC, CCGs, the Trust's Board of Directors through the Clinical Governance and Quality Committee and to Monitor (regulators of Foundation Trusts) compliance framework.

Safeguarding Adults activity

The safeguarding team deal with a range of enquiries and calls for advice and support, ranging from a brief query to responding to complex issues, complaints and incidents. A total of 647 telephone contacts were made to the safeguarding team in 2015/2016.

Two audits have been undertaken in 2015/2016 by the Lead Professional and Specialist Nurse for Safeguarding Adults in relation to staff awareness of the MCA 2005 and compliance with DoLS. The findings suggested an increased awareness of the MCA evidenced by an increase in the number of applications for DoLS from 7 requests for authorisation in 2013/2014; to 64 in 2015/2016.

Safeguarding Adults Training

A key priority for the corporate safeguarding team in 2015/16 was delivery of the trust training programme and demonstration of improvements in practice. The training has been quality assured by local safeguarding boards and in total 2323 staff have attended the new training programme in 2015/16.

With specific regard to MCA/DoLS, additional training has taken place with 70 staff, primarily Medical staff attending a lecture delivered by a solicitor and a further 44 clinical staff attending workshops also delivered by the solicitor.

Future intentions

Key priorities in 2015/16 included "getting the 'safeguarding' message across to all staff" and "Visibility and accessibility of the safeguarding team". A range of activities have taken place to meet these objectives, including publication of a Trustwide newsletter, Emergency Department drop in sessions for staff, targeted work as part of the preceptorship programme and attendance at the trust's annual members meeting to raise awareness of safeguarding.

Rotherham Doncaster and South Humber NHS Foundation Trust

To support the delivery of adult safeguarding, within RDaSH and across the wider partnership arena, there is a clear governance and accountability framework in place, specific to each of the localities that it covers. The framework provides assurance to the DSAB's and commissioner's that whilst the ultimate responsibility and accountability for adult safeguarding lies firmly with the Trust Board, every member of staff is accountable and is responsible for safeguarding and protecting adults at risk

As a multi-agency partner working with the DSAB, the RDaSH safeguarding adult team has been able to act as a link between strategic and operational objectives and share the learning and development across all areas of the Trust.

A comprehensive workforce development programme is in place and staff are able to access both single and multi-agency training that allows them to meet their safeguarding competency framework. A model of clinical supervision is in place and embedded across the Trust to ensure safeguarding cases are managed in line with the Care Act 2014 and making Safeguarding personal.

Responsibility for Safeguarding

Overall responsibility for safeguarding adults at risk within the organisation rests with the Board Executive Lead Dr Deborah Wildgoose and the Board Non Executive Lead Pete Vjestica.



Safeguarding Adult Board Contribution

A financial contribution comes from Doncaster CCG on behalf of the Health Community. RDASH contribute through Board and Sub group membership and provide support to multi-agency training programme.

Governance arrangements

The following governance arrangements are embedded within the organisation;

- South Yorkshire Multi-agency Safeguarding Adults Procedures
- RDaSH Safeguarding Adults Policy
- DSAB Safeguarding Adults Process for Health Staff
- DSAB Policy for Co-ordination of Overarching Safeguarding Investigations
- DSAB Guidance on the Co-ordination of S42 Enquiries (with other Investigations)
- Mental Capacity Act Policy
- Making Safeguarding Personal
- Risk assessments
- Local Authority Designated Officer (LADO) process in place
- Reports to Safeguarding and Quality Group and Trust Board
- Results of any inspections or audits undertaken within the year ie. Trust clinical records audit, Quality Reviews.

Oversight of safeguarding cases

Safeguarding Adult Leads review and quality assure cases and escalate to the Head of Safeguarding for complex and sensitive cases.

Safeguarding Adults Training

Safeguarding adults training is embedded within the organisation through the Trust Safeguarding Adult Policy through;

- Multi agency training
- Single agency training
- Clinical supervision

In addition through raising awareness and understanding of safeguarding adults, proactive risk assessments and planning for individuals and services and reporting and review of incidents (IR1's).

Safeguarding Adults Low level concerns

Low level concerns are managed through the organisations Incident Management Policy. These concerns are reviewed by the safeguarding adult leads and those identified as potential safeguarding adults concerns are reported as appropriate. Senior managers review all safeguarding adults concerns.

Future intentions

The organisation will continue to embed the changes with regard to Care Act 2014 and the principles of Making Safeguarding Personal. Provide continued support with the development of the Safeguarding Adults Hub through the secondment of a 0.5 whole time equivalent practitioner.

Moving forward it will develop a Safeguarding Strategy and support the organisational Transformation agenda to ensure safeguarding remains a high priority.

St Leger Homes

Safeguarding is a key priority for St Leger Homes as it places the needs of its customers and their families at the heart of its work. St Leger Homes has a Duty of Care (Care Act 2014) to keep all of our customers safe from harm. There are a number of routes through which concerns raised in relation to our customers will be appropriately handled, including via health and safety procedures, tenancy management and the provision of support to adults at risk.

Our safeguarding policy and procedure fits within this overall Duty. They relate specifically to abuse and/or neglect – adults who are at risk of or are being abused or neglected by others.

Across the organisation, we all play a part in preventing, being alerted to and responding appropriately to abuse and/or neglect.

Specifically we:-

- raise awareness about the abuse and or neglect of adults at risk
- continue to develop a culture that does not tolerate such abuse and which encourages people to raise concerns
- prevent abuse from happening wherever possible
- respond promptly and proportionately where abuse does happen, to stop the abuse from continuing and to ensure the person harmed receives effective support

Governance

Susan Jordan, Chief Executive of St Leger Homes has overall responsibility for adults at risk and provides strong leadership and a clear vision to St Leger Homes. Susan is a member of the DSAB, and chairs the engagement subgroup which delivers the DSAB Communication Plan.

In addition, there is a Designated Safeguarding Lead Officer whose role is to ensure we fulfil our responsibilities and promote positive practice within our organisation. The designated safeguarding lead officer is a member of a number of sub groups and task groups of the DSAB and is also delegated to Serious Case Review Panels and Domestic Homicide Review Panels as and when required.

We have a Safeguarding Children and Adults Policy and Procedure for all staff. We completed the Safeguarding Children and Adults Board audit assessment in June 2015. We also complete an internal Business Assurance Review of the way we deliver safeguarding services. All challenges are received positively, noted, and action taken. In addition, St Leger Homes has been listed as a best practice case study by the Social Care Institute for Excellence, SCIE.

Safeguarding Adults Training

Safeguarding adults training is firmly embedded within our organisation. We deliver a rolling programme of mandatory safeguarding awareness training to every member of staff. In addition safeguarding awareness training is also part of new staff inductions. Dependent on role, our staff also complete training on a range of topics including Domestic Abuse, Neglect, Prevent, and Mental Health.

During 2015/16, various levels of safeguarding training were completed by 234 staff members. Procedures and safeguarding services are available to staff and customers who either make enquiries or wish to report a safeguarding concern. Integral to this process, we have a 'single point of contact' available by telephone to continue best practice and safeguarding awareness throughout the organisation. This is used by employees and representatives of St Leger Homes to report any concerns they may have regarding an adult or child.

The designated safeguarding lead closely monitors the organisations day-to-day performance to ensure all cases are responded to within the required timeframe and the case is being dealt with correctly.

Safeguarding Adults Activity

During 2015/16, St Leger Homes received 308 safeguarding concerns which, following case management resulted in 495 referrals for varying support services. All safeguarding concerns received are treated as a high priority and visits are made to the individuals address within 24 hours. All concerns are case-managed by an Estates Officer and monitored centrally by the designated safeguarding lead. This approach has proved successful. Through engagement with the individual concerned, support services can be best identified, offered and arranged to meet their personal needs at an early stage.

Future Intentions for Safeguarding Adults

St Leger Homes will continue to learn, develop and fulfil its safeguarding responsibilities to the highest standards by:-

- Continuing to build on our collaborative approach to safeguarding children and adults, and continue to be a key partner in delivering the vision for Doncaster.
- Remaining visible and influential in the delivery of Doncaster's approach to safeguarding through effective engagement with other multi-agency partnerships, partner agencies, frontline practitioners and adults at risk.
- Continue to deliver our rolling programme of safeguarding training and refresh training, both for our own staff and partners through the workforce subgroup and training pool of DSAB.

South Yorkshire Fire and Rescue Service

South Yorkshire Fire & Rescue (SYFR) is an emergency responder for operational fire fighting and rescue services, committed to reducing deaths and injuries and safeguarding property. In addition to the emergency response, SYFR provide services within the Prevention and Protection directorate to create a safer environment for people to work and live. This includes the Technical Fire Safety teams with responsibility for improving fire safety in business premises, public buildings and enforcing legislation and the Community Safety teams working to improve fire safety in the home and wider community.

Responsibilities and Designated Lead

A Safeguarding Officer was appointed into a newly created post for SYFR in May 2009. This role sits within the Community Safety function under the Prevention and Protection Directorate and is championed by both the Area Manager for the Directorate and also Group Managers with Community Safety Leads.

Contribution to Safeguarding Boards

The Safeguarding Officer as the designated lead for safeguarding adults and safeguarding children is the named representative for SYFR at Safeguarding Boards and also attends the Workforce Subgroups.

Governance Arrangements

The Safeguarding Officer is responsible for the development of Safeguarding policy and procedure which are reviewed annually subject to internal consultation and completion of an Equality Analysis

The Safeguarding Officer is responsible for Safeguarding policy development, management and coordination and monitoring of all internal safeguarding alerts and referrals. Group Managers deputise out of hours and in the absence of the Safeguarding Officer

Assurance

The Safeguarding Officer provides reports and is responsible for SCR, IMR, Action Plans and implementation into the SYFR policy & practice. SYFR has undertaken a number of self-assessment audits i.e. Section 11/Care Act Compliance audits and attended respective joint safeguarding children's and adults Challenge Meetings in the last 12 months.

Safeguarding Adults Training

The Safeguarding Officer is responsible for the development and delivery of Safeguarding training. From 2015 to 2016 159 staff has received Safeguarding training; this includes staff from Community Safety, Youth Engagement, Technical Fire Safety, Operational Response and also volunteers. The SYFR Safeguarding

Training programme includes: -

- Induction,
- Basic Awareness
- Updates & Refreshers
- Mental Capacity & Dementia Awareness
- Running Safe & Effective Activities and Events
- Case Conferences & Core Groups (Strengths Based Approach – Signs of Safety and Making Safeguarding Personal – Outcome focus

Preventative Work and Safeguarding Activity

Safeguarding Performance is reported internally in the quarterly SYFR Prevention and Protection Performance Reports which are scrutinised by the Fire Authority. From 2015 to 2016 144 Safeguarding concerns were raised internally an increase of nearly 100%. 45 of these cases were specific to Doncaster, the majority relate to self-neglect and are linked to fire risk but 3 were linked to Care Homes and 19 to suspected abuse.

Fire Safety

Between 2015 and 2016 South Yorkshire Fire and Rescue has seen an increase in the number of fire incidents leading to a fatality. 4 out of the 9 cases were in the Doncaster area and all are reviewed internally by the SYFR Fire Death and Review Panel.

Future direction

A proposal and terms of reference for an internal SYFR Safeguarding Executive Board and the Reference Sub-group have been drafted and approved and membership and meeting dates established.

National Probation Service – South Yorkshire

In terms of promoting and developing its role as a relevant partner in Adult Safeguarding, the National Probation Service (NPS) continues on a journey to embed the safeguarding of adults into everyday practice and to improve co-operation with all relevant partner agencies.

At a national level, the recently published National Probation Service Policy Statement and associated Practice Guidance (Jan 2016) makes clear the NPS commitment to safeguarding and promoting the welfare of adults at risk. It recognises the importance of people and organisations working together to prevent and stop both the risk and the experience of abuse and neglect, whilst at the same time making sure an individual's well-being is being promoted with due regard to their views, wishes, feelings and beliefs. It also identifies that Offenders in the community should experience the same level of care and support as the rest of the population and acknowledges the contribution NPS staff can make to the early identification of an offender who may have care and support needs, or of an offender who may benefit from preventative support to help prevent, reduce or delay needs for care and support. We are also aware of the NPS role with Victims under the Victims Charter and how they are often vulnerable adults.

Governance

In terms of the practical application of this policy statement, 2016 has seen the rolling out of mandatory training on adult safeguarding for all staff. The development of policy and guidance has been accompanied by the introduction of a new process mapping system (EQUIP) which provides front-line staff with easily accessible information on policies, processes and guidance around adult safeguarding. Each National Probation Service Division has a designated strategic lead for Adult Safeguarding. As part of the National Probation Service NE, the responsible strategic lead is Julie Allan, but our South Yorkshire Lead is Sarah Mainwaring.

It is explicitly recognised that Safeguarding is everyone's responsibility and that the need to promote individuals welfare and protect them from abuse, neglect and serious harm will apply at every point of an offenders journey. However, we recognise the importance of identifying at an early stage whether an offender

has care and support needs, is a carer of a person with care and support needs, poses a risk of harm to adults at risk, and/or if they themselves are an adult at risk. There is a specific expectation that staff at pre-sentence report stage are pro-active in identifying adult safeguarding concerns. There is also a specific expectation that any identified offenders are appropriately 'flagged.'

Future Intentions

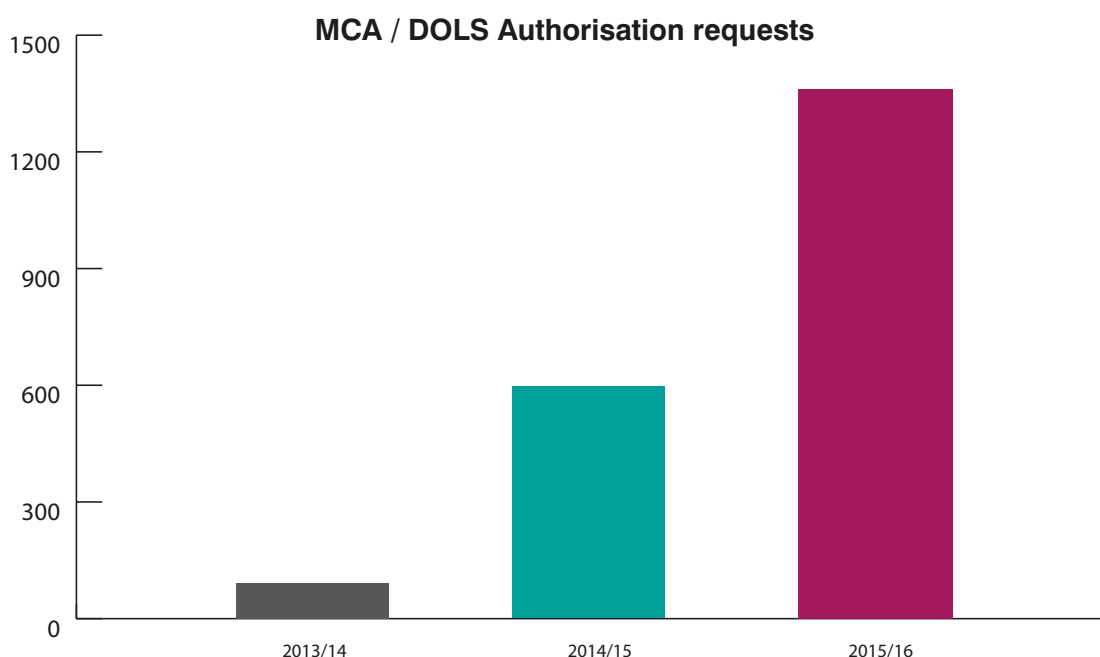
However, it is recognised that practice locally needs to be developed. From a strategic management perspective there is a need to ensure that we get better at identifying and 'flagging' relevant cases, to help promote learning and improve service delivery. This has been identified as a priority for the next year. From a frontline service perspective, there is a need to develop partnership working and to identify and promote those services which appear to be most effective, such as the provision of social workers within the South Yorkshire custodial estate. To help achieve this, Doncaster LDU have recently identified that Sally Beadle, Senior Probation Officer, will have a specific responsibility for Adult Safeguarding in Doncaster.

Mental Capacity Act – Deprivation of Liberty Safeguards

The Mental Capacity Act continues to be a focal point of the legislative framework that supports safeguarding adults work. The Mental Capacity Act 2005 and subsequent Deprivation of Liberty Safeguards 2007 became statutory from April 2009. Since this time the Council has developed and implemented robust systems and processes to ensure that people who lack capacity to consent to their care and treatment are safeguarded to ensure;

- A deprivation of liberty is a last resort
- Their care and treatment is in their best interest and least restrictive
- They have someone appointed to represent them
- The person is given the right of appeal
- The arrangements are reviewed and not continued for longer than necessary

On 19th March 2014 the interpretation of the law by the Supreme Court changed, which has had a dramatic impact on Councils nationally due to a significant increase in Deprivation of Liberty Safeguard authorisation requests with no additional resources nationally identified to meet the increased demand. Over the period of April 2015 to end of March 2016 there have been 1362 requested authorisations to deprive individuals of their liberty, this is a further 230% increase on 2015/16 figures.



In response DMBC have targeted resources to deal with the significant increase in DOLS requests. A programme of recruitment has been undertaken throughout 2015/16 to be able to meet future demands on the organisation as a supervisory body.

The Doncaster MCA / DoLS Team provides a single point of contact for organisations, professionals and the public in relation to Deprivation of Liberty issues. For further information visit <http://www.doncaster.gov.uk/services/adult-social-care/raising-concerns> or email dols@doncaster.gov.uk



CASE STUDY – Mr BA

Mr BA is an 84-year-old gentleman who has a history of hallucinations, confusion and aggression coupled with episodes of restlessness, aggression and paranoia. Mr BA was previously sectioned under Section 3 of the Mental Health Act 1983 however he was moved to an out of area care home in February 2015 following an incident whereby his wife was injured. Mr BA's current out of area placement was arranged by his daughter, who is also the donee of his Lasting Power of Attorney, under the Mental Capacity Act 2005 best interests procedures.

A referral was made to the Local Authority (DoLS supervisory body) by the care home (managing authority) for a DoLS authorisation as they believed that Mr BA might be deprived of his liberty.

The Mental Health Assessor appointed under the DoLS process reported that Mr BA no longer meets the grounds for detention under the Mental Health Act 1983. However, he reported that the care home may need additional support from the local mental health team in supporting Mr BA with his care and treatment needs. The Best Interest Assessor appointed under the DoLS process confirmed that Mr BA is being deprived of his liberty in his current placement as his circumstances meet the '**acid test**' with regard to the Supreme Court judgement, in that he is "**not free to leave**" and he is "**under continuous control and supervision**" due to his own care and treatment needs. It is reported that the care home staff use distraction techniques rather than intervention to manage Mr BA's behaviour and he is also prescribed anti-psychotic medication to manage his mood and aggression.

Mr BA's family confirm that he is settled in his current placement and his care and treatment needs are met effectively. His daughter lives locally and visits frequently. His wife states she is able to visit Mr BA frequently as she now has more time to travel, she is even considering locating to an area near Mr BA's placement so that she can visit him more often. Mr BA's son-in-law visits regularly and has had a great deal of input into care and support plans at Mr BA's current placement, he is also appointed as the Relative Person's Representative in order to prevent a conflict of interest from arising for his daughter as the donee of the Lasting Power of Attorney.

The Best Interest Assessor recommends that a DoL authorisation is granted for a period of 12 months as Mr BA is settled in his placement and there is strong evidence that his care and treatment needs were being met effectively. All parties consulted by the BIA were also in agreement that this placement was in Mr BA's **best interests** and the **least restrictive** in his circumstances.

The DoLS process provides Mr BA with independent oversight to ensure that deprivation of his liberty is a **proportionate response** to the likelihood that he will otherwise suffer harm and to the seriousness of that harm and that his current care and treatment arrangements including his residency are in his best interests and are the least restrictive given his circumstances.

Safeguarding Adults Activity 2015/16

The Care Act 2014 was introduced in April 2015 and has resulted in a number of changes to safeguarding adults terminology as listed below;

Previously under 'No Secrets Guidance'	Care Act 2014
Vulnerable adult	Adult at Risk
Alleged Perpetrator	Source of Harm
Safeguarding Alert	Safeguarding Adult Concern
Safeguarding Referral	Section 42 Enquiry
Serious Case Reviews	Safeguarding Adult Reviews

Who is an adult at risk?

The safeguarding duties apply to an adult (person aged 18 or over) who:

1. Has needs for care and support (whether or not the local authority is meeting any of those needs) and;
2. Is experiencing, or at risk of, abuse or neglect and;
3. As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

The above is termed the three stage test under the Care Act 2014.

What is abuse or mistreatment?

- Can be a violation of an individual's human or civil rights by another person or persons.
- May consist of a single act or repeated acts.
- Can occur in any relationship.
- May result in harm to, or serious exploitation of, the person subjected to it.
- May be physical, including hitting, slapping, punching, kicking, misuse of medication, restraint, or inappropriate sanctions.
- Could be sexual, including rape and sexual assault or sexual acts to which the person has not consented, or was pressured into consenting.
- May be psychological, including emotional abuse, threats, humiliation, intimidation, verbal abuse.
- May be financial or material, including theft, fraud, exploitation, the misuse or misappropriation of property, possessions or benefits.
- May be neglect, including neglect of medical or physical care needs, the withholding of adequate food, heat, clothing, medication or other forms of similar mistreatment.
- Can take the form of discrimination, including racist, sexist or disability.
- May be organisational abuse which can take the form of neglect, poor professional practice - by way of isolated incidents which are poor or unsatisfactory - through to ill treatment or gross misconduct, resulting in the needs of the organisation/agency overriding the needs of the person.

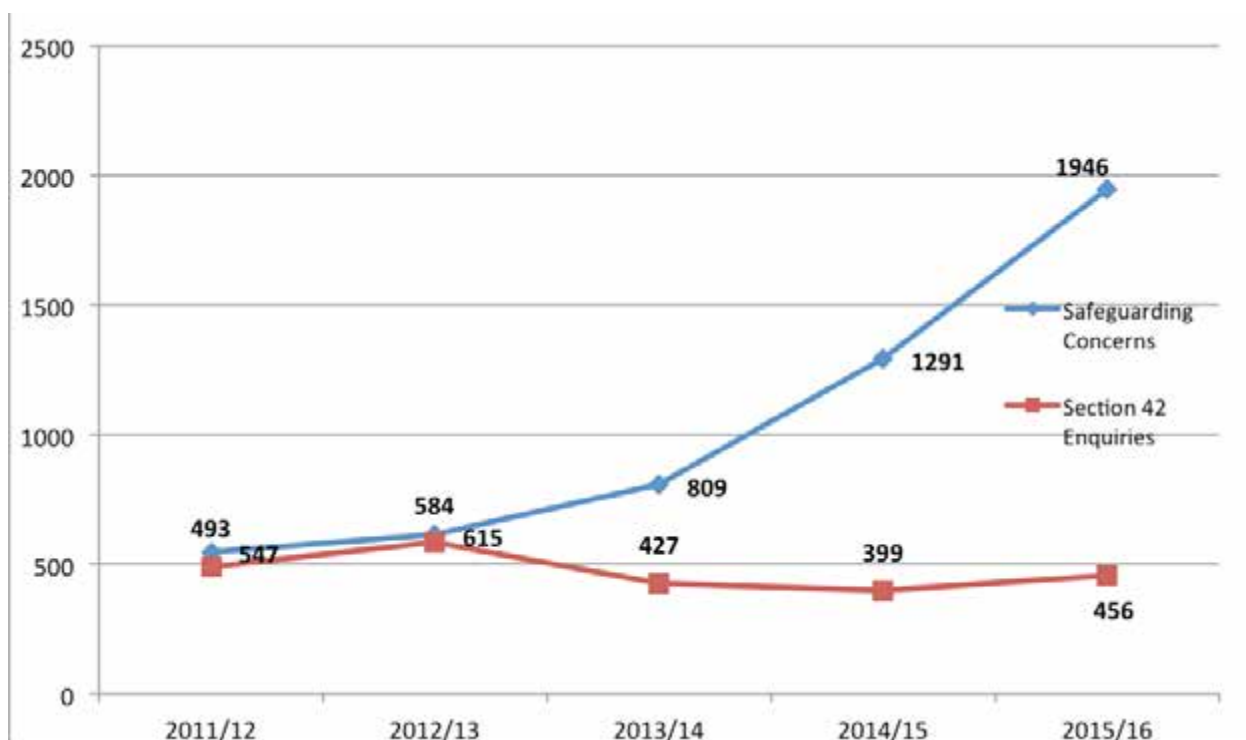
From April 2015 the SAC (Safeguarding Adults Collection) replaced the SAR (Safeguarding Adults Return). This is a mandatory requirement for all Local Authorities in England to complete and submit to the Health and Social Care Information Centre (HSCIC).

Number of Safeguarding Concerns and Section 42 Enquiries received 2015/16

2015/16	Concerns	S42 Enquiries	Total
Total	1946	456	2402

The number of concerns continues to increase year on year since 2009/10 and has risen from 1291 in 2014/15 to 1946 in (an increase of 51%). In contrast the number of referrals has risen from 399 last year to 456 (an increase of 14.5%) for the year ended 31 March 2016. The introduction of the Care Act 2014 has seen a broadened definition of abuse and people defined as adults at risk. In addition people are becoming more aware of abuse and how to report safeguarding concerns. The overall increase also suggests that we are improving awareness of safeguarding adults across Doncaster.

Number of Safeguarding Concerns and Section 42 Enquiries received 2011/12 – 2015/16



The data illustrated within the graph may include people who have been referred into the system more than once

Doncaster underwent a Safeguarding Adults Peer Review during November 2015. An outcome from the review criticised the Local Authority for funnelling too much through the Safeguarding Adults process which on closer analysis could be dealt with by other means and signposted appropriately.

In response to this recommendation a piece of work has been identified to develop guidance that will support managers from all agencies to make decisions when identifying abuse and the need to report. It is intended that the guidance will reduce the number of inappropriate safeguarding concerns being reported to the Local Authority which could be dealt with through internal risk or incident management procedures.

Number of Safeguarding Concerns and Section 42 Enquiries received by Source of Referral

Source of Referral	Number 2014/15	Number 2015/16
Voluntary	7	6
Police	74	67
Primary Health Care	87	122
Regulator	22	27
Relative / Family Carer	100	121
Community Health Care	50	55
Secondary Health Care	124	104
Social Care staff (statutory and independent)	1059	1585
Individual - Unknown / Stranger	31	15
Individual - Known but not related	28	47
Other private sector	41	159
Other public sector	64	94
Not recorded	3	0
Total number of concerns received	1690	2402

The above table considers all safeguarding concerns received by operation services including those that progress to a Section 42 enquiry, therefore the number is 2402.

The highest proportion of safeguarding concerns were received (66%) from social care support staff many from within the private sector i.e. statutory social care staff, care homes, domiciliary care agencies etc. This demonstrates a good level of education, awareness and robust reporting mechanisms across the social care sector.

12% of alerts referrals were reported in by health care staff across a range of primary care, community care and secondary health care services which indicates a 3% decrease. Relatives and families carers reported 5%, closely followed by Police with 3% which have remained relatively static. In addition housing services are included within other public / private sector category.

The above data indicates that a range of agencies are reporting safeguarding concerns in line with the South Yorkshire Procedures for Safeguarding Adults which indicates a healthy level of awareness across the partnership. However it is highlighted that the voluntary sector are low in relation to other areas. Moving forward this information will be used to inform the DSAB Communication and Engagement Plan to target certain groups within the Keeping Safe Awareness Campaign.

Number of Concluded Section 42 Enquiries by Ethnicity

Ethnicity	Number of individuals for whom a Section 42 Safeguarding Enquiry has been made
White	378
Mixed / Multiple	5
Asian / Asian British	6
Black / African / Caribbean / Black British	6
Other Ethnic Group	0
No Data	14
Total	409

For purposes required by the Safeguarding Adults Collection only 1 count is permitted per adult at risk therefore the number is 409.

The majority of individuals for whom referrals had been made in 2015/16 (92%) were categorised as 'White' (NB – not solely White British) as this reflects the proportion of the total population of Doncaster that are categorised as such in the latest census return (March 2011). This notes a slight increase (2%) in Black and Minority Ethnic groups accessing the safeguarding adults service.

The Board need to continue to improve engagement with black and minority ethnic groups. Work is on-going in the Engagement sub group through the implementation of the Communication and Engagement Strategy to raise awareness of safeguarding adults, including those hard to reach groups to promote the recognition and reporting of abuse or potential abuse. This Board will continue to promote safeguarding adults throughout 2016/17 through the Keeping Safe Awareness Campaign using mechanisms such as awareness raising events, the Safeguarding Adults DVD, posters, leaflets and the Keeping Safe Forum.

Number of Concluded Section 42 Enquiries by Gender

Ethnicity	Number of individuals for whom a Section 42 Safeguarding Enquiry has been made
Male	184
Female	220
Gender Unknown	4
Total	409

For purposes required by the Safeguarding Adults Collection only 1 count is permitted per adult at risk therefore the number is 409.

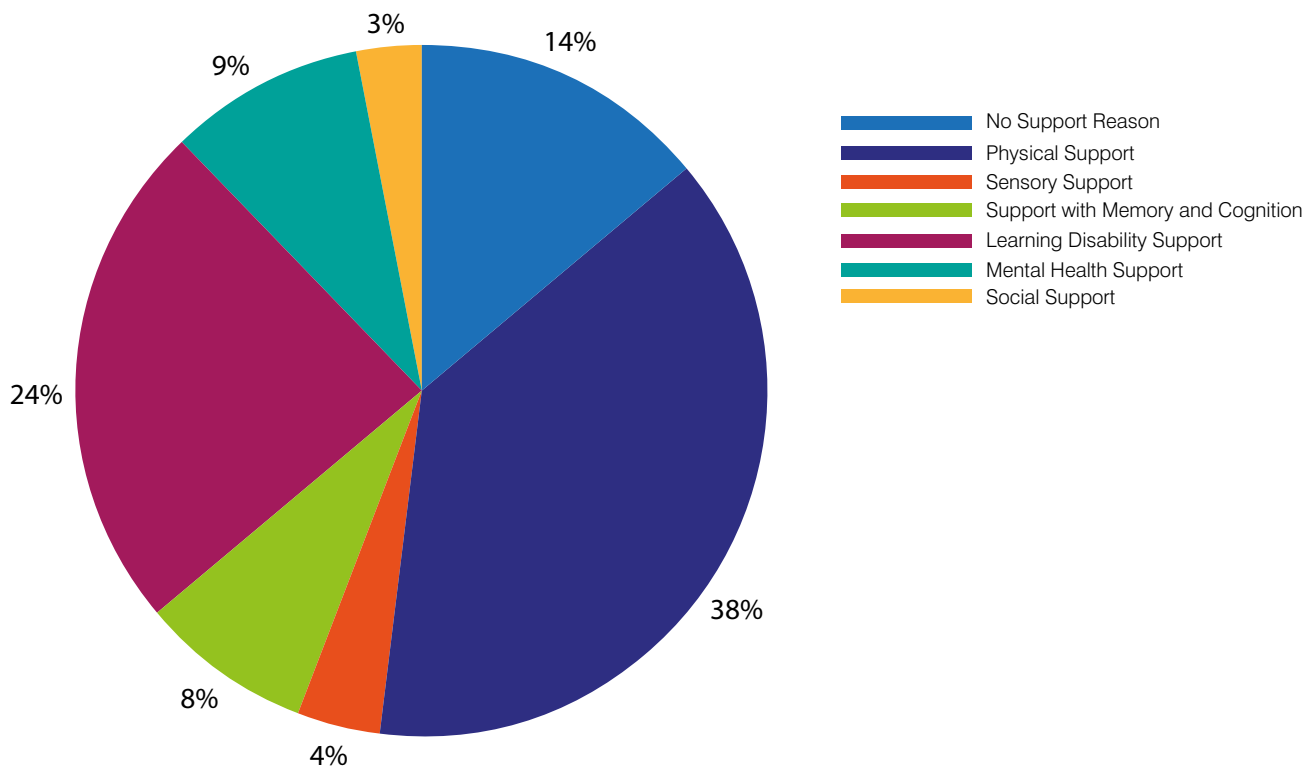
45% of all referrals made during 2015/16 were male, 54% female. This is a slight shift when compared with last year which indicated that 39% were male and 60% female.

Number of Section 42 Safeguarding Enquiries by Age Band

Age band	Number of individuals for whom a Section 42 Safeguarding Enquiry has been made
18-64	170
65-74	38
75-84	83
85-94	100
95+	17
Not known	1
Total	409

For purposes required by the Safeguarding Adults Collection only 1 count is permitted per adult at risk therefore the number is 409.

Percentage of Concluded Section 42 Enquiries by Primary Support Reason



The largest proportion of safeguarding adults Section 42 enquiries comes from people with physical support needs at 38%. This has risen by 10% from 28% as reported for 2014/15.

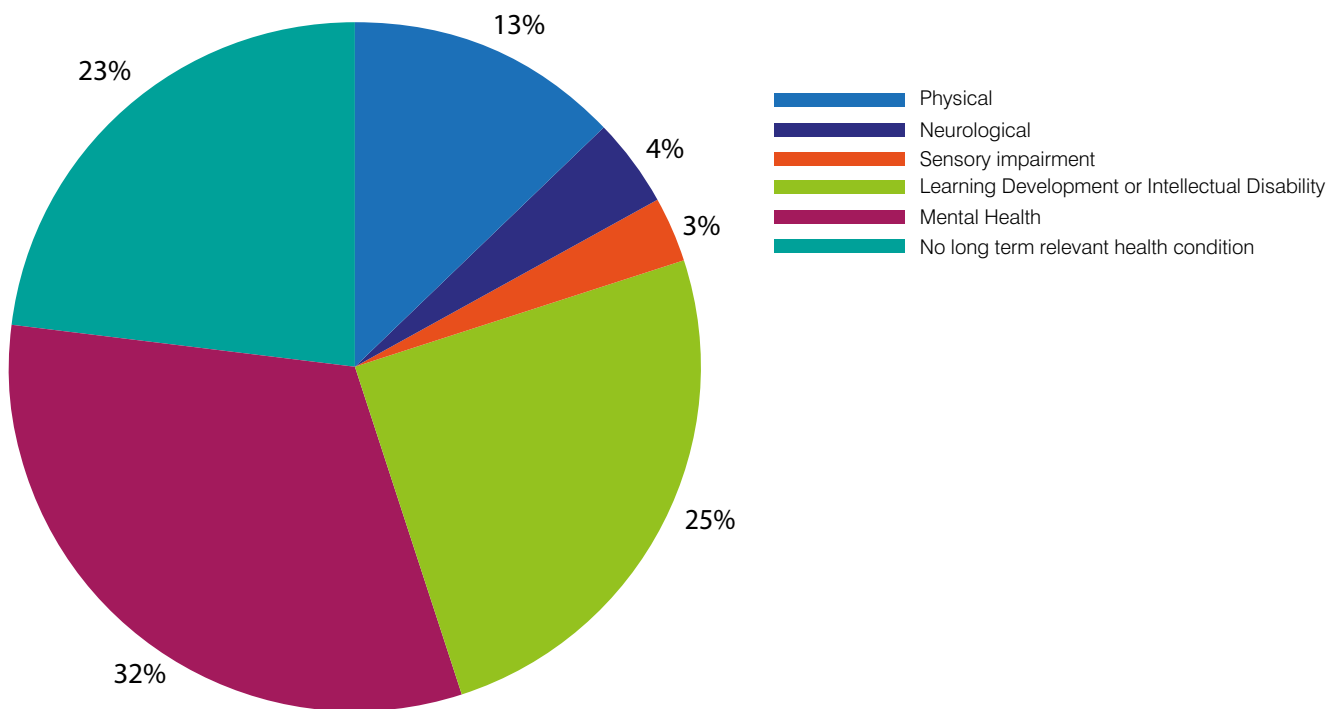
The second highest group is those with a learning disability support need at 24%, again this has risen slightly when comparing year on year from 19% for 2014/15. People with a learning disability are more vulnerable in situations where they may be befriending strangers or misinterpreting social situations, which exposes them to abuse or potential abuse.

The most significant shift is the number of people with social support reasons, this has reduced by 11%, reported as 14% during 2014/15 to 3% for 2015/16.

All other categories have remained static when comparing with last year's annual report data.



Percentage of Concluded Section 42 Enquiries by Long Term Health Conditions



The Safeguarding Adults Collection has introduced the requirement to report on 'Long Term Health Conditions' for 2015/16 this is a new data table therefore it is not possible to make comparisons. The largest proportion of safeguarding adults Section 42 enquiries relates to people with a mental health long term condition such as dementia.

The second highest group is those with a 'Learning Development or Intellectual Disability' reported as 25%.

In addition Doncaster has a number of large care providers which offer placements to people with learning disabilities. This has a significant impact on the number of concerns and Section 42 enquiries received by Doncaster. Work is on-going with these providers through Doncaster Clinical Commissioning Group and NHS England to strengthen assurance mechanisms where current contractual gaps exist in order to promote safeguarding adults and prevent abuse from occurring wherever possible.

A significant proportion 23% of Section 42 enquiries related to people who were reported as not having a long term relevant health condition, indicating that health is not always a factor of vulnerability or abuse.

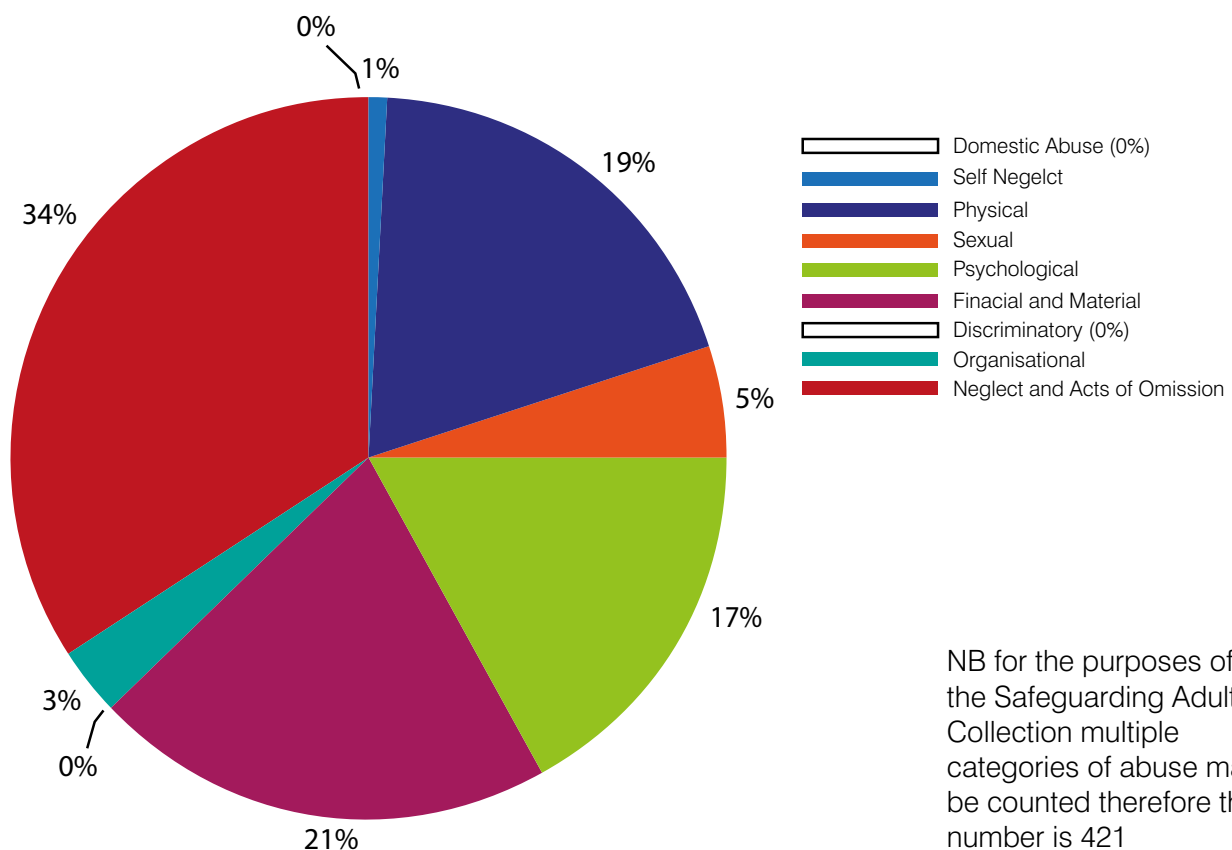
**Number of Concluded Section 42 Enquiries
by Abuse Type and Source of Risk**

Abuse category	Source of Risk		
	Social Care Support	Other – Known to individual	Other – Unknown to individual
Physical	28	49	4
Sexual	1	19	1
Psychological	21	43	6
Financial and Material	9	68	10
Discriminatory	0	1	0
Organisational	8	4	0
Neglect and Acts of Omission	77	61	3
Domestic Abuse	0	1	0
Sexual Exploitation	0	0	0
Modern Slavery	0	0	1
Self-Neglect	1	4	1
Total	145	250	26

NB: for the purposes of the Safeguarding Adults Collection multiple categories of abuse may be counted therefore the number is 421

The majority of 'neglect or acts of omission' was alleged to be caused by social care and support workers closely followed by someone other than a social care worker who was known to the adult at risk. Whereas the majority of 'financial and material abuse' was alleged to be caused by someone other than a social care worker who was known to the individual.

Percentage of Concluded Section 42 Enquiries by Abuse Type (n=421)



The largest category of abuse that is reported and is concluded through a Section 42 enquiry is 'neglect and acts of omission' reported as 34% for 2015/16 an increase of 4% from last year's figures. Doncaster is not an outlier for this category of abuse as the Health and Social Care Information Centre reports that this is a national trend across Local Authorities.

There are a number of reasons that could contribute to the continued increase in reporting of neglect and acts of omission;

- Raised general awareness of safeguarding adults across Doncaster
- The robust reporting and contract monitoring arrangements within the independent provider sector.
- Doncaster Safeguarding services are more aware of the type, nature and number of repeat incidents that constitute potential neglect and are recording this abuse type rather than viewing other abuse types in isolation.

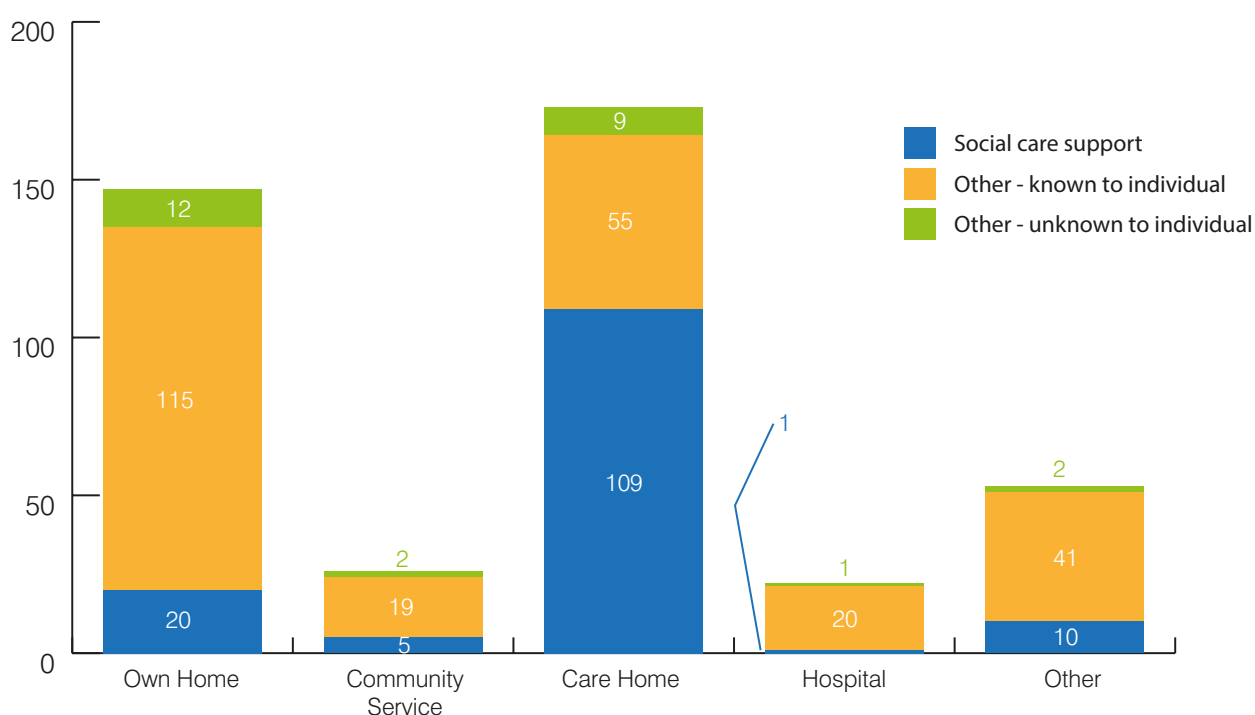
On analysis of incidents regarding 'neglect acts of omission' the most common location of abuse relates to the Care Home sector. Issues identified within these enquiries relate to staffing levels, dependency of service users not assessed adequately to meet complex needs, lack of training for agency staff and a high turnover of staff within the independent sector.

The second largest category of abuse is 'financial and material' reported as 21%, this is a significant shift on last year's figures which was reported as 14%. Followed by physical abuse which is slightly reduced when comparing with last year's figures and reported as 19% for 2015/16.

Both 'psychological/emotional' and 'sexual' abuse has remained at similar figures to last year with 17% and 5%. Doncaster is aligned to the national trend which was reported as 15% for 'psychological/emotional' and 5% for 'sexual'.

The Care Act 2014 has introduced four additional categories of abuse under the remit of safeguarding adults; Domestic abuse, sexual exploitation, modern slavery and self-neglect. These new categories have been embedded with Doncaster's safeguarding adults systems, policies, procedures, training and awareness raising campaigns to ensure staff and the public are aware of what abuse is and how to report it. Doncaster will continue to get the message out that abuse will not be tolerated.

Concluded Section 42 Enquiries by Location and Source of Risk (n=421)



41% of all cases of alleged abuse occurred in a 'Care Home' this is a 3% decrease when comparing this with last years' data. Safeguarding awareness in Care Homes is well established and therefore issues are reported routinely in line with robust governance and contractual requirements. There are a number of factors which may lead to safeguarding issues i.e. the care setting may not meet the service user's needs, there may be deterioration of the adults condition, or training needs of staff may not be meeting the needs of the service.

Intelligence continues to be analysed and shared at the multi-agency weekly risk meeting monitoring and escalating themes and trends across a range of commissioned services, to proactively improve quality, prevent abuse and respond appropriately and proportionately to safeguarding concerns within the independent care provider sector. Representation includes the Care Quality Commission, Contract Monitoring from Social care and Health Services, the Safeguarding Adults Board Support Unit and Operational Safeguarding Services. This model pools a plethora of intelligence on which to inform sound and equitable decision making, also to identify and support improvements to quality. Further work will continue to develop this model to assess its effectiveness in practice during 2016/17.

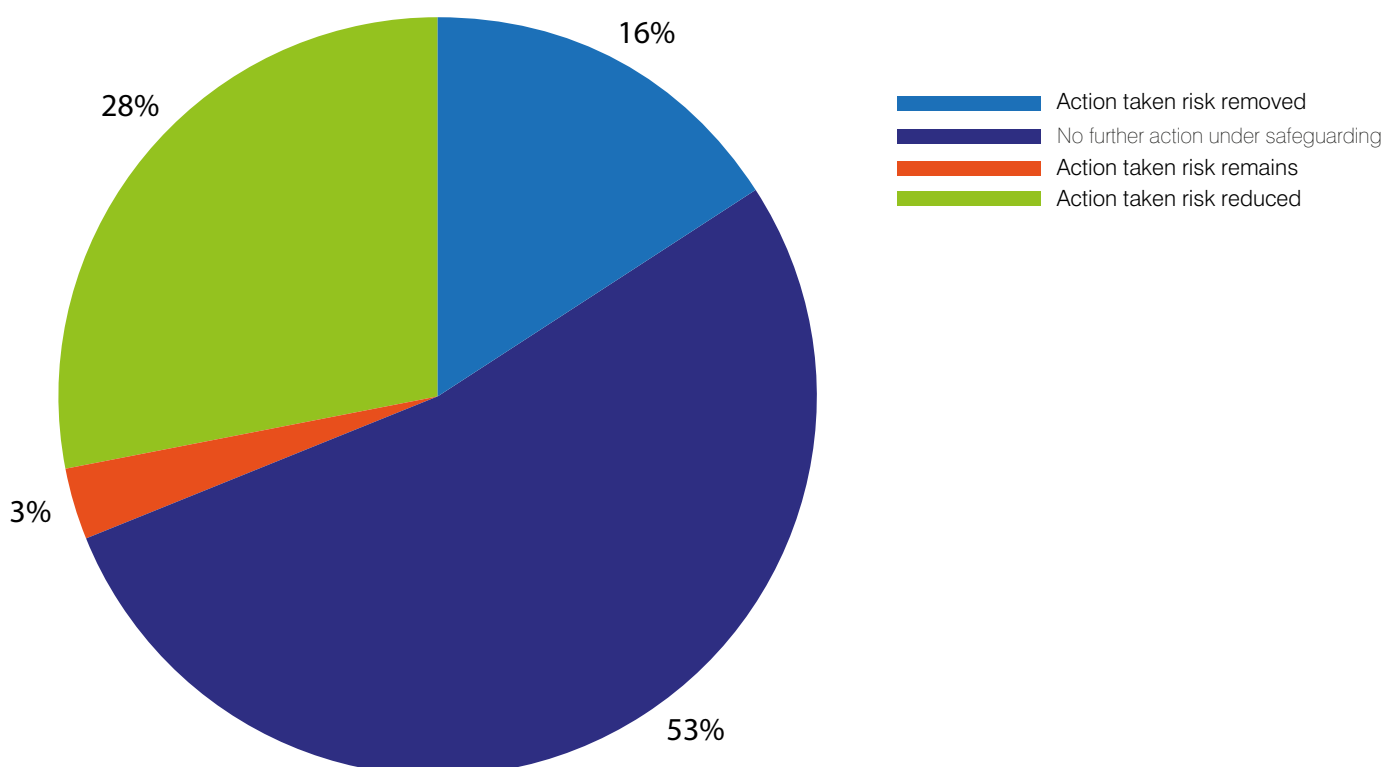
The second largest category is 34% for alleged abuse occurring in the individuals 'own home' which is an increase of 3.5% on last year.

The decrease in abuse occurring within a Care Home and increase in abuse with an adults own home marks a shift towards the national trend as Doncaster has been an outlier in this area previously. The Keeping Safe Campaign will continue to be rolled out throughout 2016-17 raise awareness deep within the community about abuse and how to report it.

Section 42 enquiries relating to abuse occurring within hospitals has seen a decrease from 10.3% last year to 5% in 2015/16. The low number of cases from this area is consistent with both regional and national trend resting at 6%, this appears to be linked to the use of more established mechanisms such as complaints, incident and serious incidents reporting.

The number of Section 42 enquiries relating to a Community Service has risen from 3.5% during 2014/15 to 6% during 2015/16 which is slightly above the national benchmark of 5%.

Concluded Section 42 Enquiries by Action, Result and Source of Risk (n=421)



While there has been an overall increase in the number of Section 42 enquiries the proportion of enquiries resulting in reduced risk has increased from 42% in 2014/15 to 44% in 2015/16.

In 3% of cases the risk was reported as remaining. Safeguarding supports people in how they choose to live their lives in line with the wishes, feelings and identified outcomes of the adult at risk. As a person may decide not to accept support or to live in circumstances that place them at risk, safeguarding may not always be able to reduce the risk. For example, a person may choose to live with a family member that has abused them. However, safeguarding will always look to provide people with options, that will help the person to be safe and in control of their own life.

In 53% of cases it was reported that no further action under safeguarding was taken. This could be due to a number of reasons as the adult at risk retains the right to cease the enquiry and exit the safeguarding process at any time unless there are doubts in relation to their capacity.

Mental Capacity

The percentage of adults at risk who were assessed as lacking mental capacity in relation to the Safeguarding process and for whom Section 42 Enquiries were concluded is 44% of during 2015/16. This is a significant proportion of enquiries undertaken on behalf of our most vulnerable.

Independent Mental Capacity Advocates (IMCA's) provide additional support and representation for people who lack mental capacity in relation to certain important or significant decisions. Where the person lacks capacity and there is no suitable person to represent the adult at risk's wishes and views in a safeguarding case an IMCA should be sought.

In many cases relatives or friends represent the person's wishes and views, however referrals to Independent Mental Capacity Advocates have risen from four cases last year to six cases during 2015/16.

Looking ahead 2016/17

The Care Act 2014 strengthens the need to identify person centred outcomes and the requirement for advocacy both where mental capacity is lacking and where significant support needs are required. The Board has worked hard to revise its framework during 2015/16 in line with the Care Act 2014 and national data reporting requirements and will be implementing this moving forward.

Multi-agency Safeguarding Adults Learning and Development

Multi-Agency training courses are widely accessed by the workforce with attendance high demonstrating a demand for need. All courses are now booked and monitored through DMBC Organisational Development and are reported to the Board on a quarterly basis.

Safeguarding Adults training delivered for 2015/16 introduced changes to the Safeguarding Adults process in line with the requirements of the Care Act 2014, therefore a number of extra courses were delivered to support the embedding of the Care Act within the Safeguarding process to ensure that the workforce received updated information. Below are figures per quarter for the previous year for all Safeguarding Adults, MCA and DOLS courses.

Safeguarding Adults	Number Attended	MCA/DOLS	Number Attended
Quarter 1 (Apr-Jun)	162	Quarter 1 (Apr-Jun)	N/A
Quarter 2 (Jul-Sep)	240	Quarter 2 (Jul-Sep)	49
Quarter 3 (Oct-Dec)	347	Quarter 3 (Oct-Dec)	95
Quarter 4 (Jan-Mar)	343	Quarter 4 (Jan – Mar)	108
Total	1092	Total	252

The opposite data shows that 2023 people accessed the multi-agency training during 2015/16. We are every year seeing a sustained commitment to multi-agency training.

Feedback received for training has been highly positive. Delegates have expressed that the training has helped to raise further awareness of Safeguarding Adults and raised confidence to report concerns.

- Safeguarding Adults Basic Awareness Course
 - Safeguarding Adults Raising Concerns Course
 - Safeguarding Adults within the Care Act
- > Delivered by CQM
-
- Safeguarding Adults Managers Course
 - Safeguarding Adults Managers Refresher Course
 - Safeguarding Adults Enquirers Course
 - Safeguarding Adults Enquirers Refresher Course
- > Delivered by Safeguarding Adults Learning and Development Manager
-
- Safeguarding Adults Making Safeguarding Personal
- > Delivered by Celia Harbottle (external trainer)

As well as the above courses the Learning and Development Manager also delivered safeguarding training to a number of different organisations:

- Practice Managers Training (Petergate Medical | Centre)
- Anchor House
- St Catherine's
- New Horizons
- Active Care Homes
- Stoneacre Lodge
- Deaf Community Trust
- Healthwatch

The above courses have been delivered due to a large number of staff needing training within an organisation or as a result of a request from DMBC Contracts Team having identified a gap in training with provider organisations.

Making Safeguarding Personal

There has been a real focus within all training courses to embed the principles of Making Safeguarding Personal. The Safeguarding Adults Basic Awareness and Raising Concerns courses have been updated to ensure that multi-agency staff are aware of Making Safeguarding Personal. In addition more specialist courses have focused on applying Making Safeguarding Personal in practice such as undertaking face to face meetings and seeking the outcomes of the adult at risk.

As part of the Making Safeguarding Personal Strategy, a survey was undertaken with Adult Social Care and Health Practitioners that would be involved in the Safeguarding process and would have the role of Safeguarding Manager or undertaking Section 42 Enquiries.

The results demonstrated that the majority of people felt confident to discuss outcomes with adults at risk, however a small number did feel less confident especially where family members disagree. The results of the survey have been used to inform further training for Making Safeguarding Personal.

Quality Assurance of the Training

The Learning and Development Manager has worked together with the DMBC Adult Workforce Team to review and implement a training quality assurance framework that can be used across all multi-agency training. The aim of the framework is to evaluate from pre-course training to post-course training with delegates as well as trainers. Together with the implementation of the Safeguarding Adults Competency Framework the Doncaster Safeguarding Adults Board will be able to monitor the quality of training as well as how effective learning outcomes are translated into practice.

Safeguarding Adults, MCA and DOLS E-Learning Courses

The E-learning courses continue to be accessed across a wide range of services. This year we have seen an increase in Children's services accessing adults courses. There has also been a significant increase from voluntary organisations.

Safeguarding Adults E-Learning	Number completed
DMBC	72
RDASH	2
St Leger Homes	1
Children's Services	30
Care Homes/ Domiciliary Care	125
Voluntary Organisations	62
Other	119
Total	411

Mental Capacity Act E-Learning	Number completed
DMBC	145
RDASH	4
St Leger Homes	2
Children's Services	16
Care Homes/ Domiciliary Care	281
Voluntary Organisations	22
Other	388
Total	858

Deprivation of Liberty Safeguards	Number completed
DMBC	175
RDASH	5
Children's Services	47
Care Homes/ Domiciliary Care	302
Voluntary Organisations	8
Other	362
Total	899

Safeguarding Adults Basic Awareness Course

This course is aimed at all staff who may work with adults that experience or are at risk of experiencing abuse or neglect. The course aims to deliver the following Learning Outcomes:

- Demonstrate awareness of what Safeguarding is and your role in Safeguarding Adults
- Recognise an adult potentially in need of Safeguarding and take action
- Be able to follow procedures for making a 'Safeguarding Concern'
- Appreciate the importance of dignity and respect when working with individuals
- Have knowledge of policy, procedures and legislation that supports Safeguarding Adults activity

Half Day Safeguarding Adults Basic Awareness Course	Number Attended
DMBC	59
RDASH	81
Care Homes/ Domiciliary Care	130
Voluntary Organisations	24
Other	2
Total	304

Safeguarding Adults Raising Concerns

This training is for managers of services, team leaders, supervisors, and staff who have responsibility within their role to refer safeguarding concerns to health and adult social care.

Learning Outcomes:

- Demonstrate awareness of Safeguarding Adults is and what your role is.
- Ensure the Making Safeguarding Personal approach is used throughout any concern reported.
- Recognise an adult at risk of abuse or neglect.
- Have knowledge of national legislation, local policy and procedures for Safeguarding Adults.
- Be able to know procedures for reporting Safeguarding Adults concerns

Raising Concerns	Number Attended
DMBC	113
RDASH	13
Care Homes/ Domiciliary Care	13
Voluntary Organisations	7
Personal Assistant	1
Total	147

Safeguarding Adults Managers Training

The Safeguarding Manager training is aimed at managers and senior managers within statutory health and adult social care who have significant experience of working with Safeguarding Adults procedures. They have the responsibility for decision making and overseeing and co-ordinating the process.

Learning Outcomes:

- Define the roles and responsibilities of a Safeguarding Manager.
- Describe the criteria used to determine thresholds into the safeguarding processes.
- List the purpose and outcomes of a strategy meeting.
- Describe the Safeguarding Manager's role in chairing a strategy meeting.
- Describe the Safeguarding Manager's role in supervision, investigation stage and role in Case Conference.
- Apply learning to professional practice and identify personal and organisational barriers to effective practice

Multi- Agency Safeguarding Manager training	Number Attended
DMBC	10
RDASH	11
Total	21

Safeguarding Adults Section 42 Enquiries

A 2 day training course for practitioners from statutory health and social care. People attending this course should be able to demonstrate experience of working within Safeguarding Adults Procedures and will have a role in undertaking safeguarding referrals.

Learning Outcomes:

- Describe legal and other frameworks surrounding Safeguarding Adults work.
- Outline joint organisational roles and responsibilities for investigating safeguarding concerns.
- Explain the principles, processes and best practice skills involved in undertaking investigative work.
- Describe the Safeguarding Manager's role in supervision, investigation stage and role in Case Conference.
- Apply learning to professional practice and identify personal and organisational barriers to effective practice.

Multi- Agency Safeguarding Manager training	Number Attended
DMBC	32
RDASH	30
Total	62

Making Safeguarding Personal

A 2 day course for practitioners that have completed the Section 42 Enquiries course. This course enables practitioners to learn skills and techniques with adults to determine outcomes. It explores methods for complex situations and decisions.

Learning Outcomes:

- Explain the purpose and process of a safeguarding adults interview to an individual who will have no familiarity with the local policy and procedures.
- Apply the principals and emerging techniques of Making Safeguarding Personal within all face-to-face interviews.
- Recognise and work with issues of anti-discriminatory practice in the interview process.
- Encompass the Principles of the MCA and the role of the IMCA service.
- Recognise the balance between interview content and the balance/relationship between enquiry and assessment of a person's needs.

- Demonstrate interviewing skills, including reference to Achieving Best Evidence (revised) guidance (establishing rapport, free narrative, questioning and closure) exploring issues around leading questions and closed questions.
- Engage with people who are reluctant to participate in the safeguarding process and work with those who require clear, communication.
- Understand when a decision may need to be made to share information with either the police or other agencies to further the enquiry.
- Demonstrate skills for contemporaneous note taking.
- Facilitate development of a personal action plan for using good practice and methods of capturing positive interventions and evidencing good practice even if the outcomes are more complex and less concrete.
- Understand responsibilities around information sharing and confidentiality, keeping the person safe, promoting good practice in multi-agency working and the duty of care.

Making Safeguarding Personal	Number Attended
DMBC	17
RDASH	9
Total	26

Half Day Mental Capacity Act Basic Awareness Course

This training is aimed at social and health care workers, housing officers, public health workers, police, fire and ambulance services. The aim of the course is to develop an awareness of the Mental Capacity Act and its implications.

Half Day Mental Capacity Act Basic Awareness Course	Number Attended
DMBC	20
RDASH	70
Care Homes/ Domiciliary Care	115
Other	5
Total	210

Introduction to Deprivation of Liberty Safeguards

This course helps to identify a possible Deprivation of Liberty and appreciate responsibilities under the Deprivation of Liberty Safeguards. It is aimed Senior staff in care homes and hospitals, social workers, assessment officers, reviewing officers, CPNs, Ward Managers, Modern Matrons, contracts and commissioning officers.

Introduction to Deprivation of Liberty Safeguards	Number Attended
DMBC	59
RDASH	15
Care Homes/ Domiciliary Care	38
Other	3
Total	115

Assessing Capacity and Best Interests Decision Making

This course refreshes existing knowledge of the statutory principles and focuses on two of the key areas of the Mental Capacity Act: assessing capacity and best interest decision making. This course considers relevant guidance in the Code of Practice, documentation to be used in Doncaster, and approaches adopted by the Court of Protection in a number of legal cases. This course is suitable for Health and social care workers responsible for assessing capacity and making best interests decisions.

Assessing Capacity and Best Interests Decision Making	Number Attended
DMBC	45
RDASH	12
Care Homes/ Domiciliary Care	62
Other	4
Total	123

MCA 2005 – Complex Decision Making

This course focuses on best practice when making complex decisions within the framework of the Mental Capacity Act 2005 and appreciate the requirements of the Court of Protection.

Complex Decision Making	Number Attended
DMBC	24
RDASH	10
Care Homes/ Domiciliary Care	16
DBHFT	1
Other	4
Total	55

Deprivation of Liberty Safeguards for Care Homes and Hospitals

This course is aimed at Care Homes and hospital staff only. It highlights the key principles of the Mental Capacity Act (MCA), identify a possible Deprivation of Liberty (DOL) and appreciate responsibilities under the Deprivation of Liberty Safeguards (DOLS)

Deprivation of Liberty Safeguards for Care Homes and Hospitals	Number Attended
DMBC	33
RDASH	4
Care Homes/ Domiciliary Care	23
Total	60

Working Together Programme

The Doncaster Safeguarding Adults Board works together with Sheffield, Barnsley and South Yorkshire Police to deliver regional two-day training and development conferences. The courses are designed to provide practitioners from health and social care and South Yorkshire Police with key information relating to Safeguarding Adults work and to explore their joint roles within it. Each region is allocated 20 places.

People attending this training must have attended Safeguarding Adults Enquirers training and/or demonstrate significant experience in working within Safeguarding Adults procedures.

Courses:

- 5th and 6th October 2015 – Barnsley
- 2nd and 3rd December 2015 – Sheffield
- Development Conferences:
- 14th July 2015 - Sheffield
- 16th February 2016 - Doncaster

Level 1 Trained 2015/2016	Level 2 Trained 2015/2016
676	1647
Total	2323

Single Agency Training

DBHFT

The Trust took a new approach to delivering Safeguarding training in 2015. This was to ensure the Trust meets its obligations in respect of safeguarding training and the best use is made of resources. Our safeguarding training from February 2015 has included Safeguarding Adults, Safeguarding Children, Domestic Abuse, Mental Capacity Act and Deprivation of Liberty, Prevent, Child Sexual Exploitation and Female Genital Mutilation.

South Yorkshire Police

With regard to frontline Police Officers, over the 2015/16 curriculum the following training was delivered: Human Trafficking, Rape, Coercive Control, Forced Marriage and Female Genital Mutilation.

St Leger Homes

Training	Number attended
Induction	48
Safeguarding Children & Adults (Level 1)	78
Child Sexual Exploitation	21
Care Act 2014	32
Working Together to Safeguard Children (Level 6-12)	1
Child Protection Level 3	11
Domestic Abuse & Risk Management	12
Early Help Children	22
Signs of Safety	18
Early Help (Children)	42
Total	285

RDASH

Training / Level	Method	Figures trained between Apr 15 – Mar 16
Safeguarding Adults Level One	Leaflet	548
000 Safeguarding Adults - Level 1	Online e-Learning	1202
000 Safeguarding Adults - Level 2 – Basic Awareness	Online e-Learning	856
Safeguarding Adults: Raising Concerns Level 3	Face to face – classroom based	197
RDASH Safeguarding Conference 2015	Face to face	70 Doncaster staff (94 attended in total)
Totals (across Level 1, 2 and 3)		2803

South Yorkshire Police

Safeguarding Training	Q1	Q2	Q3	Q4	Annual Total
Community Safety			9 New Starters	14	23
Youth Engagement/Cadet Instructors			8 Life/PTrust		8
Group Managers – Annual update				6	6
Group Managers - new	4				4
Crew Manager Induction					
New Starter Induction					
Stake Holder Engagement Board/Fire Authority					
Sheffield Safeguarding Adults Training Pool				14	14
Volunteers	4		7		11
TFS				24	24
Operational Crews	16		8 Recruits		24
Control					
Other		25 Middle Managers Update	20 Lunchtime Seminar		45
Total	24	25	52	58	159

South Yorkshire Fire & Rescue Internal Training programmes

Safeguarding Training Staff Groups	Training modules
Community Safety & Youth Engagement	Running Safe & Effective Events & Activities Case Conferences - Strengths Based Approach – Signs of Safety Child Fire Setters – Review & Development (1 DAY COURSE)
New Community Safety Staff	Safeguarding & Child Fire Setters (1 DAY COURSE)
Technical Fire Safety	Update & Refresher (1 HOUR)
Recruits & New Starters	Child Protection E Learning
Group Managers	Care Act 2014 - Making Safeguarding Personal Strengths Based Approach – Signs of Safety (2 HOUR)

In Summary

The training delivered over the year has had a real focus on embedding the Care Act 2014. This has meant in a change in procedures to focus on outcomes for adults at risk. A number of refresher courses and update sessions were organised to ensure the workforce receive these updates.

The response to these changes has been positive and shows a real commitment to Safeguarding Adults. There has been increase overall in accessing training, especially e-learning courses.

This year has marked a start to implementing the changes. As we move forward we will also deliver training to providers to undertake Section 42 Enquiries and continue to deliver training to embed Making Safeguarding Personal in practice.

We are also working to implement the National Competency Framework across the multi-agency partnership to assist organisations to identify staff skills and training needs.



Safeguarding Adults Support Unit

The Safeguarding Adults Unit is based within the Council's Directorate of Adult Services. Established nine years ago, its purpose is to support safeguarding activity across all agencies. Overall management responsibility for the unit is located within the Modernisation and Commissioning functions of Adult Services.

Key responsibilities of the unit include:

- Arranging and co-ordinating Safeguarding meetings, providing administrative support, including distribution of minutes and reports.
- Logging and recording Safeguarding referrals, contacts and Safeguarding activity for partners.
- Collecting data and analysing Safeguarding activity and outcomes, monitoring and reporting performance in relation to progress of cases and Serious Case Reviews.
- Providing support to the Safeguarding Board.
- Providing support, guidance and advice to a range of professionals, organisations, agencies and the general public.
- Developing strong multi-agency engagement in line with the South Yorkshire Safeguarding Adults Policy and Procedure.
- Providing support in complex, high risk Safeguarding Adults Investigations
- Providing the link between strategic and operational activity through attendance at meetings, training and multi-agency internal boards.
- Providing support and guidance for the implementation of the Mental Capacity Act (MCA) 2005.
- Providing a joint administrative function to support the Council to carry out its statutory duties relating to Deprivation of Liberty Safeguards (DOLS)
- Supporting the on-going planning, commissioning and delivery of Safeguarding Adults training across the Partnership.

The Safeguarding Adults Board Support Unit has provided admin support for the following during 1st April 2015 to 31st March 2016;

Meeting type	Arranged 2015/16	Minuted 2015/16
Safeguarding case conference meetings	44	41
Strategic meeting	66	21
DSAB and Sub Group meetings	35	32
Team Meetings	7	7
Total	152	101

Contact details

DSAB Support Unit

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Waterdale

Doncaster

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Funding

Partner Agency Contributions For 2015/16	
DMBC – (Adult Social Care)	£215,860
CCG (including funding of Independent Chair)	£106,180
SY Police Crime Commissioner	£5000
Total income	£327,040
Total Spend	£320,164
Underspend	£6876
Carried forward from 14/15	£46,844
Total Spend in 15/16	£14,675
Underspend	£32,169
Carry forward to 16/17	£39,045

Attendance Monitoring DSAB and Sub Groups April 2015– March 2016

Board Attendance – 4 meetings held

Agency	Attendance
Independent Chair	100%
DMBC	100%
SYP	100%
DCCG	100%
SAU	100%
HMPS	50%
RDASH	100%
DBHFT	75%
SYF&R	25%
St Leger Homes	100%
NHS England	100%
Healthwatch	50%

Business Coordination Group – 6 meetings held

Agency	Attendance
Independent Chair	85%
DMBC	85%
SYP	65%
DCCG	85%
SAU	100%
RDASH	65%
DBHFT	85%
St Leger Homes	65%

Safeguarding Adults Review Panel – 5 meetings held

Agency	Attendance
Chair	100%
DMBC	100%
SYP	15%
DCCG	60%
SAU	100%
RDASH	30%
DBHFT	85%

Performance sub group - 6 meetings held

Agency	Attendance
Chair	50%
DMBC Care Management	65%
SYP	35%
DMBC Performance	15%
DCCG	100%
SAU	100%
RDASH	85%
DBHFT	85%

Engagement sub group attendance - 7 meetings held

Agency	Attendance
Chair	70%
DMBC	70%
SYP	40%
DCCG	0%
SAU	100%
RDASH	30%
SYF&R	40%
St Leger Homes	85%
Doncaster Advocacy	0%
Public Health	15%

Workforce sub group – 7 meetings held

Agency	Attendance
Chair	80%
DMBC	40%
SYP	80%
DCCG	100%
SAU	100%
RDASH	80%
DBHFT	100%

“Working together to safeguard vulnerable adults in Doncaster and respect, and empowering them to take charge

SO1. To review the constitution of the DSAB in line with current legislation, statutory guidance, national and local priorities to safeguard adults at risk across Doncaster.

1.1 Embed South Yorkshire Procedures across Doncaster through the development and roll out of a formal launch.

1.2 Revise the Board constitution to reflect the DSABs relationship with other Partnerships - On-going

1.3 Engage with Prison Services, understand the needs of the prison population with a view to embedding safeguarding - On-going

1.4 Develop Process for Overarching Safeguarding Cases.

1.5 To revise the Memorandum of Understanding with CQC to clarify role and responsibilities across the multi-agency partnership to safeguard adults at risk

1.6 Embed Joint Safeguarding Multi-agency Capability Framework in practice across the partnership. - On-going

1.7 To review Doncaster Safeguarding Adults Policy and Procedures every 3 years

1.8 Develop Multi-agency training quality assurance process. - On-going

- DSAB ensures high quality, effective and up to date policies, procedures and guidance is accessible and embedded in practice across the Partnership
- Updated Board constitution with an emphasis on positive challenge
- Risk Management Framework for adults at risk
- Systematic and transparent approach to Serious Case and Lessons Learned Reviews
- The DSAB receives assurance that the Safeguarding workforce have the skills and competence to deliver a full range of social and legal interventions.

SO2. To deliver the DSAB Strategy through a Performance Framework, holding agencies to account and embedding lessons learned through robust governance and quality assurance processes.

2.1 To review agencies and board substructure to ensure purpose

2.2 To review multi-agency representation at Board to safeguard adults at risk

2.3 Revise the Board Strategic plan 2013-16 in line with statutory guidance / legislation

2.4 Ensure robust work plan governance is in place to deliver strategic plan and inform Board of its progress

2.5 Ensure robust governance in place to assure the Board that actions from SCR/LLRs are being implemented

2.6 Ensure robust risk management processes are in place (register) to identify, mitigate and inform the Board about risks in relation to achieving the Boards strategy

2.7 To produce an Annual Report that provides clear and concise information for the public and agencies detailing the work and achievements of the DSAB.

2.8 To undertake a rolling programme of audit to provide assurance

- Process and quality measures
- Quality assure appropriateness of referrals
- Implementation of actions to improve practice

2.9 To produce a quarterly report that collates a dashboard of information relating to;

- Performance, outcome, process and quality metrics, themes and trends On-going
- DSAB membership ensures the right agencies at the managerial level are members of the Board and are held to account for their agencies engagement and attendance at Board and sub group meetings
- The Board will be fit for purpose to deliver the strategy through its structure, robust governance arrangements and multi-agency representation
- Through its annual report the DSAB provides rigorous and transparent assessment of performance and the effectiveness of local services, including lessons learned from Serious Case reviews.
- The Board is able to make strategic decisions based on the information it receives
- Safeguarding practice continues to improve

The Strategic objectives have been aligned to sub groups for accountability purposes, however it is recognised that the sub groups have different aims where a

“Empower and prevent abuse, enabling them to live safely with dignity and make their own decisions about their own safety and wellbeing.”

SO3. To develop a Safeguarding Adults Preventative Strategy that empowers adults at risk to protect themselves from abuse, supporting communities and people through effective risk management in personalisation of their care.

3.1 Develop a Safeguarding Adults Preventative Strategy that outlines Doncaster’s approach to preventing adults at risk from abuse to include;

- Board’s responsibility for self-neglect to inform management of adults at risk (VARM) to inform Strategy
- Proposed model to manage adults at risk through reportable concerns (low level concerns) On-going

3.2 Implement Making Safeguarding Personal across the multi-agency partnership On-going

3.3 Implement Safeguarding Adults Communication Plan

3.4 Embed a consistent approach to assessing mental capacity across partnership through assurance;

- sign up to MCA Joint Agency Agreement
- formal launch of MCA1,2,3 forms across multi-agency partnership

3.5 To develop user satisfaction feedback mechanism On-going

- Clear approach to preventing abuse in Doncaster and how it intends to do this.
- Personalisation embedded in the Safeguarding Adults process to support and empower adults at risk
- Effective engagement with the population of Doncaster
- Raised awareness of Safeguarding Adults, preventing abuse and reporting
- Increased alerts and referrals from hard to reach groups
- Assurance a consistent approach to the Mental Capacity Act 2005 embedded across multi-agency partnership
- Outcome measures in place and embedded in performance framework

SO4. To review the needs of adults at risk with due regard to economic, social and legislative changes regarding factors such as social issues, criminal behaviour, mental and physical health and wellbeing, with a view to improving / shaping services to better meet their needs.

4.1 Engage with JSNA process to identify and assess the needs of adults at risk to prevent abuse across Doncaster

4.2 Assess the impact of legislation and statutory guidance providing regular updates to Board

- Increased knowledge of the needs of Doncaster population to inform future service development
- Board able to make strategic decisions in relation to emerging legislative and statutory guidance
- Service design is based on local need

Doncaster Safeguarding Adults Partnership Board Strategic Objectives 2013-16

Strategic objectives are cross cutting and interrelated therefore sub groups will be required to contribute to other strategic objectives where appropriate.