

## Safeguarding Adults

### Summary

- 1) Guidance relating to safeguarding adults – No Secrets – was first issued in 2000, since when a number of high profile cases have identified and highlighted a range of issues of concern. These have related to inconsistencies in implementation of the guidance and some difficulties in securing good local multi-agency engagement at both strategic and operational levels. Difficulties and confusion have also been highlighted about the roles and responsibilities respectively of local authorities, other local statutory partners – in particular health and the police – and of the regulator.
- 2) A consultation on a review No Secrets was held between October 2008 and January 2009. This addressed a range of issues identified both from inspection and other reports and from a series of “Listening events”. It identifies the need for any future guidance to embed the understanding the safeguarding is everybody’s business, to reflect the changing pattern of social care provision and delivery and raises questions about the potential need for additional legislation.
- 3) In advance of responses by government and any future guidance following the consultation, and acting on concerns raised by councils, a programme is being developed by the IDeA to support councils in developing and delivering good practice. This programme is targeted both on strategic and operational concerns.
- 4) It is proposed that a summit for all lead members is held in June / July 2009 to review activity in this area and, subject to further discussion with DH and other departments, to steer further work that may be required in this area.

### Recommendations

- 1) That the board consider the issues identified in this paper and in presentations to be made to the meeting.
- 2) That consideration be given to the proposal to hold a summit for lead members in June / July.
- 3) That the board consider further action that might be required at this point.

## Safeguarding Adults

### Background

- 1) No Secrets<sup>1</sup>: was issued by the Department of Health and the Home Office in 2000. It was issued as statutory guidance (under Section 7 of the Local Authority Social Services Act 1970) and required Local Authority Social Services Departments to take a lead role in developing a multi agency framework with local policies and procedures to protect vulnerable people from abuse or harm. Although lead by Adult Social care, it required the establishment of Multi-Agency Management Committees with lead officers from a comprehensive range of local agencies and in particular from police and health services.
- 2) Since the original guidance was issued, issues relating to safeguarding adults – and / or of abuse – have increasingly been raised as significant concerns. In 2006 the CSCI and Healthcare Commission reported the Joint Investigation into learning disability services at the Cornwall Partnership NHS Trust<sup>2</sup> and in 2007 the Healthcare Commission reported on the investigation into learning disability services in Sutton and Merton<sup>3</sup>. Also in 2007 concerns relating to learning disability services were highlighted in a Mencap report – Death by Indifference<sup>4</sup> - and a prevalence study of people over 66 living in private households jointly commissioned by the Department of Health and Comic Relief<sup>5</sup> that identified 2.6%-4% of respondents who reported mistreatment – a percentage that equates to between 227,000 and 342,000 people aged 66 or over in the UK.
- 3) In October 2008, a consultation on the review of the No Secrets guidance was issued jointly by the Department of Health, Home Office, Ministry of Justice and the Solicitor General<sup>6</sup>. This reflected a number of improvements that had been achieved since the original guidance was issued, though also identified significant difficulties as above and reported in a series of “Listening Events”. These related to slow and inconsistent implementation of the guidance; the need for greater clarity that safeguarding is “Everybody’s business”, (not least given the changing pattern of delivery of support and care services to greater emphasis of self directed support and the growth of unregulated care

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<sup>1</sup> No Secrets: Guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse. [http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4008486](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4008486)

<sup>2</sup> Joint investigation into the provision of services for people with learning disabilities at Cornwall Partnership NHS Trust (Commission for Social Care Inspection and the Healthcare Commission, 2006)

<sup>3</sup> Investigation into the service for people with learning disabilities provided by Sutton and Merton Primary Care Trust (Healthcare Commission, 2007)

<sup>4</sup> Death by indifference: Following up the Treat me right! report (Mencap, 2007)

<sup>5</sup> UK Study of Abuse and Neglect of Older People: Prevalence Survey Report, M O’Keefe et al. (Department of Health and Comic Relief, 2007)

<sup>6</sup> Safeguarding Adults: A Consultation on the Review of the ‘No Secrets’ Guidance [http://www.dh.gov.uk/en/consultations/liveconsultations/DH\\_089098](http://www.dh.gov.uk/en/consultations/liveconsultations/DH_089098)

providers) and a range of views about the need to introduce legislation in relation to adult protection.

- 4) The LGA response to the consultation, available on the LGA website at: <http://www.lga.gov.uk/lga/core/page.do?pagelid=1610062> welcomed the review of the guidance, both to ensure that the arrangements through which people can be kept safe from abuse or harm are consistent with the changing policy context and mechanisms through which support and care will be delivered in the future, and to ensure greater consistency in understanding, implementation and accountability of those arrangements.
- 5) As noted above, No Secrets was issued as statutory guidance to local authorities, though the lack of effective mechanisms to ensure the co-operation of partners has been problematic. The intention to put in place a consistent and common set of definitions, expectations, roles and duties and for this to be set out in overarching policy guidance that applies to all agencies was therefore welcomed. The co-ordinated delivery of effective planning and action in this area by a broad range of partners is a proper function of LSPs and to ensure that arrangements can be discharged effectively it was proposed that local safeguarding boards be established on a statutory footing with clear duties on identified partners to co-operate.

## Issues for Councils:

- 6) In November 2008 CSCI issued a report into the effectiveness of arrangements to safeguard adults<sup>7</sup>. This was based on Independence Well-Being and Choice inspections, 250 “Thematic” inspections of care services, councils’ self assessment reports and detailed work in seven study areas. Among the issues identified were (in the order in which they are raised) :-
  - a. Targeting older and disabled people but are not always reaching people with mental health needs, those who misuse drugs or alcohol, people from BME communities and people funding their own care
  - b. Inconsistent out of hours responses
  - c. Shortfalls in advocacy support
  - d. Variability in the standard of practice when supporting someone who has experience abuse
  - e. A lack of systematic approaches to prevent abuse for people directing their own support
  - f. Only half of local adult safeguarding boards were judged to be working effectively – GPs, housing and probation services were least involved

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<sup>7</sup> Safeguarding adults: A study of the effectiveness of arrangements to safeguard adults from abuse November 2008 - <http://www.csci.org.uk/PDF/safeguard11.pdf>

- g. Difficulties in respect of GPs' and hospitals' understanding of confidentiality and information-sharing protocols, particularly mental health services
  - h. Patchy use of legal remedies and poor understanding of these among relevant staff.
  - i. Although training has risen from 71% of relevant council staff in 2006/7 to 81% in 2007/8 – only 46% of independent sector staff have had council commissioned training
  - j. Over 2/3 of councils do not monitor safeguarding adequately through management overview of individual cases and the arrangements as a whole
  - k. At a casework level, over half of councils inspected needed to improve recording and supervision, and two-thirds to improve auditing processes
  - l. Variation in the degree of priority shown to safeguarding adults within and across council areas
  - m. Only a minority of councils considered safeguarding as a matter of course across their strategies on health and well-being, crime and disorder, domestic violence and regeneration
- 7) A range of issues are identified for care providers, the most common of which is inadequate training to ensure that staff understand safeguarding, written documentation (policies and procedures) and recruitment practices.
- 8) Additionally, there were a range of issues identified about the role of the Commission including the circumstances in which they might attend strategy meetings about incidents in regulated services; the role of the commission on local safeguarding boards and disquiet of people who use services or relatives who raise issues directly with the commission which are then referred back to the authority. In this regard it should also be noted that there is significant potential for further lack of clarity given the transition to the Care Quality Commission and the inevitable upheavals this will entail.

## **Support to Councils.**

- 9) In advance of government response to the consultation and conclusions with regard to new guidance, the IDeA has secured funding to support improvement work in this area. This is modelled on work that has taken place in relation to children's services and includes the following elements:-
- a. A programme of peer review and challenge
  - b. Customised support to authorities through deployment of accredited associates with particular expertise in this area.
  - c. The development of "Early warning" systems (through for example a "Dashboard of indicators") and protocols to be developed with ADASS.
  - d. The development of good practice toolkits and support for local scrutiny arrangements.
  - e. Development of specific training for elected members

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10) Existing activity in this area includes:-

- a. A peer review in Northamptonshire. This will be followed up with member awareness training
- b. A better outcomes workshop on safeguarding – with 8 local authorities (4 children's and 4 adults') to be held in May 2009
- c. Ongoing discussion with an authority in relation to member training.

11) Further potential activity includes –

- a. Development of Peer review based on the outcome of work in Northamptonshire. Key lines of enquiry are being consulted upon.
- b. Outcomes Based Accountability work – an introductory workshop plus action learning sets
- c. A session on safeguarding to be incorporated into the Health, Care and Well-being leadership academy
- d. The development of member awareness training and mentoring

12) Safeguarding is clearly a key issue for all councils and it is proposed that a summit be held in June / July in conjunction with government colleagues, both to review progress and further contribute to the development of any revised guidance in this area. In order to secure high level engagement it is proposed that this summit be open to all lead members.

## **Implications For Wales**

None

## **Financial / Resource Implications**

None at this point

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