

Nottingham City

Safeguarding Adults

Board

April 2018 –

March 2019

Annual Report

Message from the Chair

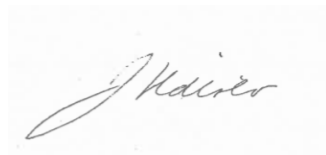
Welcome to the Nottingham City Safeguarding Adults Board Annual Report. The report covers the year 2018-2019 and attempts to reflect accurately the work of the partnership over that twelve-month period. However, I cannot take credit for the Board's work since it was my privilege to take over the Independent Chair role from Malcolm Dillon in April 2019. What I can say though is that this report sets out the significant progress made by the Board against a backdrop of austerity and continued public and voluntary sector funding reductions.

The key message from the data and partner returns is one of increasing demand and complexity within the adult safeguarding arena. I am heartened by the continued focus and commitment across the partnership. Despite these challenges, we continue to benefit from senior colleagues' focus on the key safeguarding issues facing us all.

Looking forward, the Board will continue to address its core priorities, including learning through Safeguarding Adults Reviews, focussing on prevention and communication and, most importantly, by listening and reflecting upon citizens safeguarding experiences. We will continue to look for key assurance that safeguarding is embedded across all organisations and that 'Making Safeguarding Personal' continues to be a golden thread throughout the partnership's work.

In the coming year the Board will also pay particular attention to the quality of care across sectors, financial abuse, the growing impact of modern slavery and the learning from Whorlton Hall.

I hope you find the report interesting and thought provoking and that you will continue to consider the safeguarding of adults in everything you do.



Joy Hollister
Nottingham City Independent Chair

Ps. we always begin Board meetings with a 'good safeguarding' practice example from one or more of our partner agencies, so we thought we would do the same thing in our Annual Report...

Case study

‘A’ was referred to the Safeguarding Team following concerns that local criminals were exploiting him. ‘A’ lived in his own property but evidence gathered by the police and Community Protection services indicated regular anti-social behaviour by others residing at the address, including drug use and dealing and the possession and sale of stolen goods. The electricity meter had been bypassed and the property itself was in a state of disrepair.

‘A’ was an established drug taker, possibly had a serious physical health condition and was very vulnerable. Several people were living at the property, which was also linked to over twenty criminal offenders who sometimes gave ‘A’s’ personal details when committing crimes.

The Safeguarding Team successfully engaged with ‘A’, making referrals to agencies to support him with rehousing, substance misuse and his health conditions. However, it was difficult to remain engaged with ‘A’ because of the pressure exerted by those exploiting him. Nonetheless, professionals persisted and on the basis that this case had many indicators of ‘cuckooing’, the Modern Day Slavery team became involved. Soon after, a multi-agency meeting took place and after ‘A’ had been voluntarily removed to a place of safety and supported to explore the options available, a plan was agreed. The next day ‘A’ engaged with the National Referral Mechanism, successfully completed drug detoxification and took up the offer of supported accommodation in another city, a safe distance away from his abusers.

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2. Core Duties of Nottingham City Safeguarding Adults Board

Each local authority must set up a Safeguarding Adults Board (SAB). The main objective of a SAB is to assure itself that local safeguarding arrangements and partners act to help and protect adults in its area who meet the criteria set out in the Care Act.

The SAB has a strategic role that is greater than the sum of the operational duties of the core partners. It oversees and leads adult safeguarding across its locality and is interested in a range of matters that contribute to the prevention of abuse and neglect.

A SAB has three core duties:

- It must publish a strategic plan for each financial year that sets how it will meet its main objective and what the members will do to achieve this.
- It must publish an annual report detailing what the SAB has done during the year to achieve its main objective and implement its strategic plan, and what each member has done to implement the strategy as well as detailing the findings of any safeguarding adults reviews and subsequent action.
- It must conduct any Safeguarding Adults Reviews (SARs) in accordance with Section 44 of the Act.

Case study

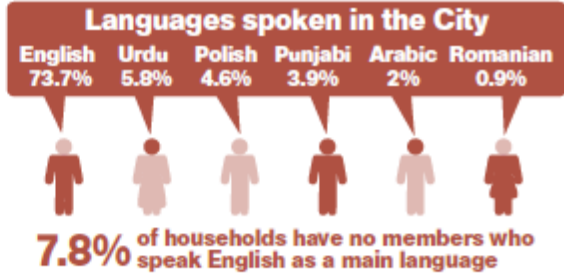
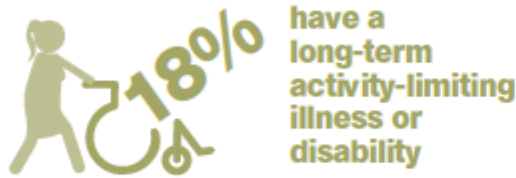
'B' was a 90-year-old woman who came to the attention of the police following a referral by her local bank under 'the Banking protocol', a local initiative between Nottinghamshire Police and financial institutions. 'B' was attempting to withdraw £16,000 of her savings, having withdrawn £13,000 the previous week. Officers attended the bank but were unsuccessful in ascertaining why she was withdrawing the money. A follow up visit was made to 'B' by Trading Standards staff to provide advice on scams and ten days later they received a telephone call from a local jewellers, reporting that 'B' was at their premises attempting to spend £60,000 on Rolex watches. Police and Trading Standards officers attended and this time were successful in preventing 'B' from handing over her money.

Subsequent investigations revealed that 'B' had been the victim of an elaborate scam, having been contacted by someone claiming to be from the Metropolitan Police and telling her to withdraw her savings as her bank account had been compromised. This lie made engaging with 'B' difficult, as she was unsure who were the genuine professionals trying to help her. However, criminal prosecutions followed as did ongoing support for 'B', including having a 'call blocker' fitted on her home phone to prevent any further scam calls being made to her.

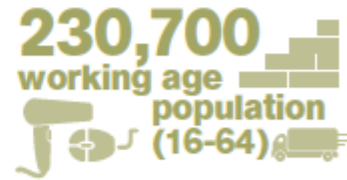
3. About Nottingham City

Nottingham Insight

Source of Data - Census unless otherwise indicated



School Census Jan 2017
ONS Mid Year Estimates 2018



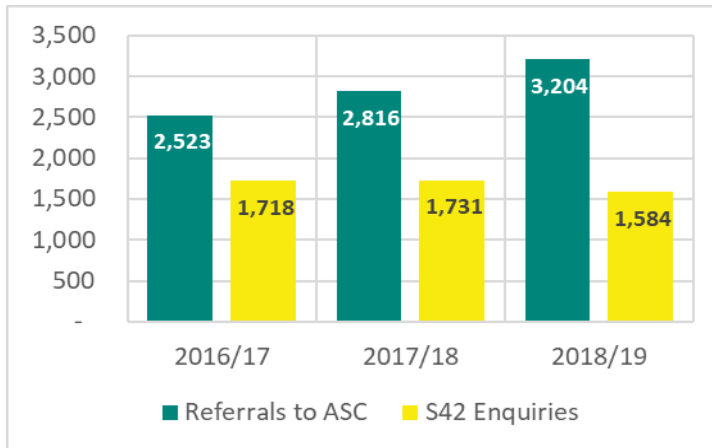
Sport England 2013/14



(*8th out of 326 Districts) Indices of Deprivation 2015

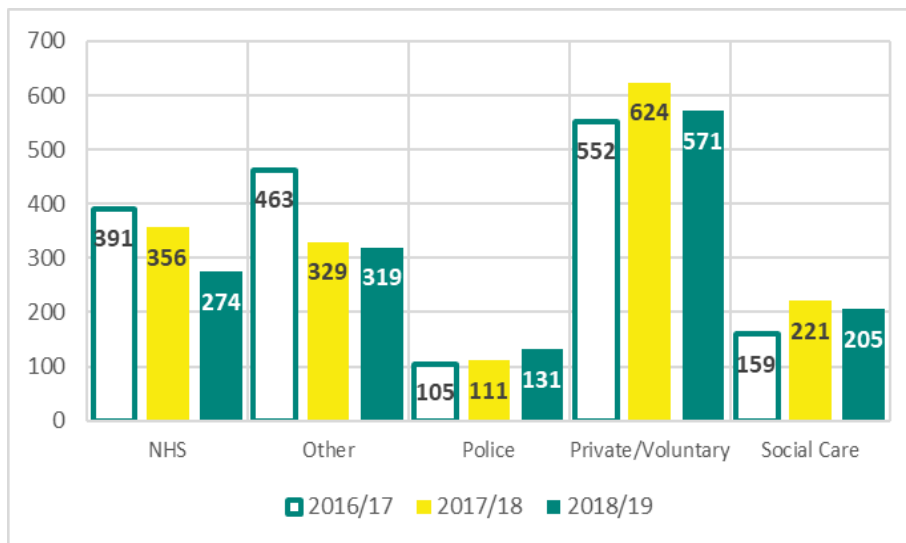
4. Nottingham City Adult Social Care Safeguarding Performance

Chart 1: Adult safeguarding referrals & s.42 enquiries by financial year



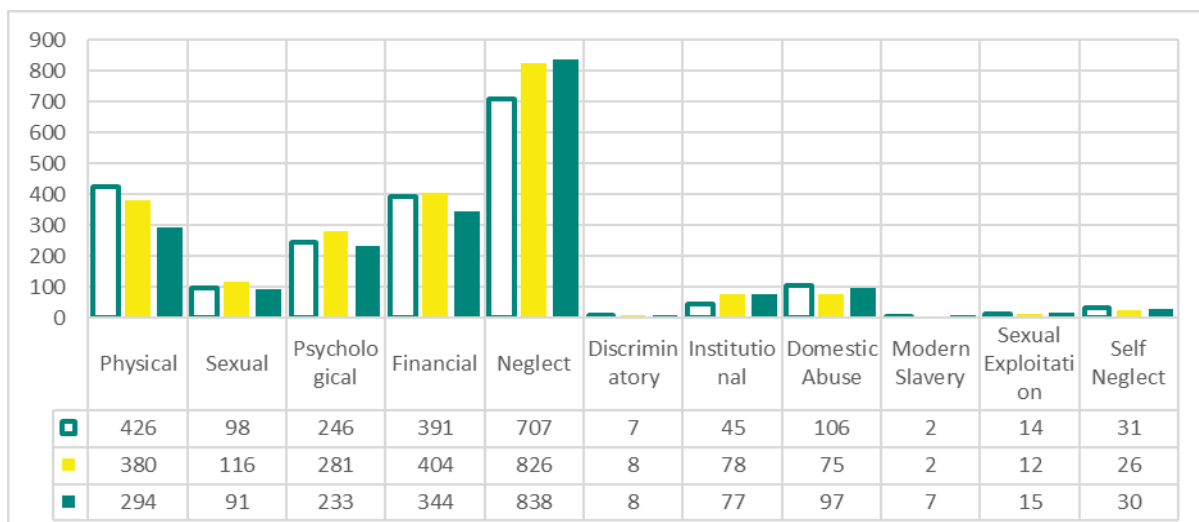
The number of adult safeguarding referrals received by Adult Social Care (ASC) has seen a consistent increase over the previous three financial years, such that 2018/19 experienced a 13.8% rise. This is a trend that will be monitored by the board, with the impact of austerity being one potential explanation.

Chart 2: Volume of s.42 enquiries by referral source



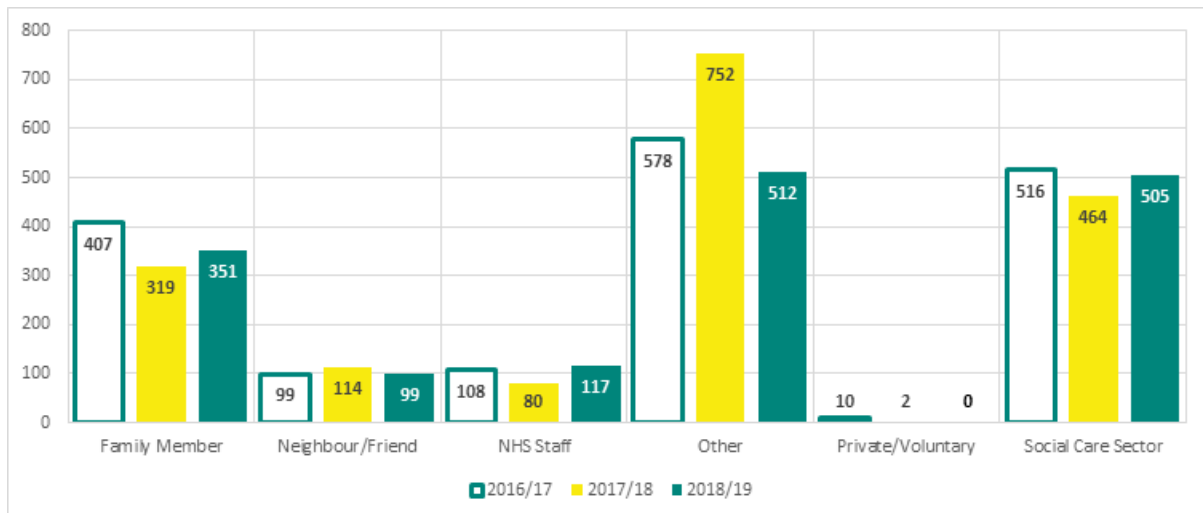
The trend in referral source for adult safeguarding referrals which led to a s.42 enquiry remained relatively consistent, with the private / voluntary sector continuing to provide the largest proportion of adult safeguarding referrals.

Chart 3: Volume of s.42 enquiries by type of abuse



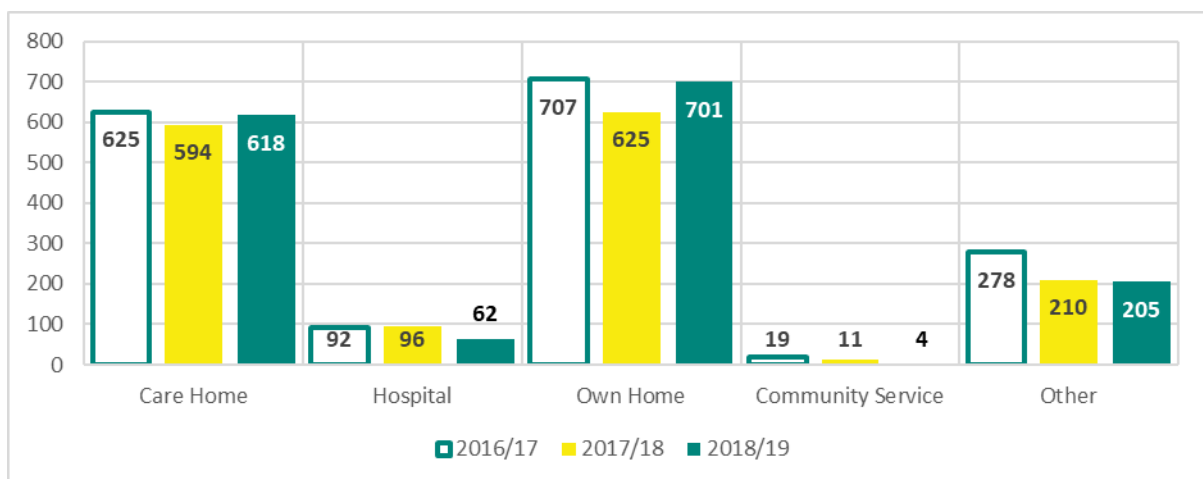
Neglect continued to be the most prevalent abuse type recorded. This category has seen consistent increases annually since 2016/17, but is offset by a reduction in physical abuse referrals, so much so that financial abuse is now the second most prevalent type of abuse.

Chart 4: Volume of s.42 enquiries by perpetrator relationship



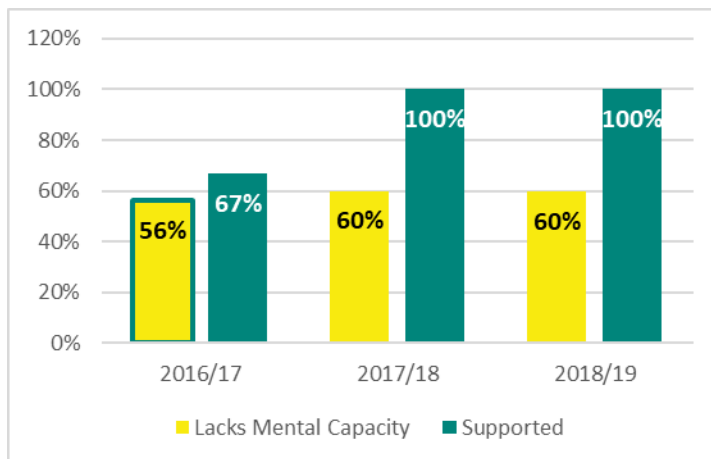
Of those referrals where ‘Social Care’ staff were recorded as the perpetrator, 87% of the abuse was neglect. A breakdown of the ‘Other’ perpetrator relationship provides little insight, with 52% still showing an ‘Other’ relationship at the lowest level of granularity. Nonetheless, this category saw a 31.9% reduction compared to the previous year, most likely due to improved recording.

Chart 5: Volume of s.42 enquiries by location of abuse



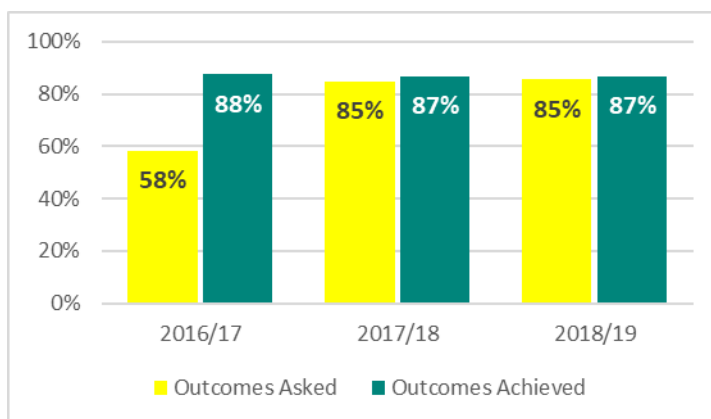
There has been little change in location data from previous years. Of those referrals where the abuse took place in the adult’s own home, the greatest volume were recorded as neglect by social care staff (21%), followed by financial abuse perpetrated by a family member (15%).

Chart 6: Proportion of s.42 enquiries where the adult lacked mental capacity



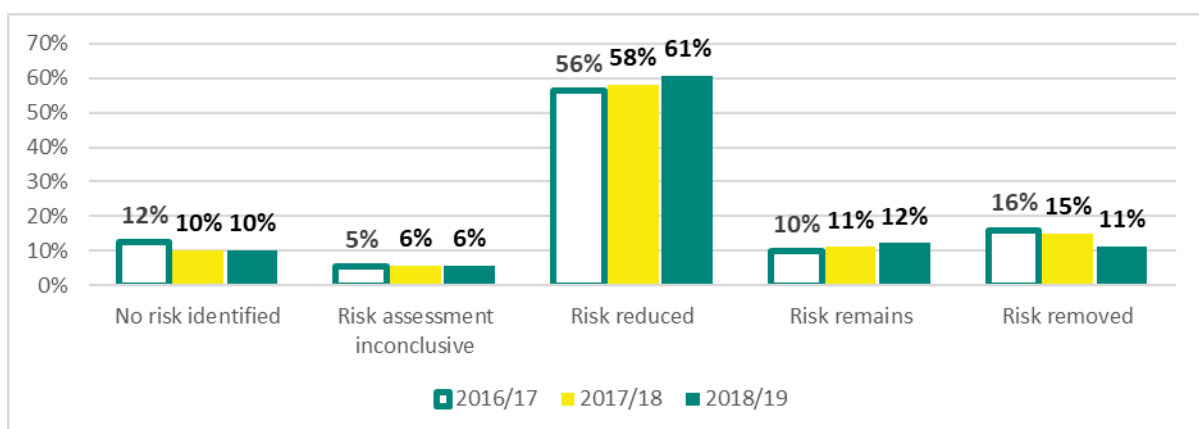
The proportion of referrals where the adult at risk was recorded as lacking mental capacity in relation to the safeguarding referral has remained static over the last two financial years. The same trend can also be seen in the proportion of those who lacked mental capacity receiving support through Care Act advocacy, family or friends.

Chart 7: s42 enquiries where the adult was asked about their desired outcome



The trend in s.42 enquiries where the adult at risk was asked about their desired outcomes showed no change. Additionally, the proportion of s.42 enquiries where the adult at risk expressed their desired outcome and had it fully or partially achieved remained static (87%).

Chart 8: Percentage of s.42 enquiries by risk outcome



Risk outcomes of s.42 enquiries followed a consistent trend to that of previous years, with the majority of enquiries concluding with a reduction in risk (60.6%), followed by the level of risk remaining (12%) and the risk being fully removed (11.4%).

Neglect remains the biggest single type of abuse, disproportionately affecting adults aged 70 plus, regardless of gender and accounting for 69.4% of s.42 enquiries in this age range. Although financial abuse accounted for the second greatest volume in both males and females over the age of 70, this was the most prevalent type of abuse in males aged 50 to 69 (38.4%), while females in this age range continued to experience neglect most often (13.1%).

Finally, over the last three years there has been little change in respect of safeguarding and gender such that the majority of citizens referred continued to be female (61%). Regarding safeguarding and age, adults at risk over the age of 65 accounted for 65% of referrals, with citizens aged between 75 and 94 contributing the highest proportion within this age category (72%). Lastly, and as expected, the greatest volume of adults at risk in 2018/19 were of White British ethnicity (75%), albeit showing a 9% reduction on the previous year. Positively, the number of adults at risk with an unknown ethnicity fell 14%, suggesting an improvement in recording.

5. Who sits on the Board and how does it work?

Malcolm Dillon chaired the Board throughout the year, with support from Ross Leather, the Board Manager and Emma Such, the Board Administrator.

The Board itself met quarterly, with senior representatives attending from the following organisations:

- Nottingham City Council Adult Social Care (ASC)
- Nottingham City Council Community Protection
- Nottinghamshire Police
- NHS Greater Nottingham Clinical Commissioning Group (CCG)
- National Probation Service, Nottinghamshire
- Derbyshire, Leicestershire, Nottinghamshire & Rutland Community Rehabilitation Company
- Nottinghamshire Fire and Rescue Service
- East Midlands Ambulance Service (EMAS)
- Nottinghamshire Healthcare NHS Foundation Trust
- Nottingham CityCare Partnership
- Nottingham University Hospitals NHS Trust (NUH)
- Vulnerable Adults Provider Network (VAPN)
- HMP Nottingham

The Board has three subgroups to support it. They are:

The Quality Assurance Subgroup. This is a proactive subgroup, responsible for supporting Nottingham City SAB in its assurance responsibilities by collecting evidence concerning the quality of local safeguarding adults' interventions and the performance of agencies and their staff in carrying out their safeguarding responsibilities. This includes a focus on the principles of Making Safeguarding Personal.

The Safeguarding Adults Review Subgroup. This a reactive group, responding to any SAR referrals the Board receives and responsible for the operation of the SARs it

commissions to ensure that agencies learn lessons and improve the way in which they work with adults at risk. The SAR subgroup seeks to develop SAR processes in line with The Care Act, local and national best practice.

The Training, Learning & Improvement Subgroup. This is both a reactive and proactive group, responsible for disseminating the learning identified in SARs as well as acting as a conduit for identifying and passing on safeguarding messages and available training to partner workforces. Additionally, the subgroup can arrange training on behalf of the Board as well as reviewing the effectiveness of multi-agency learning and improvement activities.

In addition to the three subgroups, the Independent Chair and representatives from the three funding agencies meet with the subgroup chairs and Board Manager on a quarterly basis at the **Business management Group** (BMG) to assist in the implementation of the Board’s Annual Action Plan.

Nottingham City Council, Nottinghamshire Police and Greater Nottingham Clinical Commissioning Group fund the Board.

SAB 18-19 Budget	Expenditure	Income
Board Manager	36,652	
Board Administrator	12,158	
Board Chair	24,774	
Running Costs	2111	
Total Expenditure	75,695	
Nottingham City		34,303
Nottingham CCG		34,303
Nottinghamshire Police		6,606
Nottinghamshire Probation		483
Total Income		75,695

6. Safeguarding Adult Reviews

In this financial year, three SAR referrals were received resulting in requests being made by the SAR Subgroup Chair and Board manager for agency reports on their involvement with these individuals. Extraordinary meetings were then arranged involving all relevant partner agencies and the cases examined to see if the SAR criteria were met. In one case, it was decided they were not. In two other cases, it was decided that whilst the criteria were not strictly met, enough learning existed to warrant the completion of ‘Complex Case Reviews’, essentially non-mandatory SARs, by Nottingham City SAB. At time of writing both reports have been written and are now awaiting final agreement and sign off before publication, which will include full posting on the Board’s website.

7. Partner Contributions

The following section highlights the achievements of our partner agencies in promoting Adult Safeguarding within their own organisations throughout 2018-19.

Nottingham Community Voluntary Service (NCVS): In partnership with Opportunity Nottingham, we continued to provide the 'Practice Development Unit', which facilitates learning and support for practitioners working with people with complex needs. Additionally, the Vulnerable Adults Provider Network (VAPN) continued to promote information from the Board as well as feedback issues from voluntary sector agencies to inform Board decision making. Finally, on a practice level, several VAPN meetings focussed upon improving frontline safeguarding practice.

HMP Nottingham: We have introduced interviews with a dedicated 'safer custody officer' at point of entry so that a comprehensive 'risk to self' assessment can be carried out. Prisoners identified who have been violent or pose a violent risk to others are now monitored under new 'Challenge, Support & Intervention Plans'. One of the advantages of these plans is that they allow prisoners to identify and address the risks they pose to others. A new area called the Byron Unit, has opened to facilitate the one to one work necessary between staff and prisoners to reduce these risks. Finally, we have also improved physical security measures that prevent ingress of unauthorised articles.

DNLRCRC: During the year, we ensured that all practitioners received refresher training on safeguarding and domestic abuse. Our Public Protection Forum ensured that actions from SARs, Serious Case Reviews (SCR) and Domestic Homicide Reviews (DHR) were collated and completed. Our team managers undertook monthly audits of case samples, with external audits carried out by the MoJ audit team. Making Safeguarding Personal (MSP) was a key element of training, with case essential practice requirements for staff including an MSP approach. CRC remain committed to all safeguarding boards as well as the strategic community safety partnership, youth justice and criminal justice boards.

Nottinghamshire Fire and Rescue: In 2018/19 the organisation made 51 adult safeguarding referrals. We have safeguarding policies & procedures in place with all personnel taking mandatory e-learning. Further training is provided face-to-face for those who regularly act as referrers or raise concerns. A recent HMICFRS inspection highlighted that 'staff across the service have a good understanding of safeguarding and are appropriately trained. There is an effective process in place so staff can take immediate action to safeguard both adults and children'.

We audit our safeguarding referrals on a six-monthly basis to identify learning and plan preventative action against any emerging themes. A Fatal Incident Group has been established which comes together following any incident that has resulted in a fatality or life changing injury to identify appropriate next steps and organisational learning.

Every six months case studies relating to safeguarding referrals from operational crews (and centred around Making Safeguarding Personal) are shared across the service to refresh safeguarding knowledge.

CityCare: We have made positive progress to improve our safeguarding training compliance and by the end of the reporting period, safeguarding and mental capacity / consent to treatment training was recorded at 95% & 83% attendance respectively.

A revised 'Safeguarding Training Strategy' was launched in line with the national intercollegiate document, focussing on a blended learning approach, and including learning opportunities such as forums, masterclasses, supervision and safeguarding updates to complement our face to face and e-learning delivery. Our bite size workshops explored complex issues such as working with non-engagement and self-neglect, honour based abuse and hoarding. We also devised factsheets that offer guidance around such key themes.

The 'Safeguarding Champions Network' continued to provide a vital role in embedding key safeguarding messages, with champions responsible for cascading information to their local practice areas. Our plans for the future focus on growing the network to promote safeguarding excellence within our front line practice.

Our Electronic recording system now provides Mental Capacity Act and Best Interests templates to ensure staff assessments are recorded correctly. Checklist tools to support practitioners when citizen's engagement is of concern have also been developed and are currently being implemented.

Our 'Quality Information Sharing Forum' continued as a forum where good practice and concerns within provider agencies were discussed and escalated. Finally, our Safeguarding Duty Service remained available to provide one to one support, whilst advice was also available to staff on a group or drop-in basis as required.

Nottinghamshire Police: In 2018, Nottinghamshire Police managed 71 victims of Modern Day Slavery & Human Trafficking. Victims were either exploited criminally, involved in labour exploitation, sexual exploitation or domestic servitude. Whilst the force has highlighted this risk to the Board, mitigations are in place. These include oversight from the regional Strategic Governance Group and a designated Supt Lead Officer in Nottinghamshire Police, through to a dedicated investigation team with trained officers and embedded safeguarding arrangements.

The force's 'Vulnerability Policy' was updated in April 2018 to provide staff guidance under the headline of "Know it, Spot it, Stop it!" Training for all front line staff under this refreshed policy commenced in January 2018 and will be completed by late 2019.

The Mental Health Triage car, a joint Police and Health initiative, continues into its 5th year. In 18-19, the car dealt with an average 14 incidents daily, completing 1018 mental health assessments, of which 708 were referred to the NHS and 114 were safeguarded using s.136 MHA. In 2019, we introduced a new policy in relation to Suicide Prevention and Risk Management for suspects of crime who are vulnerable.

Detective Chief Inspectors attend SARs and DHRs amongst other learning events to promote organisational learning. Learning from these is now recorded on the '4Action' database, with monthly monitoring and update processes in place, led by the Head of Public Protection and closed upon recommendation of the Deputy Chief Constable.

Nottinghamshire Police adopt a victim centred approach, and on initial contact conduct a vulnerability assessment. As a result, police response is directly in correlation with victim need. Use of the Public Protection Notice - a referral mechanism where officers highlight concerns about adults who may be at risk – has continued to rise, demonstrating increased awareness of safeguarding adult concerns by front line staff.

Nottinghamshire Police fraud dept. has continued working in partnership with the banking sector. This has included ongoing use of the 2017 protocol allowing banks to report people presenting at branches who may potentially be subject to real time fraud.

Over the past year, our feedback department reported high satisfaction levels, with around 95% of DA victims satisfied with their 'whole experience' with the Police. Since 2018, we have conducted satisfaction surveys from victims of rape and Claire's Law - the process of 'right to know, right to ask', for people at risk from domestic abuse perpetrators - with satisfaction levels for Claire's law applications nearing 100%.

Greater Nottingham CCG: Although there was a potential risk that the CCG did not have enough safeguarding resources due to the implementation of the Integrated Care System (ICS), this was mitigated against through a robust work plan and new staff structure that allows for greater cross cover and representation as well as recognising the increased activity of the teams. In addition, the CCGs now have a joint safeguarding assurance group that reduces duplication of effort.

In 2018/19, the CCG carried out 31 s.42 enquires on behalf of local authorities. These were primarily concerned with GP practices or complex cases involving citizens residing in nursing homes or in receipt of community care.

The CCG continued to identify patients subject to a Deprivation of Liberty within the community and seek authorisation from the Court of Protection about these. We also supported those patients whose care we funded who were objecting to their care, by making applications to the Court.

In order to share learning from reviews with GPs and primary care we began publishing information on the GP Team NET and the F12 projects. This ensured that all staff received the same consistent message in a timely manner. A good example of this was the new GP practice guidance for prescribing covert medication. Additionally, learning from reviews was cascaded through our newsletter, the GP safeguarding leads meeting and primary care learning events. The CCG also continued to host an adult safeguarding forum for all safeguarding leads across the health community,

In response to the ongoing CCG alignment, a new, combined Safeguarding Assurance Group was established in June 2018. This group reports to an Executive Safeguarding Group and has produced work on the Modern Day Slavery Supply Chain Mission Statement, safeguarding in care homes, Learning Disability Mortality Review (LeDeR) implementation and reviewing the NHS England (NHSE) Safeguarding Development Framework.

The CCG also completed the NHSE Safeguarding Assurance Tool throughout this period and were compliant in the Adult safeguarding Categories. Finally, the CCG

continued to promote greater use of the CHARLIE risk assessment and maintained its membership of the regional Prevent steering group.

Nottinghamshire Probation Service: NPS has a clear safeguarding adults policy available on EQUIP, its web based application for staff. EQUIP includes all the relevant legislation, NPS procedures and practice toolkits necessary to undertake adult safeguarding duties.

The December 2018 HM Inspectorate Report identified regional issues with probation officer staffing levels. However, the same report also rated as outstanding, assessment, planning and court reports & allocations. Rated as good were leadership, services, implementation and delivery, reviewing and statutory victim work. Finally, Estates was scored as requiring improvement nationally. A Divisional plan to tackle these identified issues has already been drawn up, with a priority action being to address the organisational risk of high workloads. Regarding safeguarding, staff continue to access mandatory e-learning and 'classroom' training at least once every three years, which is recorded by line managers through 'My Learning' and appraisals. Staff are also required to complete training on risk assessment and management and domestic violence, harassment & stalking. In addition to this, some staff have attended specific training on working with people with autism and learning disabilities.

Many NPS processes have consideration of adult safeguarding built in: The Offender Assessment System includes sections on criminogenic needs, vulnerability and a self-assessment questionnaire for the offender. Both this and Multi Agency Public Protection Arrangement (MAPPA) meetings have a multiagency focus, especially if safeguarding needs are identified. All our Offender Managers and Victim Liaison Officers are aware of the need to refer to and liaise with Adult Social Care if safeguarding needs are identified.

NPS Nottingham's quality assurance is set at a national level, with cases audited by management, HM Inspectorate and a national MAPPA inspection team. Learning from SARs and other investigations are shared across the Division through dissemination to Local Delivery Heads, intranet briefings, team meetings and individual supervision.

Nottinghamshire Healthcare NHS Foundation Trust: Throughout 2018-19, the Trust has continued to engage with other stakeholders to remain focused on protecting the right of everyone to be kept safe from harm, exploitation, abuse and neglect. During the year we have delivered a calendar of monthly events focusing on safeguarding topics such as making safeguarding personal, neglect, stalking and Female Genital Mutilation (FGM). Some of our highlights for this year include:

- The implementation of a Trust-wide Safeguarding Compliance Framework, which is used by services to measure their safeguarding compliance against CQC and other regulatory standards.
- Evaluation by the University of Nottingham of our 'Safeguarding Supervision Framework' enabling us to develop the framework further.
- Our 'Safeguarding Link Practitioners' group has gone from strength to strength. Meeting four times this year, the group has received presentations from Fire & Rescue, the Police and care homes, all of which have subsequently been disseminated.

- Establishing a 'learning from incidents' system, with information shared Trust-wide via briefings, Twitter and the intranet.
- Commencement of a two-year research project with the University of Nottingham into sexual safety on inpatient mental health wards.
- The launch of a Trust-devised film, 'Ask Me', highlighting the importance of asking service users about feeling safe at every contact. The Trust also developed a perpetrator toolkit available for staff working with perpetrators of domestic abuse.
- The development of a suite of leaflets for staff and service users related to non-recent abuse disclosures.

During the year we have also undertaken a review of our structures and process to ensure safeguarding remains high priority and high quality. Oversight of our safeguarding activity continues to be maintained via our Trust-wide Safeguarding Strategic Group, with assurance provided via our annual report to the Trust's Board of Directors. The full 2018 – 19 report is available on our website.

East Midlands Ambulance Service: During 18-19 EMAS received 1,283, 919 Emergency 999 calls. This included calls from other emergency services, 111 transfers, health and social care and the general public. EMAS staff recognised and responded to safeguarding concerns in 1.74 % of all 999 calls and 2.7% of all clinical responses. EMAS continues to work in partnership to safeguard patients, families, the public and staff and are assured they have processes in place to protect those being abused or at risk of abuse.

EMAS has a safeguarding training programme that takes account of both legislative duties and national guidance such as the new intercollegiate document and includes issues such as Prevent, FGM, Child Sexual Exploitation and Domestic Violence & Abuse. Training is delivered in a variety of ways, including face-to-face, workbook and e-learning over a three-year rolling programme, with more senior staff receiving additional training. At the end of 18-19, EMAS were 93% compliant for safeguarding education. Staff also completed the online Workshop to Raise Awareness of Prevent (WRAP) as well as training on coercion and control.

During the year, a bespoke face-to-face safeguarding package for newly qualified paramedics was launched and well received. At the same time, EMAS's 'Understanding Safeguarding' guidance was updated and expanded and will form the basis for staff education in 2019-2020.

The safeguarding team produce regular staff communications on a variety of topics, including SARs, domestic violence awareness month and anti-slavery day, all intended to drive home the message that safeguarding is 'everybody's business'. Numerous ways are utilised to do this including payslips, e-news articles, case studies, station posters and clinical and desktop bulletins. Moving into 2019-2020, the team are considering developing the use of social media.

Safeguarding sits within the Director of Quality and Nursing's portfolio and forms part of the quality strategy. There are clear links from the frontline to board with multiple reporting mechanisms. The safeguarding team developed two audit tools this year to assure quality of service and staff adherence to procedures. They identified that more

staff learning was required in order to produce high-quality referrals, though this was expected given operational changes in 2018. Since the audits, quality has risen, though the introduction of a bespoke 'how to make a good referral' pack should improve figures further. The audits also showed high compliance across the trust with the strongest showings in assessing capacity (95%), managing self-neglecting patients (93%) and recognition of historic assaults and vulnerability (93%).

In October 2018, the team responded to a challenge visit by commissioners, who recognised that EMAS continued to engage with the safeguarding adults' agenda.

Nottingham City Adult Social Care: ASC continues to face increasing demands and pressures associated with the impact of austerity and budgetary pressures. In 2018/19 we identified the top five risks likely to impact upon citizens: 1) An increase in safeguarding referrals of over 17% from last year, with a corresponding increase in case complexity. 2) High demand upon homecare, with quality and capacity issues in the market. 3) potential oversupply of residential care home provision as the 'Better Lives Better Outcomes' strategy supports people to live more independently. 4) Increasing demand from citizens with complex and enduring mental health needs, including the need to provide Mental Health Act assessments. 5) Identifying suitable 'Transforming Care' accommodation for those citizens with a learning disability and/or autism living in institutional settings.

ASC mitigated against the first risk by employing an additional social worker in the Safeguarding team, as well as monitoring data to identify themes. A Homecare Capacity Planning Board, chaired by the Director for Quality & Change, has been established to address the homecare capacity and quality issue, while a working group has been set up to review how care home provision is contracted and commissioned. ASC welcomes the Integrated Care System 'Mental Health & Social Care' strategy, and looks forward to working in partnership to see improvement in mental health provision, whilst ASC are committed to working with Health to support citizens with learning disabilities live in settings that are more appropriate. Finally, ASC are also awaiting the outcome from NHSE of a capital funding bid to build an enhanced Supported Living facility for Nottingham citizens

In 2018, ASC launched its 'Better Lives, Better Outcomes' strategy with a vision to enable older and disabled citizens, including those with mental health needs, live as independently as possible. Part of this approach is our 'Community Together Surgeries', now situated in five community localities. The purpose of the surgeries is to offer citizens and carers a face to face 'good life conversation' whereby advice, signposting or support can be given, which could also include a Care Act compliant assessment. Such an approach assists with early intervention if Safeguarding concerns are detected.

Modern Day Slavery is an increasing area of focus for the City Safeguarding Team, who now participate in monthly meetings led by the Modern Day Slavery police team. Whilst in 2018, and in conjunction with Equation, a specialist domestic abuse practitioner's forum was established.

The Adult Safeguarding Quality Assurance Team (ASQA) remains responsible for leading on adult safeguarding investigations in regulated services, as well as chairing

the Provider Investigation Procedure (PiP). In 2018/19, twenty individual care homes and home care services in Nottingham were subject to formal PiPs, a 55% increase from 17/18.

Making Safeguarding Personal remains at the heart of our Safeguarding practice, and we are proud to report that we maintain the highest standards in working with citizens to achieve their desired outcomes. Of the 1,255 citizens who were able or willing to express a desired outcome, 86.7% of such outcomes were fully or partially achieved.

Community Protection: Community Protection has a wide range of regulatory responsibilities that support and enable the community. All colleagues undertake safeguarding training and through their daily work recognise and support citizens that are vulnerable. The range of response activity is large and can include bringing people together, responding to noise, warm and well checks, dealing with hoarding, making sure trades such as taxi drivers have safeguarding training and much more. The information below provides key highlights:

Community Protection is legally responsible for the regulation of private rented housing. Such regulation not only ensures that landlords maintain quality housing but also that adults potentially at risk are effectively engaged. Selective and existing housing licensing arrangements now mean that 90% of Nottingham's private rented housing is subject to licensing. As victims of modern slavery require accommodation, this is key to ensuring there is no place for exploitation in the city. Frontline staff from our Community Protection, Licensing, Housing, Food Safety, Environmental Health, Trading Standards and ASB teams have all received training to enable them to spot tell-tale signs and refer on concerns. Where court action is taken in relation to tenancy related behaviour, an Equality Impact Assessment is undertaken to ensure that the person is not discriminated against and that action taken is proportionate.

In relation to the work of the Modern Day Slavery team – one of six pilot schemes nationally - recent cases have highlighted cause for concern around victims remaining 'unseen' to services, falling between services or not being eligible. Cases had been passed to the team because frontline colleagues were unsure of the modern day slavery pathway. Similarly, there remains a concern that cases of possible exploitation may not be readily identified due to their relative scarcity and colleagues' unfamiliarity with the likely indicators. In response, the team broadened its remit and began triaging cases referred by safeguarding professionals. Within two weeks, 14 referrals were received. Multiple arrests have followed and several people were safely brought out of exploitative situations amounting to modern slavery. One of these cases was referred and accepted as a SAR by the Safeguarding Adults Board.

In respect of training, Modern Slavery e-learning is now available for all Council colleagues. Additionally, Community Protection undertook to deliver training for staff and partner agencies, with over 30 training sessions delivered between March 2017 and late 2019 and attended by over 900 staff and volunteers from statutory and third sector agencies.

Following legislative requirements under the Counter-Terrorism and Security Act 2015, Community Protection established 'Channel Panels' to assess the extent to which identified individuals were vulnerable to being drawn into terrorism (the 'Prevent'

duty). There is now a single Channel Panel for Nottingham and Nottinghamshire, with the Cohesion Service supporting delivery of a partnership plan for Prevent, including training for colleagues and support for faith organisations in improving their safeguarding practices.

During 18-19 there continued to be identified rough sleepers in Nottingham City. Measures taken to support these individuals included 1) Severe Weather Emergency Planning to offer accommodation to rough sleepers to prevent death by exposure. 2) Street outreach nurse and Framework staff visiting individuals daily to provide primary care on the streets. 3) Nottingham Recovery Network outreach workers supporting people into substance misuse treatment. 4) Rough sleepers receiving daily welfare checks, with weekly multi-agency meetings to discuss the most vulnerable, including those identified as potentially at risk of suicide.

The Community Protection Anti-Social Behaviour service continues to deal with victims, witnesses and perpetrators who have safeguarding issues. The service trains officers to encourage professional curiosity, be victim led and provide pathways to reduce risk or harm to individuals and families. The Service also makes referrals to a number of specialist panels and multi-agency case meetings.

Nottingham City Trading Standards officers continue to engage in a range of prevention work and frequently attend events to advise and educate adults on the dangers of scams and doorstep crime as well as matters such as safe loans and traders. Call blockers are installed in the homes of vulnerable adults to prevent scam calls and, when the team is aware of a doorstep incident having taken place, warning leaflets are distributed to homes in the surrounding area as well as in response to the incident itself. Trading Standards also work with police colleagues to tackle knife crime, primarily via underage test purchases and working with shops to reduce the availability of knives.

Nottingham University Hospitals Trust: NUH ensures that the safety and wellbeing of adults at risk is at the core of everything it does, with detection and prevention of abuse within the role of all clinical teams.

At NUH, we have a dedicated team of safeguarding professionals, including a Head of Safeguarding, Named Safeguarding Doctors, Nurses, Midwives, an Adult Safeguarding Lead and specialist nurses for adult and children's safeguarding and domestic abuse. The Executive lead for Safeguarding is the Chief Nurse. NUH also has robust governance processes in place, including a quarterly Safeguarding Adults Committee meeting, whilst the Trust Board receives an annual Safeguarding Report.

All NUH staff receive annual mandatory safeguarding training. This continues to be a face-to-face interactive session and receives positive feedback. In 2018-19, the Trust committed to delivering 'Think Family' safeguarding training, focusing on modern slavery, domestic abuse and coercion and control. By the end of March 2019, mandatory training was at 87%, just slightly below the Trust target of 90%. We can also report that at year's end we were 85% compliant with level 3 Prevent training, achieving the NHSE target.

In addition to mandatory training, the safeguarding team delivered tailored courses on a variety of safeguarding topics including a new programme of safeguarding supervision to the Emergency Department, which was well received.

The Trust has 70 safeguarding champions, covering each division, who give advice and support in relation to safeguarding and who can be identified by their 'safeguarding champion' lanyards. In 2018, two Safeguarding Champions' forums took place covering topics such as FGM, domestic abuse, mental health and self-neglect.

The Trust's IT system alerts staff when patients with Learning Disabilities (LD) might need extra input and/or reasonable adjustments to be made. This alert is also sent directly to the specialist team of LD nurses. For patients with dementia, the 'About Me' document can be completed to better identify their care plan needs. NUH also has a safeguarding adults intranet site that holds a variety of information, including a virtual staff resource folder and safeguarding newsletters from both NUH and the Boards.

All deaths of patients with an LD at NUH are subject to a Structured Judgement case review by the Named Doctor for safeguarding and a LD specialist nurse. All deaths are reviewed prior to referring to LeDeR, which is something NUH have undertaken for the last three years, before mandatory LeDeR reporting was introduced.

The CQC inspected NUH In 2018, rating the organisation as 'good' overall and 'outstanding' in caring, with the report commenting that 'without exception, staff told us that safeguarding was given the highest priority'. Although the CQC did report a lack of organisational consistency in application of the Mental Capacity Act, a Trust wide audit to identify good practice areas and those requiring improvement is planned. More positively, in the annual 'Safety of Vulnerable Patient' benchmark, an audit which assesses staff understanding and response to types of abuse, mental capacity and Deprivation of Liberty Safeguards (DoLs), 93% for all areas of the audit were assessed as green.

During 18-19, NUH made 112 referrals to Nottingham City Local Authority, an increase from last year and reflecting the year on year increase in calls to the team, which rose from 1124 in 16-17 to 3695 in 18-19. The team have also been working with colleagues from Nottingham City LA to ensure consistency in s.42 enquiries and have arranged to offer an alternative route of investigation, such as complaint, where appropriate. Finally, MSP remains a core principle at NUH, with all non-urgent safeguarding referrals passing through the team for quality assurance, with MSP and the outcomes the individual would like from the referral strongly focussed upon.

8. Strategic Priorities

The Board had four strategic priorities for 2018-19. These were:

1. **Prevention:** To promote effective strategies of preventing abuse and neglect and to ensure that there is a proactive framework of risk management.
2. **Assurance:** The development and implementation of robust mechanisms of quality assurance which are used to monitor the effectiveness of local

safeguarding adults' arrangements and that Serious Adult Reviews (SARs) are undertaken for any cases meeting the criteria outlined by the Care Act 2014.

3. **Making safeguarding personal:** To promote person-centred and outcome focussed practice.
4. **Board performance and capacity:** To ensure that the Board has full engagement from relevant partners, is sufficiently resourced and that adequate arrangements are in place that enable it to discharge its responsibilities.

9. What the Board achieved

The Annual Action Plan for 18-19 was based on these four strategic priorities and the Board successfully achieved the following:

- Re-distributed posters to public places and care homes to raise awareness of safeguarding.
- Placed adverts about how to safeguard adults in 'The Arrow' newspaper.
- Hosted two free training sessions on spotting and dealing with financial abuse led by an experienced solicitor.
- Approved the new Performance Assurance Tool as an alternative way for partner agencies to report their contributions to the Board.
- Completed the joint review with Nottinghamshire SAB of the SAR procedure.
- Substantially implemented the 2017/18 SAR Action plans.
- Continued to liaise with Nottingham City Safeguarding Children Board and the Crime & Drug Partnership to share learning across SCRs, SARs and DHRs.
- Began piloting the 'Complex Case Review' procedure – a 'light touch, non-mandatory SAR' process' - with two cases.
- Began implementation of the 'Quality Assurance Framework' to improve the quality of safeguarding data reviewed by the Board.
- Revised and re-launched the Joint City & County Safeguarding Policy and Procedures.
- Received assurance from ASC & the CCG that partnership arrangements remain in place to safeguard adult residents of Nottingham care homes.

- Continued to attend and contribute to the East Midlands Safeguarding Adults Network (EMSAN).
- Established links with the regional DfE Educational PREVENT Co-ordinator.
- Reviewed arrangements in place following the implementation of the 2017 Homelessness Reduction Act.
- Confirmed that all partner agencies either already have or will be including adult safeguarding in their Equality Impact Assessments.
- Received assurance from the commissioned advocacy provider about the efficacy of their services and arranged for an annual update.
- Refreshed membership of the Board's three subgroups, taking the opportunity to establish links with the University of Nottingham.
- Received assurance that agencies are fully co-operating with the Independent Inquiry into Child Sexual Abuse (IICSA) Review.
- Refreshed the Nottingham City SAB webpages.
- Received assurance reports from our partners on the following 'cross cutting' themes: Housing & homelessness, Prevent, Modern Slavery, FGM, DSVAs, & Suicide Prevention.
- Received assurance from Board partners that measures to mitigate against the challenges of austerity have been successfully implemented.
- Improved linkage with the voluntary sector by providing Board representation at the Vulnerable Adults Provider Network meetings.
- Continued to contribute to and monitor the regional Making Safeguarding Personal questions launched by EMSAN.
- Received assurance from ASC that they undertook more community and residential reviews than last year and remain committed to targeting those most in need.
- Received assurance that HMP Nottingham continues to work to safeguard those adults at risk in its care.
- Received assurance that partner agencies who have undergone a regulatory inspection have action plans in place addressing the priority areas identified.
- Promoted Nottinghamshire Fire & Rescue's CHARLIE campaign.

- Received the Health Watch survey on public awareness of safeguarding.
- Received assurance that ASC continue to triage outstanding DoLS cases in accordance with ADASS (Association of Directors of Adult Social Services) recommendations.
- Received assurance from Nottinghamshire Healthcare NHS Foundation Trust that the local LeDeR response is on schedule.
- Continued to monitor the number of s42 referrals received by ASC on a quarterly basis.
- Agreed the Board budget for 2019/20.
- Written, distributed and presented the Board's Annual Report to the Council's 'Health & wellbeing Board' and 'Oversight & Scrutiny Committee'.

Case study

'C' was a mother and long-term patient on Neonatal Intensive Care Unit (NICU) who gave birth to an extremely premature baby ('D'). Throughout 'C's' stay, she developed a close relationship with staff and disclosed significant domestic abuse between herself and her ex-partner, the father of 'D'. A DASH-RIC was completed and appropriately escalated to MARAC with her consent.

'C' recognised the need to act as a protective factor for 'D' and agreed to support. NICU staff alerted the safeguarding team and a member of the team met with 'C' and a family care sister to discuss her options, including informing police and social care of the latest episodes of abuse. Unfortunately, 'D' passed away but throughout his stay on NICU, 'C' was clear that she wanted his father to visit and be given the opportunity to say goodbye to 'D'. 'C', NICU and social care staff all worked together to ensure this could be facilitated in line with 'C's' wishes, whilst being mindful of the potential for further coercion and control which 'C' had likely been subject to, whilst maintaining the safety of 'C', 'D', and other families on NICU.

10. What next for 2019 – 2020?

As well as continuing the core business of the Board, it was agreed that attention be given to local and nationally emerging themes. Accordingly, next year the Board will seek to improve co-ordination between statutory and voluntary organisations involved in adult safeguarding, implement actions arising from the IICSA report, explore how best to safeguard young adults transitioning from care who may be vulnerable to exploitation and seek assurance on local approaches to homelessness and rough sleeping. Internally, the Board will ask partner agencies that their recruitment processes take account of adult safeguarding. It will likewise seek assurance that the ICS partnership incorporates adult safeguarding in its work streams as well as confirming that Board partners can continue to respond effectively to the challenges

brought about by austerity. Lastly, the Board will look to deliver an alternative reporting tool to that of the Safeguarding Accountability & Assurance Framework and improve its communications and engagement strategy.

11. And finally...

A special mention must go to Malcolm Dillon, who retired at the end of March 2019 after four years as the Board's Independent Chair. His calm but authoritative manner and clear vision at both operational and strategic level is missed by all, and he is to be congratulated on steering the Board through some challenging times whilst remaining committed to effective, multi-agency safeguarding for adults at risk.

12. Reporting Abuse

You may know the person that is carrying out abuse and are worried about reporting them. If you are being abused, you do not have to put up with it. If someone you know is being abused, or you have a concern that they may be, you should first make sure that they are safe if it is possible to do so.

Tell someone you trust or call Nottingham City Health and Care Point on **0300 1310 300 and select option 2**. Our offices are open from 8am to 6pm. If you live within County boundaries call Nottinghamshire County Council on **0300 500 8080**. If unsure which, call any one of the numbers and report what is happening to you or the person you are concerned about.

If it is an emergency, dial 999

You can report abuse to us in the strictest confidence and your identity can be kept private.

13. Glossary of Terms

ASC	Adult Social Care
CCG	Clinical Commissioning Group
CHARLIE	Care and support needs, Hoarding & mental health issues, Alcohol & medication, Reduced mobility, Lives alone, Inappropriate smoking, Elderly
DHR	Domestic Homicide Review
DoLS	Deprivation of Liberty Safeguards
EMAS	East Midlands Ambulance Service
EMSAN	East Midlands Safeguarding Adults Network
FGM	Female Genital Mutilation
ICS	Integrated Care System
IICSA	Independent Inquiry into Child Sexual Abuse
LD	Learning disabilities
LeDeR	Learning Disability Mortality Review
MAPPA	Multi Agency Public Protection Arrangement
MARAC	Multi Agency Risk Assessment Conference
MSP	Making Safeguarding Personal
NHSE	National Health Service England
NICU	Neonatal Intensive Care Unit
NUH	Nottingham University Hospitals NHS Trust
PiP	Provider Investigation Procedure
SAB	Safeguarding Adults Board
SAR	Safeguarding Adults Review
SCR	Serious Case Review
VAPN	Vulnerable Adults Provider Network