

Camden Safeguarding Adults Partnership Board Annual Report 2018/19

“Safeguarding is everybody's business”



Royal Free London
NHS Foundation Trust



Central and North West London
NHS Foundation Trust

Camden and Islington
NHS Foundation Trust



Camden
Clinical Commissioning Group

University College
London Hospitals
NHS Foundation Trust

The Tavistock and Portman
NHS Foundation Trust

London Ambulance Service
NHS Trust



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Who do I contact if I think someone is being abused?

If you are worried that an adult is at risk of or is experiencing abuse, neglect or exploitation in Camden, call:

Adult social care, Camden Council

Phone: **020 7974 4000** (9am to 5pm)
or **020 7974 4444** (out of hours)

Textphone: **020 7974 6866**

If you believe a crime may have been committed contact:

Camden Police Community Safety
unit on 101.

If immediate help is needed from one of the emergency services call **999**.

If you are a member of the public or resident in Camden you can contact us anonymously to raise your concerns.

Message from the Independent Chair



I am pleased to be introducing the Annual Report for 2018/19 which was the first year of our current three year strategy. This is the third annual report in my tenure as Chair of Camden SAPB. This report seeks to capture the actions of the Board's partner organisations and the work of the Board's sub groups to progress the wellbeing and safety of the adults at risk. I hope it will inform all interested partners and residents who share this commitment.

Our Board is composed of a diverse group of partner providers in the health, care, justice, housing, voluntary and emergency

services who engage with adults in need.

The Board has welcomed a number of new members and thanked departing members for their contributions to its safeguarding endeavours.

With training and awareness raising, we seek to encourage people to raise their safeguarding concerns and indeed the number of referrals remains high and is increasing. Nationally, there remains fragility in the care home and domiciliary care sectors related to intense funding pressures. Locally, Health and Social Care Commissioners are continuing to monitor regularly the safeguarding practices of these providers. The Board approved two procedures to guide partner responses. When required, incidents of concern are investigated and follow up actions monitored. All in leadership positions need to redouble their lobbying of Central Government to act with urgency to produce their policy for Social Care, which has been repeatedly delayed, directly impacting upon the safety of our most vulnerable citizen. Through presentations and workshops, the Board was informed of community safety concerns such as sexual safety in mental health settings and homelessness.

An event was held by Camden Carers Centre in which specialist officers from the Metropolitan Police raised awareness about financial exploitation

and scams. In addition to its own Challenge Event in March 2019 setting the board's priorities for 2019/20, it participated in the North Central London challenge event exploring Homelessness and safeguarding. The Board was briefed on the Mental Capacity Act (Amendment) Bill now passed into law.

On behalf of all Board partners, I would like to thank the chairs of our Board sub groups for progressing the range of activities covered in this report. In this year, we have strengthened the work of our Serious Adult Review (SAR) Sub Group. We published the SAR which identified improvements in care and support to Adult 'W' and the action plan arising is being monitored. The Board challenged itself on the delays to establish an inter board task & finish group for Training and Cultural Improvement.

The Board is currently in the second year of its three-year strategy from 2018-21. In the last quarter of the year, we reviewed our priorities at a Board challenge event and workshop with the four Boards serving North Central London. There will be a renewed focus on improving responses to people at risk of homelessness or living on the streets. We will focus on supporting those young adults aged 16 plus who are vulnerable to financial and sexual exploitation and gang related activities.

Our thanks go to our Board Manager, Fatima Fernandes, who supports all the work of the Board. Thanks too to the Council and Health commissioners who continue to resource the Board's work.

The Board is grateful to committed staff and members of the public who raise their concerns so that these can be checked. Ultimately, securing the highest levels of safety for vulnerable adults relies on vigilance by all in our community.

James A. Reilly

Independent Chair,
Camden Safeguarding Adults Partnership Board

Introduction to the Camden Safeguarding Adults Partnership Board Annual Report 2018/19

The Care Act 2014 (The Care Act) sets out a clear legal framework for how local authorities and other parts of the system should protect adults with care and support needs (referred to as ‘adults’ hereafter in this report). In doing so, the Board strives to achieve for people to be able to live a life free from harm in communities that are intolerant of abuse, work together to prevent abuse and know what to do when it happens.

Camden Safeguarding Adults Partnership Board (SAPB or “the Board”) is a multi-agency partnership group, which was established before there was a duty for it to become a statutory body under The Care Act with a responsibility to deliver against a number of core duties.

At the end of each financial year, the Board must publish an annual report, which provides an overview of its achievements over the last 12 months. This annual report talks about what the Board and individual organisations have done to reduce the risk of experiencing abuse or neglect for people with care and support needs in Camden. This provides a picture of who is safeguarded in Camden, in what circumstances and why. It also presents the profile of safeguarding adults in Camden for 2018 to 2019 and describes the work of our sub-committees and of the High Risk Panel.

A key challenge for Safeguarding Adult Boards is to consider when multi-agency work appears not to be working. The Safeguarding Adult Reviews (SARs) we commissioned over the last year look at how we can work more effectively together. At a regional level, the Board learnt from the London Review of SARs. Many reflect local learning on the sharing of information, mental capacity assessments, professional curiosity and tenacity. Another concern for the SAPB in ensuring residents are safeguarded is in the area of commissioning of local services.

There continues to be significant pressures on partners in terms of resources and capacity, so we want to thank all partners and those who have engaged in the work of the Board for their considerable time and effort.

The report must set out what we have done during the last year to safeguard adults with care and support needs in Camden. This annual report tells you:

- the profile of adult safeguarding in 2018/2019
- what each partner agency has done to help deliver our safeguarding strategy
- what each of our sub-groups and the High Risk Panel has done
- drafting of the new SAPB Safeguarding Strategy 2018-2021
- next steps for the 12 months ahead

As required by the Care Act, a copy will also be sent to:-

- the Chief Executive and the Leader of Camden Council
- the Borough Commander for Camden of the Metropolitan Police Service
- the Director of [HealthWatch](#) Camden; and
- the Chair of Camden’s [Health and Wellbeing Board](#).

The Board would encourage those organisations to fully consider the contents of our annual report and reflect on how they can improve safeguarding in their own organisations, networks and via this Partnership Board.

Introduction to Camden Safeguarding Adults Partnership Board

The Board is a statutory body, which is a partnership of statutory and non-statutory organisations and met on a quarterly basis during 2018/2019. SAPBs must have certain agencies in their membership, with core statutory partner agencies defined as the local authority, police and the NHS. Camden SAPB has always had a strong focus on partnership working and currently has the following member organisations:



- Camden Council: Adult Social Care, Housing, Community Safety, Integrated Commissioning
- Camden Clinical Commissioning Group
- Metropolitan Police Service (Camden)
- Camden & Islington Cluster National Probation Service
- London Community Rehabilitation Company
- London Ambulance Service NHS Trust
- Camden and Islington Mental Health NHS Foundation Trust
- Central and North West London NHS Foundation Trust
- Royal Free London NHS Foundation Trust
- University College London Hospitals NHS Foundation Trust
- Tavistock and Portman NHS Foundation Trust
- London Fire Brigade (Camden)
- Voluntary sector organisations – Age UK (Camden), Hopscotch Asian Women's Centre, Camden Carers Centre, Camden People First
- Great Ormond Street Hospital NHS Trust
- James Reilly, Independent Chair of Camden SAPB

Each organisation sends a nominated senior staff member to attend the Board as their “Board member”. The main funders of the Board were Camden Council with Metropolitan Police in Camden and Camden Fire Brigade making contributions too.

The Board continues to work with partners to embed the requirements of the overarching The Care Act to:

- Assure that local safeguarding arrangements are in place as defined by the Act
- Prevent abuse and neglect where possible
- Provide timely and proportionate responses when abuse or neglect is likely or has occurred

The legal framework for the Care Act is supported by statutory guidance which provides information and guidance on how the Care Act works in practice. The guidance has statutory status which means there is a legal duty to have regard to it when working with adults with care and support needs and carers.

SAPBs have three core duties, they must:

- Publish an annual report
- Develop and publish an Annual Strategic Plan setting out how they will meet their strategic objectives and how their members and partner agencies will contribute
- Arrange safeguarding adults reviews for any cases which meet the criteria for such enquires, detailing the findings of any safeguarding adult review and subsequent action

The main vision and objective for the Board is to assure itself that effective local adult safeguarding arrangements are in place and that all partners act to help and protect people with care and support needs in Camden.

Board Funding

The funding of the Board remains an issue.

This year the Board received total contributions of £90,378 of which the London Fire Brigade contribution was £5,000 and the Metropolitan Police contribution was £5,000. The remainder of the funding came from the London Borough of Camden.

Staffing cost, (independent chairing and board management) made up the majority of our expenditure for 2018/19. Further costs related to conducting a SAR and publishing the annual report.

The funding of the Board clearly is still a matter of concern. The Chair has raised with partners the issue of the financial burden for the Board budget falling disproportionately upon the Local Authority.

In last year’s annual report, it was made clear that such a funding arrangement does not necessarily reflect the multi-agency constitution of the Board or the partnership working that is required of effective adult safeguarding arrangements across our communities and that this can be better promoted and secured by financial contributions from across the partnership.

Negotiations on funding matters continue without a resolve but the Chair will pursue the discussions aiming for a good outcome.

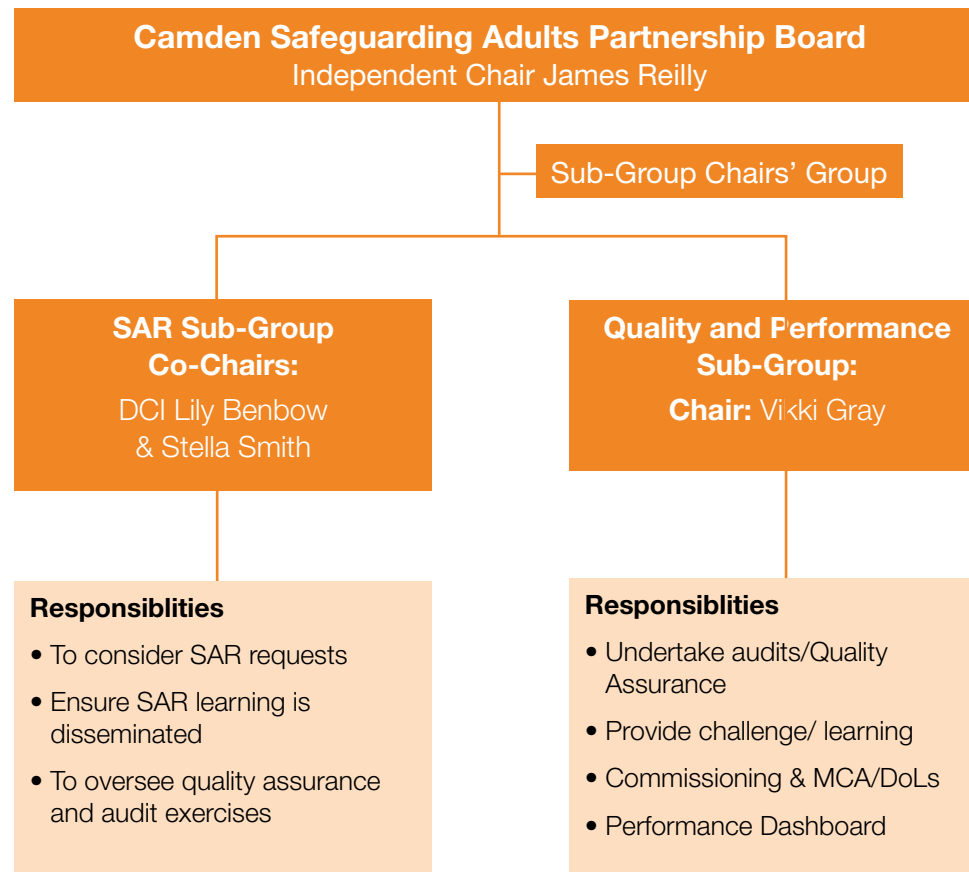
Currently, apart from the Board Manager, there is no additional support for the Board. We will be recruiting a board administrator, as it is proving difficult to sustain all of the functions of the Board and the sub groups without additional support.

Board Resources

The Board is supported by sub-groups that do some of the day-to-day work, which helps deliver the safeguarding strategy. The sub-groups monitor quality and standards, instigate reviews of serious incidents and develop guidelines. They can set up short-life task and finish groups to help them achieve these things.

The Board makes sure that there are strong adult safeguarding policies and processes in place. We check that all organisations are signed up to them and that they are working well to protect people from abuse and neglect. Organisations are committed to working together to improve the well-being of adults in the borough. The Board supports the work of each organisation by looking at audits or inspection findings from partner agencies and by challenging organisations to complete self-audits of their safeguarding arrangements, then supporting them to develop action plans.

Camden Safeguarding Adults Partnership Board



What is safeguarding adults?

Safeguarding adults means protecting an adult to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect. At the same time, it is essential that we make sure the person's views, wishes, feelings and beliefs are a key part of deciding any action.

The legal framework for safeguarding adults work is set out by the Care Act. Safeguarding involves:

- People and organisations working together;
- Preventing abuse or neglect from happening in the first place;
- Stopping abuse and neglect where it is taking place;
- Protecting an adult in line with their views, wishes, feelings and beliefs;
- Empowering adults to keep themselves safe in the future; and,
- Everyone taking responsibility for reporting suspected abuse or neglect.

What is abuse?

Abuse is when someone treats an adult in a way that harms, hurts or exploits them. It can take many forms – ranging from shouting at someone or undermining their confidence and self-worth, to causing physical pain, suffering and even death. There are different categories of abuse outlined in the Care Act: physical, sexual, domestic, psychological, financial and material, neglect, self-neglect, discriminatory, organisational and modern slavery. Abuse can happen just once or many times; it can be done on purpose or by someone who may not realise they are doing it. It can happen anywhere including at home, in care homes or in day care centres or hospitals.

Who is an adult at risk?

Safeguarding adults applies to someone who is over 18 years of age who, because of their care and support needs, may not be able to protect themselves from abuse, neglect or exploitation. Their care and support needs may be due to a mental, sensory or physical disability; age, frailty or illness; a learning disability; substance misuse; or an unpaid role as a formal/informal carer for a family member or friend. More information is available from the Board's website at <https://www.camden.gov.uk/safeguarding-adults>

Priority 1 – Empowerment

What it means:

“I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens.”

Our goals:

- Keep the person at the centre and work holistically
- Make information and advice more accessible
- Raise awareness of scams, fraud and financial abuse

Priority 4 – Protection

What it means:

“I get help and support to report abuse and neglect. I get help to take part in the safeguarding process to the extent to which I want.”

Our goals:

- Help communities and families to actively report abuse
- Equip staff and volunteers to protect people
- Equip the voluntary/ community sector as active members of the Board.

Priority 2 – Prevention

What it means:

“I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help.”

Our goals:

- Make information on protecting yourself available
- Reduce situations in which people can be abused
- Identify quality of care issues early to prevent abuse



Priority 5 – Partnership

What it means:

“I am confident professionals will work together, with me and my network, to get the best result for me... only sharing personal information if helpful and necessary.”

Our goals:

- Help all partners identify and report abuse
- Share the right information at right time with right people
- Give feedback to people who report concerns

Priority 3 – Proportionality

What it means:

“I am sure professionals will work in my best interests as I see them, and will only get involved as much as needed.”

Our goals:

- Identify and deal with the risks people face
- Respect people's rights, helping them find solutions
- Respond to self-neglect appropriately
- Improve how we consider and assess issues of capacity

Priority 6 – Accountability

What it means:

“I understand the role of everyone involved in my life and so do they.”

Our goals:

- Help more victims to get a positive outcome
- Use trends in quality of care to prevent abuse
- Encourage a learning culture, not a blame culture
- Use more data to quality assure safeguarding services
- Involve adults, families and carers in quality assurance

What have we looked at as a Board in 2018/19?

Consultation and publishing of the new Safeguarding Adults Partnership Board Strategy 2018/2021

The SAPB published its Safeguarding Adults Strategy 2018/ 2021 in line with our statutory duties under the Care Act.

The Strategy outlines our ambitions for safeguarding in Camden, focused on the difference that the involvement of all partner agencies can make to outcomes for adults in our borough. It sets out the areas our boards will focus on over the next three years to improve how we prevent abuse, help and protect adults and promote wellbeing.

The Board will continue its vision to improve how safe people feel and are from abuse. It is committed to helping adults, their carers, the public and professionals to work together to make Camden a place where adults can enjoy their right to live free from neglect and exploitation.

Together with our North Central London (NCL) partners (Islington, Haringey, Enfield, Barnet Boards) we looked at ways to improve practice and to align some of our priorities.

In preparation for the strategy, a focus group of service users, carers and professionals co-produced the consultation survey questions which included people with learning disabilities

and people with sensory disabilities. We separated surveys (one for professionals and one for the public) and used an online survey tool to collate responses.

In Camden, we deliberately reached out to hear the views of people who we know might not use on line methods. We did this by holding two separate meetings with Camden Carers and with Hopscotch Asian Women's Centre.

We got to hear at first-hand what their issues and concerns were.

Feedback was also received from a variety of ways: NCL Board Chairs and Board Managers meetings, information that has come to the Board throughout the year, through face to face engagement events, speaking with adults at risk that live within the borough as well as carers that look after them, intelligence and performance data, challenge and support events, self-audits, feedback from residents, findings from case reviews, findings from London SARs report and the Making Safeguarding Personal programme.

The evidence base for developing the priorities has therefore been far-reaching and varied.

An overview from the Care Quality Commission (CQC) of the state of health and social care in Camden

The Board asked CQC for an overview of the state of care in Camden. This year CQC has continued to find that most people are receiving good quality care and that standards have been maintained. Where there have been concerns local systems work together to share information and knowledge and to address matters when needed. Where there is the need for improvement, the issues are known to relevant agencies and plans have been made to work with providers to improve. CQC has introduced a new style shorter inspection report format which provides a plain English style report highlighting the main inspection findings. The CQC Local Authority Area Data profiles have been updated and are available on the CQC website. These bring together information about health care as well as adult social care in each local authority. CQC has also produced a report about Oral healthcare in care homes and interim findings from a review of restrictive interventions in care settings providing care for people with mental health problems, a learning disability and / or autism.



North Central London (NCL) Challenge Event

Members of the Board attended this annual challenge event, which took place on 12 December 2019. It was hosted by our NCL colleagues from Barnet Council.

The event included a presentation on homelessness and safeguarding, NCL progress from 2017, progress and challenge and sector group discussions.

Prior to the event, all board partner organisations were asked to complete the updated NHS England Board audit tool otherwise known as SARAT (Safeguarding Adults At Risk Audit Tool) which has been developed by the London Chairs of Safeguarding Adults Boards (SABs) network and NHS England London. It reflects statutory guidance and best practice. Partners used their completed Board audit forms to challenge and discuss progress with their counterparts in the NCL boroughs. Discussion took place on the challenges that the Board faced and how learning from each other and information sharing could be achieved.

There were a few differences to the audit tool from previous versions:

- an additional section was added which relates to learning from SARs.

- voluntary & non statutory board members were asked to complete a different SARAT questionnaire. This was specifically geared to their line of work. It was developed and shared by NCL colleagues in response to concerns that the core SARAT was not appropriate for voluntary and non-statutory Board members.

The purpose of the tool is to provide the SAPB with an overview of the Safeguarding Adult arrangements that are in place across the locality identifying what is working well and the areas that need improving.

Camden SAPB Challenge Event March 2019

This is Camden SAPB's local challenge event. It is a peer review aimed at assisting each other as partners to develop our levels of assurance and improvement and to assist the Board in identifying priorities for our action plan over the next twelve months.

Partners were split into groups and each member discussed an area of strength and an area for improvement from the SARAT and considered how they could align it with the Board delivery plan.

Partners were also asked to think about their role/contribution as a board member.

Two thirds of the attendees who completed the feedback questionnaire said that the event was very useful.



Multi-Agency Safeguarding Hub (MASH)

Camden Adults MASH continues to demonstrate the key benefits of partnership working with regards to safeguarding adults. MASH has strengthened its relationship with key stakeholders further in the past 12 months. It continues to work closely with adult social care, mental health, health, police and housing colleagues. The majority of these staff are co-located at 5 Pancras Square, which benefits the review, triage and risk assessment of safeguarding concerns that come into MASH.

MASH shares information with stakeholders supported by a joint information sharing protocol and respond to concerns ensuring that we work in partnership to effectively safeguard and protect vulnerable adults at risk.

There have been emerging trends of increase in referrals since last year's annual report due to awareness raising of Camden's residents in reporting safeguarding concerns including neglect and financial scams. MASH has also experienced ongoing challenges in relation to concerns around Modern Slavery, Cuckooing, County Lines, homelessness, hostels, self-neglect and domestic abuse.

We are working closely with colleagues and partners including Camden Access and Response team, neighbourhood and hospital teams, Community Safety Team, Housing and Trading Standards. This has enabled MASH to

maintain a consistent screening approach to ensure proportionate responses are provided, establishing at the core of our work on Making Safeguarding Personal and a strengths-based approach.



Modern slavery and sexual exploitation

The Safeguarding Adults Board and Safeguarding Children's Boards work towards a co-ordinated approach to better address modern slavery and trafficking. This includes the sexual exploitation of children and adults at risk, and championing the role of public sector procurement in eliminating modern slavery from its supply chains. The previous year, a Modern Slavery Task and Finish Group was developed with professionals from Children and Adult services. The group aimed to ensure that guidance was in place to ensure effective collaborative working between these services when supporting potential victims of Modern Slavery. The group oversaw the development of the Adult Social Care Guidance for Modern Slavery, as well as the update of the interagency protocol for children. Both Boards were jointly involved in the planning of Camden's response to anti-slavery day in October 2018, with both Boards delivering training to over 100 partners on supporting victims of modern slavery. In addition, the group identified a number of Single Points of Contact (SPOCs) across Children Services, Adult Social Care, Integrated Youth

Service, Metropolitan Police, Community Safety and the NHS.

Voluntary Group Participation

The Board Chair was invited by Camden Carers Centre to speak at a meeting at their centre on issues around safeguarding for the carer and those that are cared for, best interests and financial safety. The discussion included experiences of the carers.

The Chair was accompanied by our partners from the Met police and Adult Social Care who gave Practical advice on financial safety and the work of the Best Interest Assessors.

The Camden SAPB Multi Agency Establishment Concerns Procedure (ECP)

In July 2018, the Board published the ECP procedure which is a framework for the management of enquiries into concerns involving actual or potential abuse or neglect of adults with care and support needs on an organisational scale within a regulated or contracted health or social care setting. This includes hospitals, Care Homes (residential and nursing homes), Supported Living, Domiciliary Care and Support Services.

The Camden SAPB Multi-Agency Escalation and Resolution Procedure

In 2018, the Board published its multi-agency Escalation and Resolution Procedure.

The Board is clear that there must be respectful challenge whenever a professional or agency has a concern about the action or inaction of another. Practitioners and managers should always be prepared to review decisions and plans with an open mind and act proportionately.

We believe that all professionals working with adults who have care and support needs must be able to challenge each other appropriately. When they believe that others are not working well together and, as a result, the adult remains at what is thought to be an unacceptable level of risk then escalation should take place.

It is every professional's responsibility to 'problem-solve'. The aim must be to resolve a professional disagreement at the earliest possible stage as swiftly as possible, always keeping in mind that the adult's safety and wellbeing is the paramount consideration. Professional disagreement is only dysfunctional if not resolved in a constructive and timely fashion.

During the course of the year, the Board had presentations from guest speakers on:

- Sexual safety within a mental health setting – presentation by Camden & Islington Mental Health NHS Foundation Trust (C&I)

It was highlighted to the Board that a study at C&I has shown that domestic and sexual violence are significant public health problems but the extent to which women and men with a severe mental illness are at risk of abuse in comparison to the general public is unknown.

- Working to reduce homelessness – presented by the Chief Executive of Pathways (Charity working with the NHS to improve healthcare for homeless people)

The Board was informed about the homeless in Camden and the pathways that are available to support them. It heard that most of the homeless are not Camden residents but are being supported by Camden. Pathways was developed at University College London Hospital in Camden and led by GP's which gives them the opportunity to explore the client's additional needs and potentially addressing the complex needs that arise from homelessness. The model has been developed and shared with other Trusts and internationally (Australia). The Board heard about the impact of multiple exclusions being explored to identify the accumulative impact on the client's health which increases their mortality rate 10 fold and that they age prematurely. The pathway team has a 16 month discharge process that supports the client to

better engage with services. It was noted that 70% of the clients do not have a connection with Camden but require support from Camden.

As a result of the presentation, Adult Social Care and Pathways are discussing how they can work closer together for better outcomes for the homeless.



Safeguarding Adults Reviews (SARs)

“Adult W” – In 2018/19, following the death of “Adult W”, the Board commissioned an independently-led review into the circumstances leading up to his death, the care he was receiving and how different agencies worked together to help him.

A number of changes and improvements have already been made by all of the agencies involved. This SAR took the form of a “Significant Events Analysis” and was attended by all agencies involved with the individual were invited so that learning could be shared. A number of changes and improvements have already been made by all of the agencies involved.

The Board will continue to work with the agencies involved to monitor the actions arising from this review and ensure that practices change as a result.

The Board approved the SAR report and it was published shortly afterwards. An action plan was produced and is being monitored by the SAR sub group.

“V V SAR” – In the latter part of 2018, the Board initiated this SAR. It was initially reviewed as part of the Learning Disability Mortality Review Programme (LeDeR). LeDeR is a national programme for reviewing the deaths of all people with learning disabilities. The SAR will take the form of a “Significant Events Analysis”. Work is underway to commission an independent chair/author to conduct this SAR, which is expected to take place in in 2019. Following the SAR, a report will be written and be presented to the Board for its approval and then published.



Making Safeguarding Personal (MSP)

Making Safeguarding Personal is a personalised approach that enables safeguarding to be carried out with the person at the centre of the process, shifting from just being consulted and listened to, to directing the course of the process as they deem fit. It involves ensuring that conversations are held and information provided in order to enable them to make the decisions they want for themselves and achieve their desired outcomes from the process.

There has been a number of audits completed, training provided and presentations made to ensure that workers are supporting clients to be empowered to express their outcomes and working with them from the beginning, ensuring that these outcomes are clarified and constantly re-evaluated throughout the process, in order to ensure that people are supported as far as possible to achieve the outcomes that they want.



LeDeR (Learning Disabilities Mortality Review Programme)

The LeDeR Programme consists of local reviews by health and social care professionals of deaths of people with learning disabilities aged 4 years upwards across England. In London, the reviews for all deaths began in December 2016. The LeDeR programme is supported by the University of Bristol and commissioned by the Healthcare Quality Improvement Partnership on behalf of NHS England. The overall aim of the programme is to drive improvement in the quality of health and social care services delivery and to help reduce premature mortality and health inequalities. The reviews aim to positively influence practice and policy by:

- Identifying the potentially avoidable contributory factors related to deaths of people with learning disabilities.

- Identifying variation and best practice in preventing premature mortality of people with learning disabilities.
- Developing action plans to make any necessary changes to health and social care service delivery for people with learning disabilities.

The Camden LeDeR steering group operates as a limb of the Safeguarding Adult Review subgroup of the Camden Safeguarding Adults Partnership Board and reports quarterly to Camden CCG and NHS England. Although not all reviews are safeguarding matters, the prevention principles of adult safeguarding set out in the Care Act 2014 focus not just on abuse or neglect but also the risk of abuse or neglect. However, 2 of the 13 deaths reviewed to date, raised concerns which met the threshold for a Safeguarding Adults Review, one of which has been published for Adult W and one for Adult V V which has not yet concluded.

Actions taken in response to learning from LeDeR reviews to date have included:

- Advice and support materials developed for individuals and carers developed by a task and finish group led by CLDS for constipation and pneumonia.
- GP safeguarding adults meetings and training featured recommendations from LeDeR including embedding the mental capacity templates in the electronic records, coding patients with learning disabilities and their carers, uploading the learning disability constipation pathway to the GP internet.

- A focus on meeting the needs of vulnerable people was a key design principle in the Adult Elective Orthopaedic Services Review and has been incorporated in to the proposed models.
- CLDS working with supported living services to upskill carers around identifying and responding to deteriorating signs and symptoms
- A successful drive to increase annual health checks in Camden for people with learning disabilities
- Mental Capacity Act (MCA) master-class for GPs held and a template for recording MCA assessments and best interest decisions promoted in the electronic GP record
- ‘Jargon buster’ guide developed by Royal Free Hospital
- Guided tours of hospital and discussion about hospital experiences arranged by UCLH to reduce anxiety

Safeguarding Innovation

The Board is proud to be part of some safeguarding innovation. An example of which is the following:

Although LeDeR is concerned with people aged 4 years upwards, this innovation was only concerned with the Safeguarding Adults Review process.

LeDeR are non-statutory reviews which sometimes meet the threshold for a SAR.

When this occurred, the Board and the Camden LeDeR Steering Group considered ways in which such a SAR could be conducted without duplicating LeDeR work while ensuring a good quality SAR. A SAR must be conducted by an experienced chair who is independent of the Board and the case, be cost effective and include family, friends and carers as well as all services involved in the person's life.

The LeDeR programme and approach offers a process of learning from a death which can enable Boards and local structures to focus on how to protect people with care and support needs from the behaviours and systems that pose a risk of abuse or neglect.

An idea was posed in Camden to pilot a hybrid methodology using the Significant Event Analysis and Multi-Agency LeDeR methodology using an Independent Chair, which, for the pilot, was supported and provided by NHS England .

The hypothesis for applying this methodology was that, for certain types of reviews, expertise can be shared between Boroughs without commissioning an independent reviewer, to provide value for money without compromising the quality of learning. This is in keeping with the proportionate approach advised within the Care and Support Statutory Guidance 2018.

For the Independent Chairing of the SAR experienced colleagues were sourced by the CCG from other Boroughs and CCGs on a reciprocal arrangement basis. As SARs can cost

up to £10k each, this is a significant saving to the partnership without compromising on quality due to robust quality markers in place.

The first SAR conducted using this methodology involved attendance by many agencies from health and social care who were identified through the LeDeR review for the person. Unfortunately, Adult W did not have any family or unpaid support to represent them but great care was taken to use the pen portrait to keep him at the centre of the review.

The LeDeR review underpinned the open and honest conversations, including appropriate challenge, to critically analyse the care and support provided using an action focussed learning approach.

Feedback from professionals who attended the review meeting was positive. They reported that it would be helpful to have more reviews conducted in this way, one commented:

“particularly where chronologies have already been completed, some SARs take so long that staff / teams have left or disbanded etc. before

the learning can be shared or discussed.”

The findings and recommendations as outcomes of this review for Adult W have been published on the Board page of the Camden Council website and are monitored for compliance by the Board in addition to being embedded in the LeDeR learning plan. An example of significant improvement arising from this review has been a focus on meeting

Driving improvement:
Bringing together the Learning Disability Mortality Review and the Safeguarding Adult Review processes



For more information contact:
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the needs of vulnerable people being a key design principle in the Adult Elective Orthopedic Services Review and subsequently incorporated in to the proposed models of service.



Integrated Performance Dashboard

The SAPB monitors its performance at every meeting and through its sub-committees. The integrated performance dashboard continues to be a priority for the Board in terms of getting meaningful data from all partners which is then reported to the Board in a comparable way. The dashboard presents data supplied by a number of partner organisations to allow for better sharing and access to safeguarding information across board partners.

It is being worked on presently to incorporate a wider range of metrics and to provide an integrated view of key safeguarding matters across the partnership. The dashboard will continue to assist in building up an important source of intelligence for all Board Partners. In 2018-19, it included quotes from service users explaining how their preferred outcomes had been met.

Camden submit annual statutory returns to the Government on safeguarding activity, known as the Safeguarding Adults Collection, and this report will be updated with this information when it is made public, anticipated to be in November 2019.



Concerns with Establishments

The board continues to receive an update on the 'Establishment Concerns' process at each meeting. Partners are informed on safeguarding matters concerning providers or issues that are sensitive or high risk.

This is the process by which concerns are managed with respect to a number of adults at risk in one establishment, or where there are serious concerns about poor quality of care from a provider. It provides a framework for the management of large-scale adult safeguarding enquiries and allegations of concern of abuse/neglect.

Establishment concerns are also monitored and reviewed monthly through a multi-agency forum with representatives from commissioning including the CCG, and chaired by the Head of Support and Safeguarding in ASC.

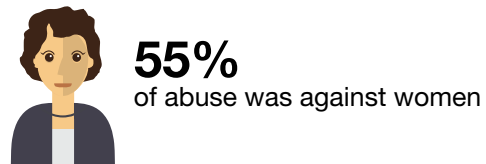
2018/2019 – the safeguarding story in numbers – Adult Safeguarding

How much abuse and neglect was reported



Who was at risk of abuse and neglect?

45% of abuse was against men



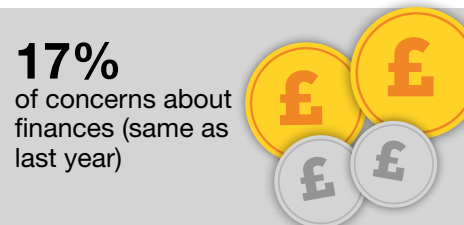
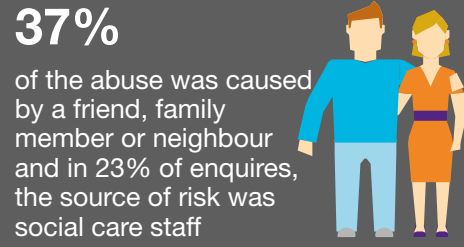
55% of victims had a physical support need and 9% had a learning disability



72% of abuse victims were people from white ethnic backgrounds

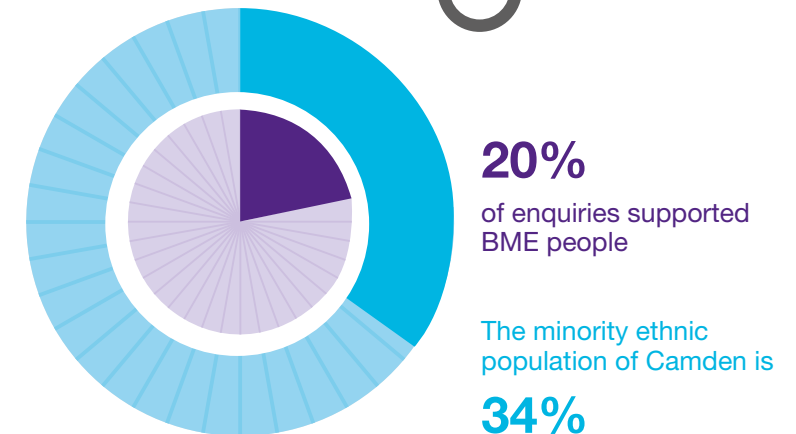
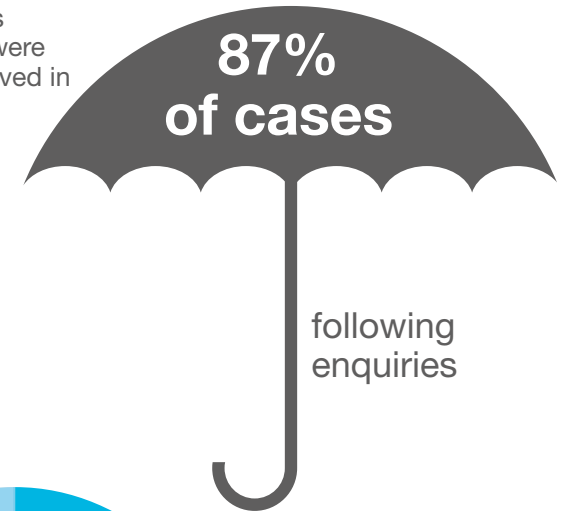


What were people at risk from?



What did we do to protect people?

Where a risk was identified, risks were reduced or removed in



The board aims to investigate reasons behind the data and possible actions required as a result e.g. under representation of BME people.

Case study A

Domestic Abuse



Caroline is a 67 year old lady who suffers from arthritis and depression. She is the main carer for her husband who has a mental health condition. Caroline has had a hip replacement, is undergoing surgery for another one and wears a stoma bag (a pouch bag which allows faeces or urine to be collected on the outside of your body).

She is self-caring and prefers to remain as independent as possible for as long as she can manage.

Her case concerns domestic abuse dating back many years. The district Stoma nurse raised a concern about Caroline when she confided in her that her husband is very controlling, manages her money for her and practically controls almost everything she does. He is verbally abusive and physically threatening towards her and has physically assaulted her on more than one occasion. He has been recently discharged from hospital for a mental health concern and had to give up his job possibly due to mental health concerns.

The concern was raised to MASH (Multi Agency Safeguarding Hub) who took immediate steps to ensure Caroline's safety. Caroline had also been known to a domestic violence support network for some years back. MASH established that there were no immediate concerns for Caroline's safety but there were ongoing issues with her husband's behaviour towards her.

The MASH social worker contacted Caroline to establish her views, provide information to her and to gather her opinions about how she would like to proceed with the concern. As it was difficult to arrange to see Caroline at home, the social worker met with her at her GP's surgery. The GP provided information about the ongoing issues in the family and Caroline agreed for the social worker to have triangulated information from her and the GP as well.

The case was transferred from MASH to the Access and Response team and allocated to a social worker. The social worker involved worked at Caroline's pace while ensuring that she had adequate information to keep herself safe. Caroline delayed most of the actions agreed with the social worker because she was reluctant to have her husband separated from her.

With her consent, the social worker explored options for initiating a family group conference and access psychological support from her

husband. She also supported her to open her own bank account and provided her with information about contacting Careline services so she could contact Careline at weekends and evenings, if she experienced any incidents that made her feel unsafe.

Analysis

The social worker acknowledged that Caroline felt unsafe to end her long term marriage or make a report to the police. This was due to fear and anxiety about what the future would hold for her if she did so. The social worker noted that incremental steps would be required as an approach to support her to build in resilience for the future for Caroline.

However as Caroline did not want that as an outcome the social worker supported her as far as possible to ensure that she met her outcome of safety as well as maintaining her personal relationships. She noted on the system, that there could be a reoccurrence and also highlighted Caroline's protective factors in relation to the risks presented.

These included regular contact with the GP and regular visits from the stoma nurse who could escalate further concerns.

Safeguarding Principles and MSP

The social worker through the conscious use of the principles of Safeguarding including - Prevention, Protection, Empowerment, Proportionality and Partnership and the ethos of Making Safeguarding Personal, had worked with Caroline and supported her to achieve her desired outcomes which she changed several times throughout the process. The social worker noted that Caroline may have made a few unwise decisions but acknowledged her expertise in matters of her own life and utilised the principle of Proportionality in not taking steps to separate the couple which could lead to social isolation and unhappiness for Caroline.

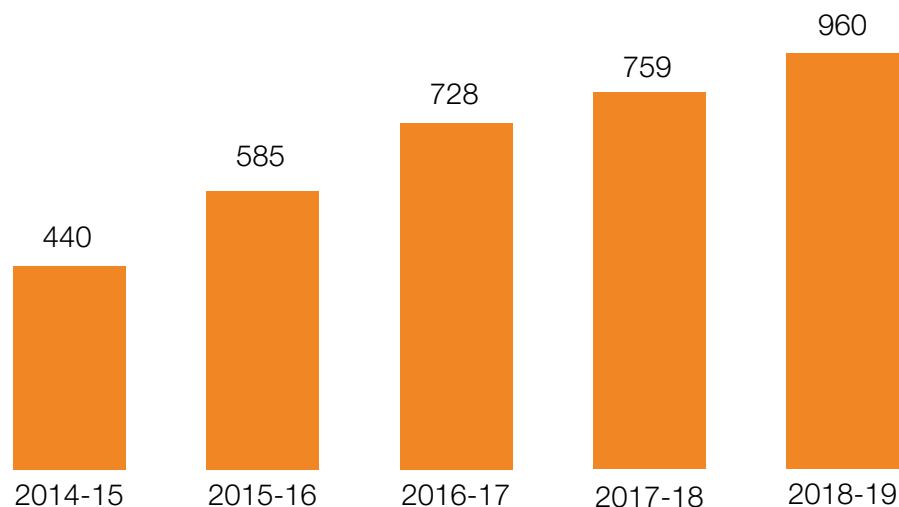
Preventative measures and risk management were strategies put in place for ongoing protection for Caroline.



Deprivation of Liberty Safeguards (DoLs)

(DoLs) are a safeguard and a positive tool in that they provide independent scrutiny to ensure that such a situation is in the best interests of the individual concerned. It is an unauthorised deprivation of liberty, i.e. lacking the necessary scrutiny, which is unlawful.

DOLs Applications received by LB Camden



The number of DoLs applications received in 2018-19 was the highest recorded since 2014 following the Cheshire West judgement. In addition, the upward trend of application numbers continues. There has been an increase of 201 applications between 2018/19 and the previous year, with the majority of applications coming from care homes (595) whilst 365 referrals came from hospitals.

The London Borough of Camden continues to smartly consider how it can meet the ongoing increased demand, which poses a substantial challenge to resources. It is recognised that if suitable capacity to cope with rising numbers of applications is not made available, the council could

be inadvertently responsible for illegal deprivations of liberty and vulnerable to legal challenges, thereby representing a potential further impact on resources.

Work continues to increase awareness of Deprivation of Liberty among staff at care homes, families, carers and other stakeholders, and this is being achieved through i.e. care provider's forum, carer's voice/forum and other trainings made available to providers. That said, the ageing population demographics suggest that the number of DoLs applications will continue to rise.

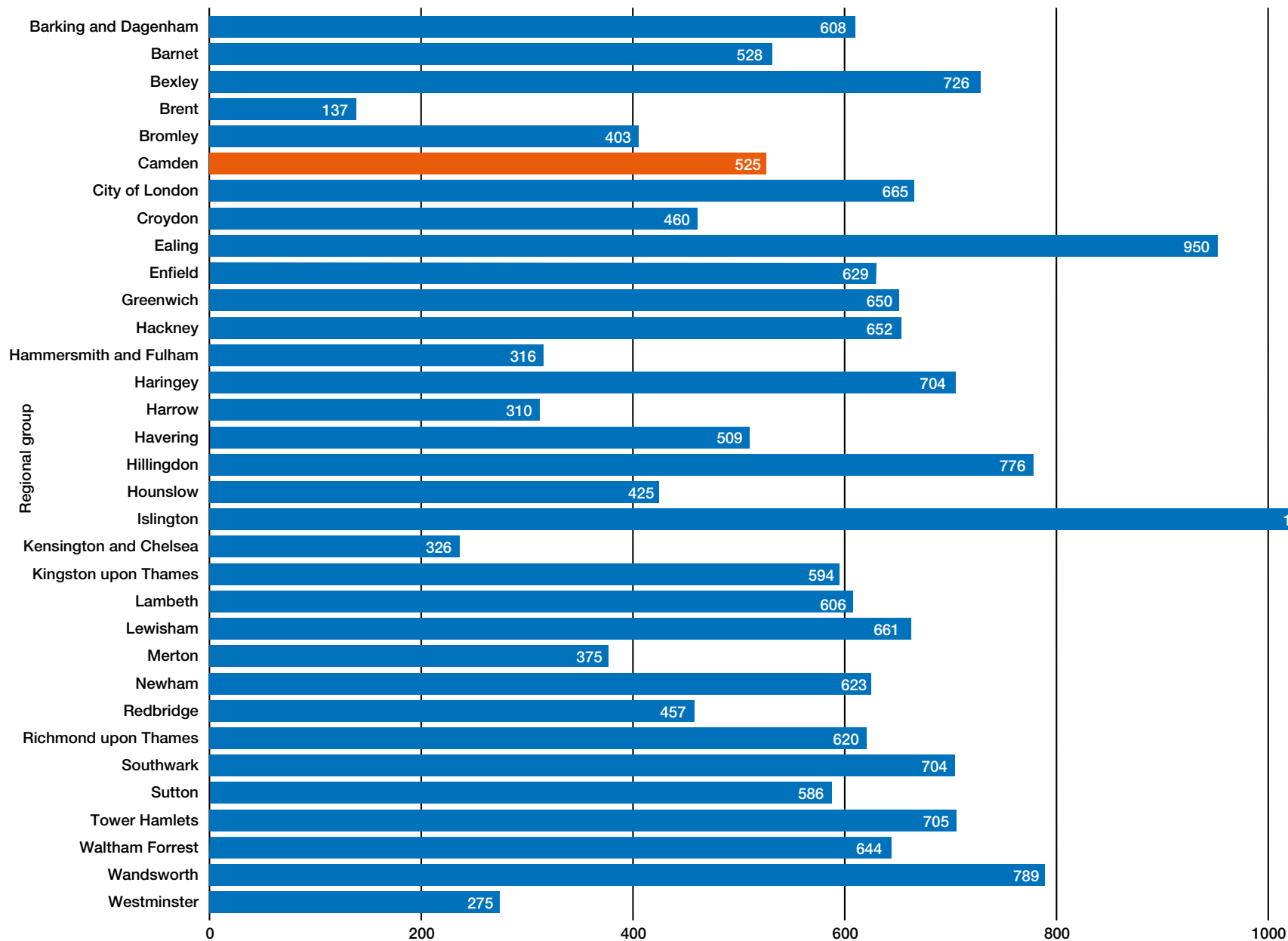
Meanwhile, the Mental Capacity Amendment bill, which replaces DOLs with the Liberty Protection Safeguards (LPS), has been passed, and preparatory work has begun to enable its effective implementation in Camden. However, whilst we wait for possible implementation of LPS in October 2020,

Number of DoLs applications received per 100,000 adults during 2017-18

Camden remains committed to the requirements of the current legislation and will continue to proactively seek to safeguard the rights of one of the most vulnerable groups in society. Consequently, work to increase awareness of Deprivation of Liberty among staff at care homes, the increasing number of safeguarding concerns reported – most of which require a DoLs assessment, and aging population demographics suggest that the number of DoLs applications will continue to increase.

At the time of publishing this report, the national data for 2018/19 has not been published so it is not possible to benchmark our data against that of other areas. The national data for the previous year's 2017/18 is available on [NHS Digital website](#) and the graph below will be updated with 2018/19 information when it is made public anticipated to be in November 2019.

Number of DoLs applications received per 100,000 adults during 2017-18



Case study B

Psychological abuse



Joan is an 84 year old lady, living with dementia and she has a health history of arthritis and stroke. She owns her own property. Serious concerns of a safeguarding nature were raised by her daughter Kelly, against her sister Janet who is Joan's other daughter.

Kelly contacted Adult Social Care (ASC) and alleged that Janet, who is the court appointed deputy (for the management of Joan's finances and welfare), has been using their mother's property for carrying out illegal activities involving drug peddling and abuse, by encouraging young people to visit

the property and use and sell illicit drugs.

Kelly had raised a similar incidence in 2017.

The social work team took immediate steps to act on the allegations and due to the seriousness of the allegations, a Section 42 enquiry was commenced. The social worker contacted Joan to discuss the safeguarding concerns and to ensure her safety. The social worker also obtained her consent to gather the views of Jane. At this time, Kelly had also reported the matter to the police.

Joan dismissed the allegations as false and explained that her nephew (from her son), also lives in the property as well as a live-in carer and a lodger who keeps her company for a certain number of hours a week in exchange for payment for lodging. She stated that the young people referred to are her granddaughter, Jodie (Kelly's daughter) and her friend who visit often and stay in one

of her bedrooms upstairs. She clarified that Jodie is known to the Islington social services and has a council property of her own but does visit occasionally with her friend and would often stay over because she is unable to have her friend over in her own bedsit.

She explained that Jodie and her friend are very kind to her and keep her company and also run some errands for her. Joan explained that her granddaughter 'might require some help' with drug use but that she has never seen her use drugs.

The social worker observed and noted that Joan looked well kempt and comfortable in her living room and that her home environment was tidy. The social worker stated that Joan provided information about her past with an easy recall and stated that Jodie would never harm her and that she is happy for her to carry on visiting because she provides good company for her. She stated that she feels safe and happy in her home with the

company that she has.

The social worker explained that the live-in carer does all the cooking, housework and shopping while Joan is self-caring for herself. The social worker also met Joan's grandson (Jane's son), who lives in the basement flat and goes to work and the lodger who provides companionship time for 10 hours a week and takes Joan out daily for a walk. The social worker also noted that Joan shares a good relationship with her neighbour who greeted and stopped for a chat as Joan saw her to the door.

The social worker also contacted Jane, who is a medical doctor. Jane confirmed to the social worker that the court deputyship was initially granted by the court to Kelly who is the older sister. However this had been revoked and passed to her as Kelly was found to be incapable of taking on this responsibility.

There were no concerns from the Office of Public Guardian (OPG) about the management of Joan's finances by Jane. Jane also

informed that they had begun conversations with Jodie about using drugs at her grandmother's house.

The police stated that they had no concerns in relation to the safety and wellbeing of Joan and dismissed the allegations made by Kelly as there were no evidence to substantiate her claims and so were not treating the case as anything suspicious.

The social worker discussed the potential risk of Joan's property being used by Jodie as a 'drug den' with Jane and highlighted the risks to Joan's health if indeed this was happening. Jane informed that she will look into the matter and discuss the possibility of her niece, Jodie seeking help with her possible drug use.

The Camden social worker also had spoken with the social worker from the Islington Care leaver's team to confirm that they are aware of Jodie's situation and her desire to visit her grandmother. They are monitoring her situation and have no major concerns about her peddling drugs and inviting other youths over, apart from her known friend. They will attempt to engage

Jodie in more worthwhile activities to support her with her mental health.

Joan informed the social worker that Kelly is unhappy about the fact that she is no longer in control of her finances and no longer speaks to her. She stated that she does not want any information about her shared with Kelly until further notice. The social worker expressed that Joan demonstrated an understanding of the safeguarding process and whilst happy that ASC took appropriate steps, she made the decision for the safeguarding enquiry to proceed no further.

The social worker was satisfied that Joan was safe and happy with the number of people who live at and visit her large property, as they provide good social interaction for Joan.

The social worker's manager (Safeguarding Adults manager) provided feedback to Kelly, highlighting that the police and Adult Social Care professionals did not find any evidence of criminal wrongdoing from Jane, and requested her to contact the police in the future if she has further

concerns.

The Enquiry was subsequently closed and no further reports had been made since that time.

Safeguarding Principles and Making Safeguarding Personal

The Safeguarding principles of Partnership working, Protection, Empowerment, Accountability and Proportionality were found to be at play in this enquiry. Joan was involved through the process and made the decision to continue to have her granddaughter staying at her property. She was empowered to make the decision for Adult Social Care professionals not to share information with her daughter Kelly any more. She was empowered to make the decision regarding her ongoing relationship with her granddaughter and ASC did not tamper with the relationship in view of the need for social integration, working with the Proportionality principle in doing so. However, further actions in relation to this were discussed with Joan and Jane, utilising the Protection and Prevention principles by

exploring Joan's outcomes with her.

Making Safeguarding Personal was evident through the process of the Enquiry with Joan at the helm of affairs as the expert in matters in relation to her own life.

SUB GROUPS

The subgroups benefit from multi-agency representation, with staff from statutory and non-statutory agencies attending and contributing to the work.

High Risk Panel (HRP)

The HRP is a multi-agency panel to prevent escalation of safeguarding risks and continues to meet every 6 weeks with a busy agenda.

During the year, the panel was reviewed to include some senior management representation. We now have regular attendance from the Police and Safeguarding Leads from Central North West London NHS Foundation Trust and a GP.

The panel is hoping to have a regular administrator soon who will help with tracking cases and keeping statistics of cases presented at panel so trends and proper evaluation of the effectiveness of the panel can be measured.

The HRP continues to remain as a very useful tool to manage high-risk cases where the risk is discussed, advice is offered and the risk is known and shared by all involved agencies.

One main piece of work done this year was the review of the Policy and Procedures that govern the panel to make this Care Act compliant and have buy in from all members. All members provided input. The draft was discussed at the Quality and Performance sub group and then presented to SAPB. It has now been agreed.

In 2018/19, there were 7 panels held and 27 cases presented and reviewed.

The HRP continues to play an important role in multi-agency/safeguarding work across Camden.

It helps address agencies working in isolation on complex cases, reduces costs by providing expert advice and timely interventions on complex and high-risk cases.

Practitioners who present cases become more skilled and take this knowledge back to their teams to share which in turn improves the management of cases across the borough.

Safeguarding Adults Review (SAR) Sub Group

At its January 2018 meeting, the board agreed to the setting up of a SAR Sub Group and which organisations would sit on it to enable the Camden SAPB to meet its statutory obligations around the commissioning and carrying out of SARs.

The SAR sub group is the primary mechanism by which the Board exercises its statutory duty to arrange a SAR when someone with care and support needs within its locality dies, or experiences serious harm as a result of abuse or neglect, whether known or suspected, and there is a concern that partner agencies could have worked more effectively together to protect the person.

The subgroup is in its first year and has considered a range of SAR referrals. It makes recommendations to the Board Chair on when it considers that a statutory Review is required and when an alternative approach to identify learning opportunities may be appropriate.

It monitors the development and implementation of multi-agency action plans that flow from completed SARs to ensure that the learning from the Reviews has a meaningful and lasting impact on how services work with adults with care and support needs.

The Sub-group meets on a quarterly basis and the Chair of the Sub-group has the authority to call an extraordinary meeting if there is pressing business, which needs to be addressed before the next scheduled meeting. It is co-chaired by a Detective Chief Inspector from the Met Police (Camden) and the Principal Social Worker for results at Camden Council.

Learning and Communication (L&C) Sub Group

The Board does not currently have a functioning L&C sub group. The NCL boards are looking into establishing a task and finish group to try and strengthen this work

Quality and Performance Sub-Group

The role of this sub-group is to gather and critically analyse information and intelligence to present to the Safeguarding Adults Partnership Board. This enables the Board to fulfil its statutory responsibilities to:

- Gain assurance of the effectiveness of its safeguarding responsibilities
- Identify risks
- Hold partners to account
- Develop mechanisms to support safeguarding adults practice
- Inform the strategic plan

Key achievements over this reporting year have been:

- Increased representation from the partnership
- Multi-agency audit in to mental health safeguarding practice
- Further development of the Integrated Performance Dashboard to include additional data from Police, independent advocacy and qualitative examples of the outcomes of safeguarding enquiries
- A survey of partners arrangements to prevent, identify and respond to modern slavery and human trafficking
- Development of the Board business plan

Engagement Sub Group

The Board does not currently have a functioning Engagement sub group, The NCL boards are looking into establishing a task and finish group to try and strengthen this work.

Board Priorities for the next 12 Months

- Raise the profile of homelessness deaths and forge closer working with partners to tackle the issue
- Progress the strategic priorities with our North London Central Partners
- Mental Capacity Act (Mental Capacity (Amendment) Bill. The Board to gain assurance from partners about their readiness and preparation for the new bill.
- Further development of the assurance Dashboard to fulfil the Boards statutory responsibility.
- Join forces with Chairs of the Community Safety Partnership Board and the Children Board to discuss how to proceed with the safeguarding issues in relation to Transitions i.e. age 16+.

Closing comments

The 2018/19 year has been a busy and eventful one for Camden. This Annual Report will give a sense of what we have been continuing to do to help ensure the safety of the citizens of Camden from abuse and neglect, by finding solutions to problems which, above all, put the person being safeguarded at the centre of actions agreed and also ensuring that any actions taken are no more intrusive than they need to be.

Thank you to all of the member organisations of the SAPB for their support, the efforts of individual members and that of the community at large.

Appendices

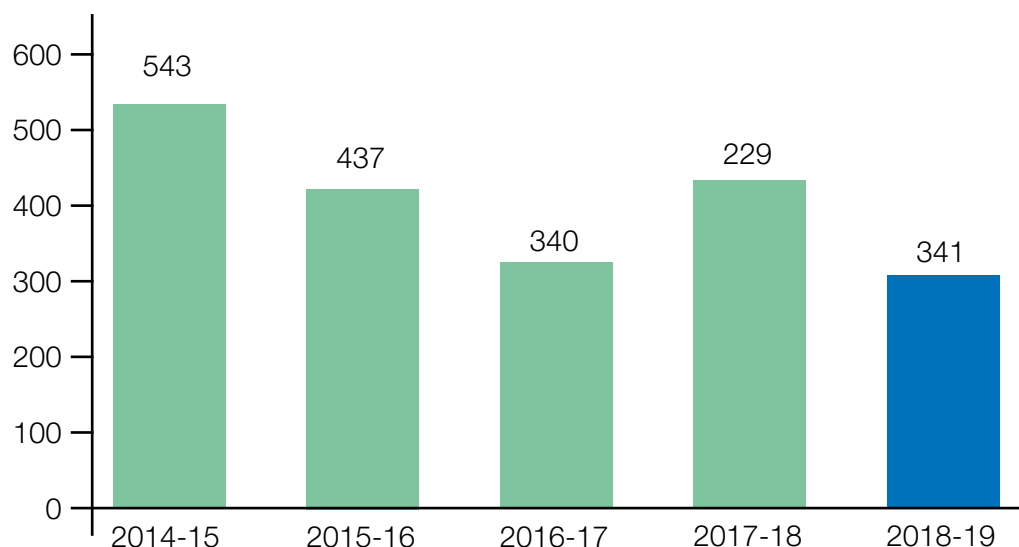
1. LB Camden Safeguarding Performance Data
2. Board Attendance
3. Partner Organisations' contributions

Appendix 1: London Borough of Camden Safeguarding Performance Data

Information on numbers and types of abuse incidents and the action taken to protect people is collected and presented to the Board each quarter.

All data is taken from the annual return to the Department of Health – known as the Safeguarding Adults Return – unless otherwise stated. Percentages may not total 100% due to rounding.

Number of individuals involved in section 42 Safeguarding Enquiries investigated by LB Camden each year



The number of individuals for whom section 42 safeguarding enquires were investigated by LB Camden has risen in 2018/19, having previously reduced four years in succession.

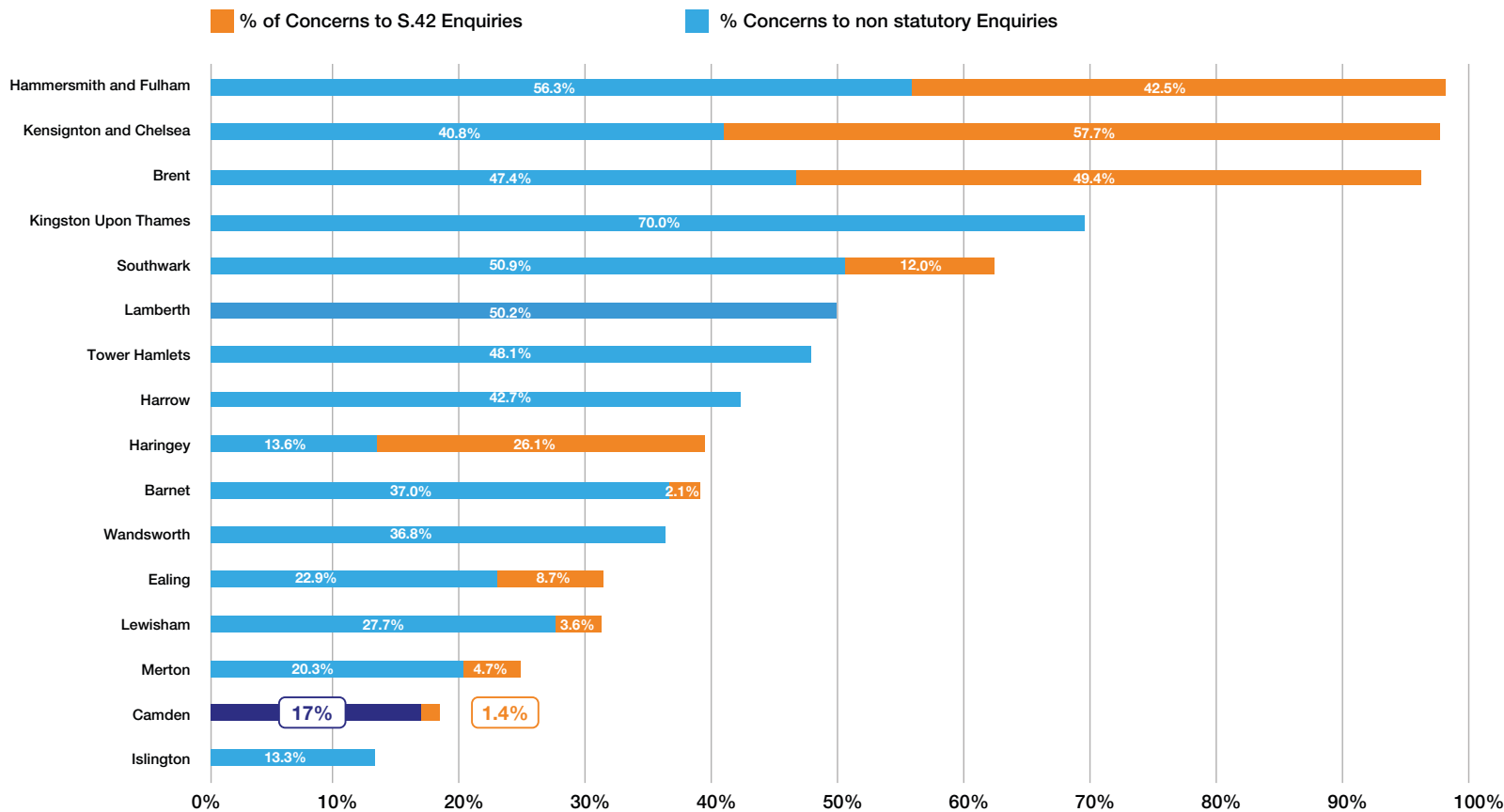
In 2018/19, there was an increase of almost 50% over the previous year.

The safeguarding concern episode was created with the introduction of the new workflow at the end of October 2016. The concern episode is in keeping with the revised pan London safeguarding policies and procedures and the Care Act. Further changes have been made to the safeguarding workflow during the last year to ensure social workers gather relevant information and make proportionate decisions as to whether or not a full section 42 enquiry is necessary.

This new approach supports the core elements of Making Safeguarding Personal and endeavours to keep the service users at the centre of the process with a clear focus on outcomes.

At the time of publishing this report, the national data for 2018/2019 has not been published so it is not possible to benchmark our data against that of other areas. The national data for the previous year 2017/2018 is available on [NHS Digital website](#) and the graph below will be updated with 2018/2019 information when it is made public anticipated to be in November 2019.

2017-18 Safeguarding Adults Collection Benchmarking



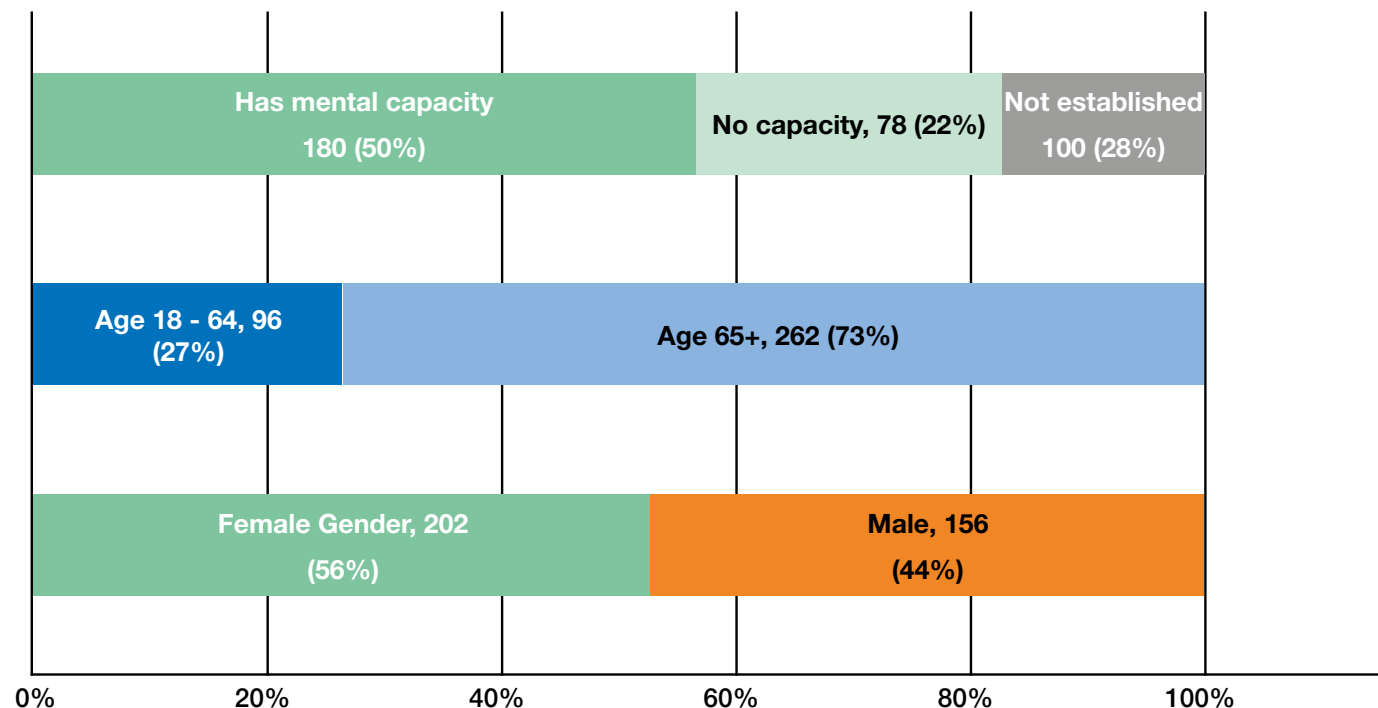
The wide variation between councils in the 'concerns to enquiries conversion rate' suggests differing policy and interpretations of the guidelines on when a concern should become an enquiry.

Demographic characteristics of persons involved in completed Section 42 safeguarding enquiries investigated in LB Camden 2018/2019.

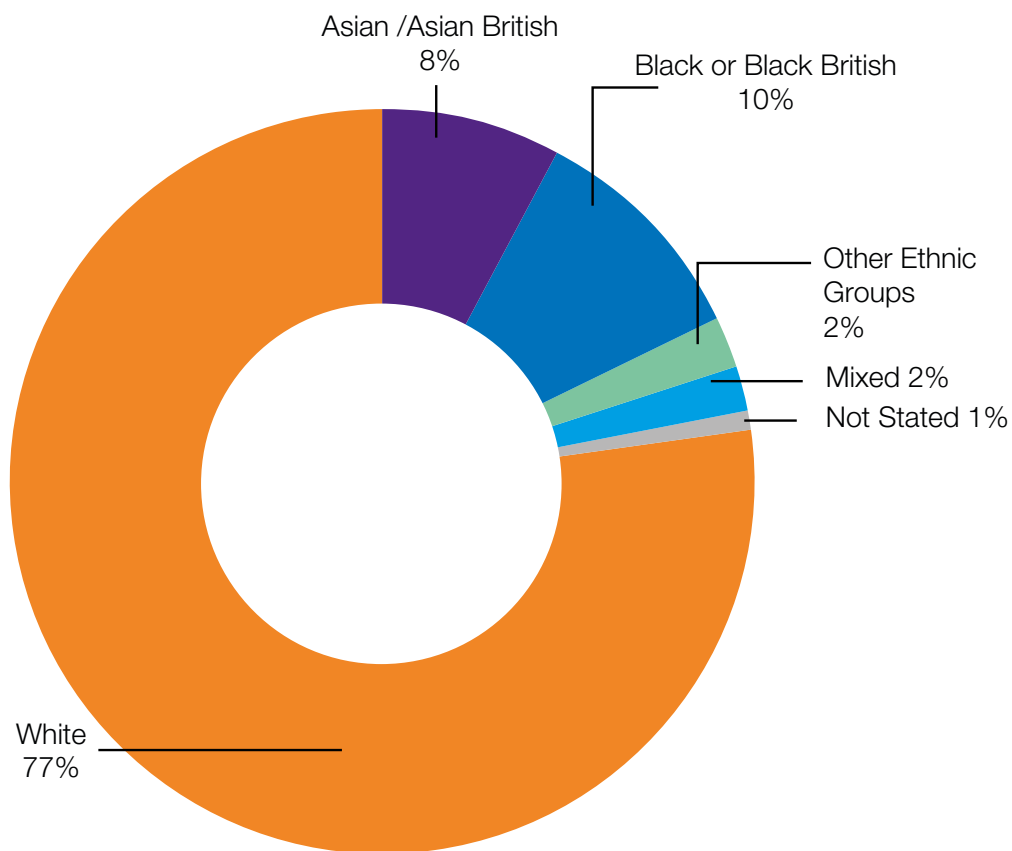
Just over half of individuals involved in section 42 enquiries have mental capacity but nearly a quarter of individuals involved in enquires do not have capacity. Mental capacity has not been confirmed in just under a third of those involved in enquiries.

Nearly three-quarters of individuals involved in safeguarding enquires are aged at least 65 years old. This reflects that many concerns are reported involving clients of adult social care, which is a predominately older demographic.

There is a slightly higher proportion of enquiries from women compared to men.



Ethnicity of cases referred for enquiry (2018-19)

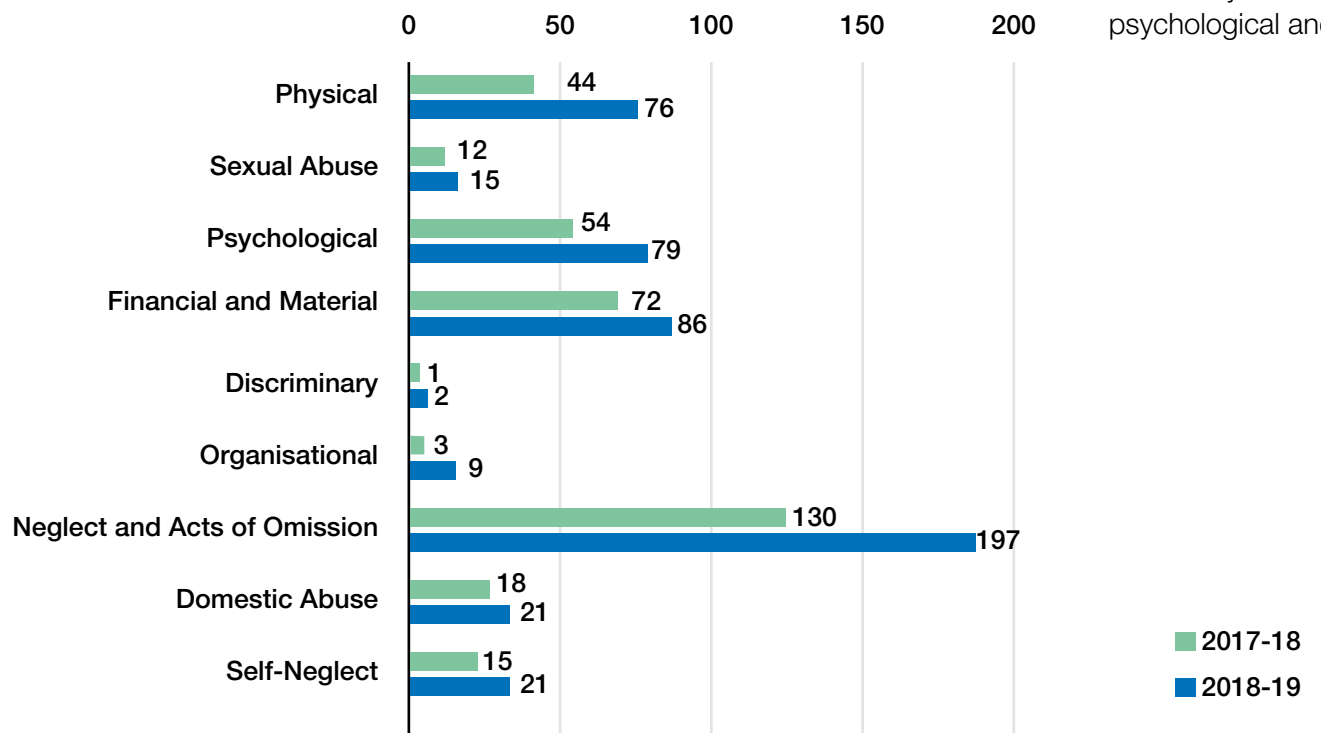


In 2018-19, 20% of enquires involved an individual of BME ethnicity.

The proportion of enquiries from BME individuals is lower than the proportion of BME ethnicity in Camden's overall adult population, which is 34%.

Type of abuse alleged in completed enquiries, both Section 42 and non-statutory enquiries, investigated by LB Camden in 2018-19

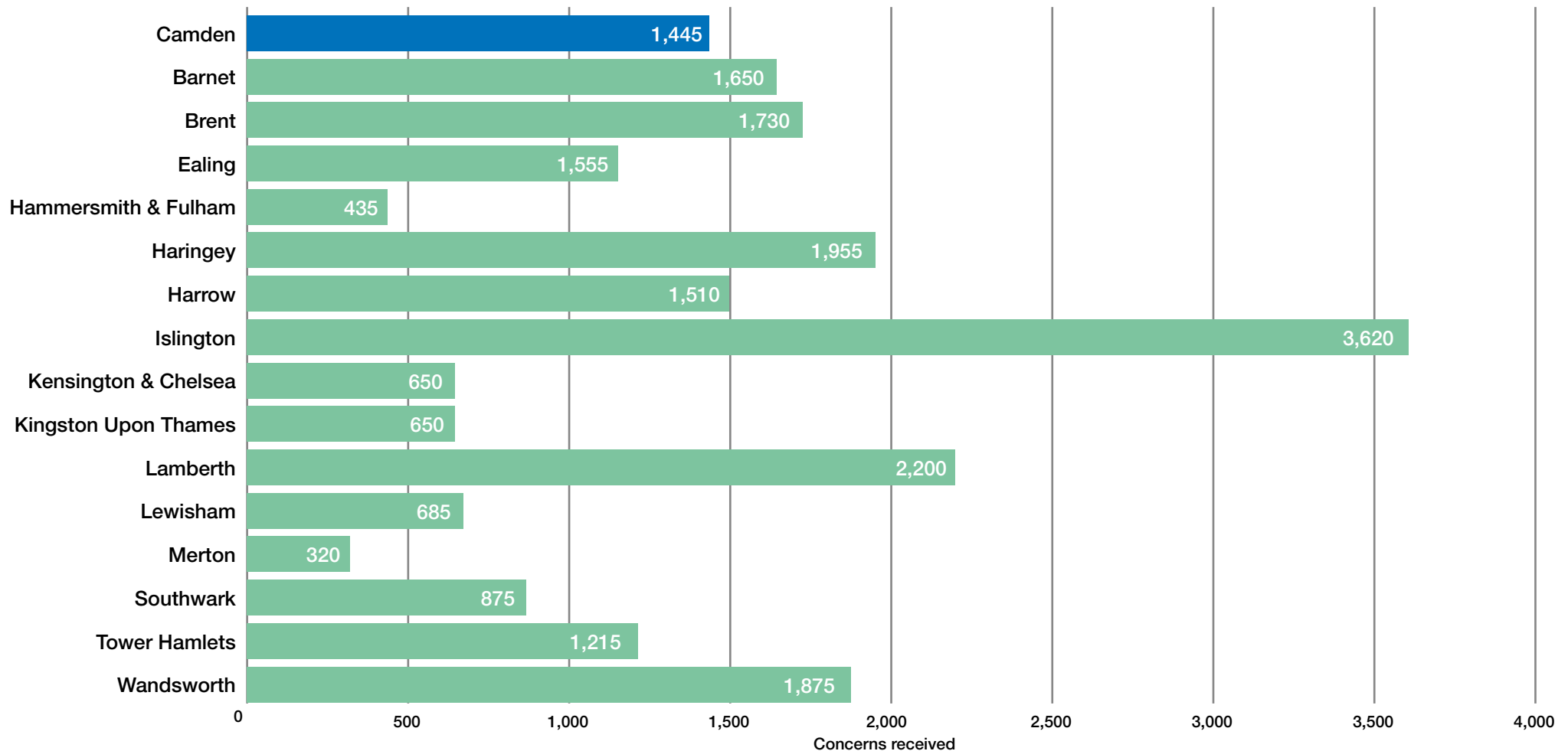
In line with national feedback, there has been an increase in the number of allegations of neglect, which includes situations involving self-neglect. In 2018-19, financial and material abuse continues to be one of the most commonly investigated types of abuse but there have also been increases in psychological and physical abuse.



Instances of abuse: total number of Section 42 and non-statutory enquiries

	Physical Abuse	Sexual Abuse	Psychological Abuse	Financial or Material Abuse	Discriminatory Abuse	Organisational Abuse	Neglet and Acts of Abuse	Domestic Abuse	Sexual Exploitation	Modern Slavery	Self Neglect
2017-18	44	12	54	72	1	3	130	18	0	0	15
2018-19	76	15	79	86	2	9	197	21	0	0	21

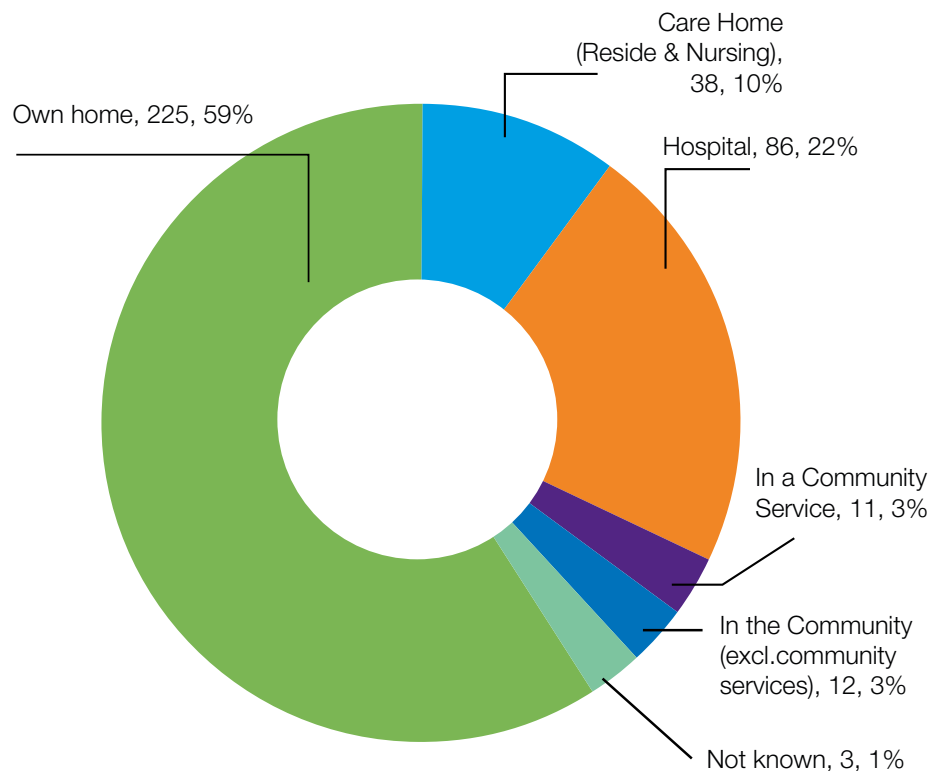
The concern episode form used on LB Camden's Mosaic case management system is in keeping with the revised plan London safeguarding policies and procedures and the Care Act. It allows the worker to gather relevant information and make proportionate decisions as to whether or not a full section 42 enquiry is necessary. At the time of publishing this report, the national data for 2018/19 has not been published so it is not possible to benchmark our data against that of other areas. The national data for the previous year 2017/18 is available on [NHS Digital website](#) and the graph below will be updated with 2018/2019 information when it is made public anticipated to be in November 2019.



(Figures on chart are rounded to nearest 5)

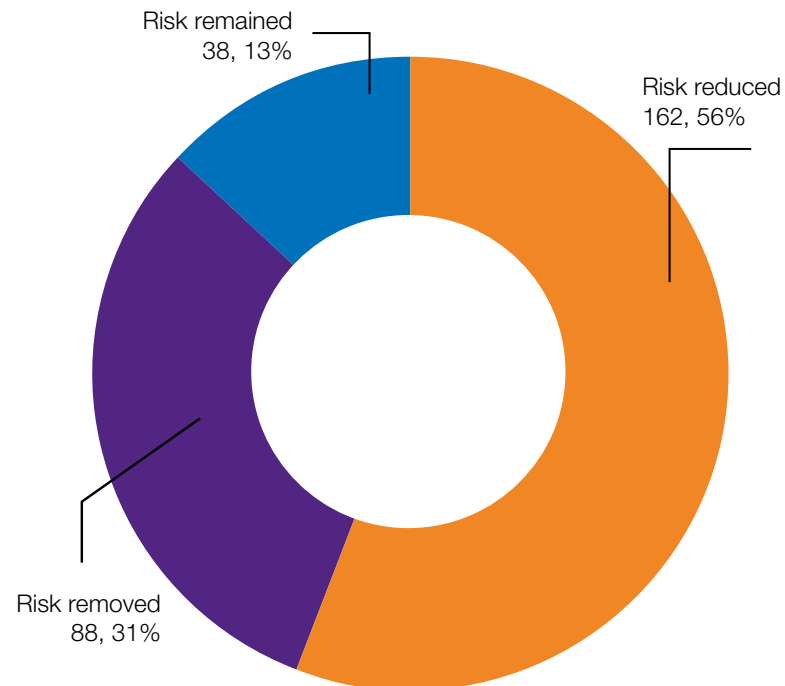
The total number of concerns recorded in LB Camden has fallen from 1507 in 2016/17 to 1444 in 2017/18.

Location of alleged abuse (2018-19)



Most abuse is alleged to occur in the home of the person requiring protection. This corresponds to the pattern seen in previous reports. The home is the location for allegations of common types of abuse such as financial exploitation and self-neglect.

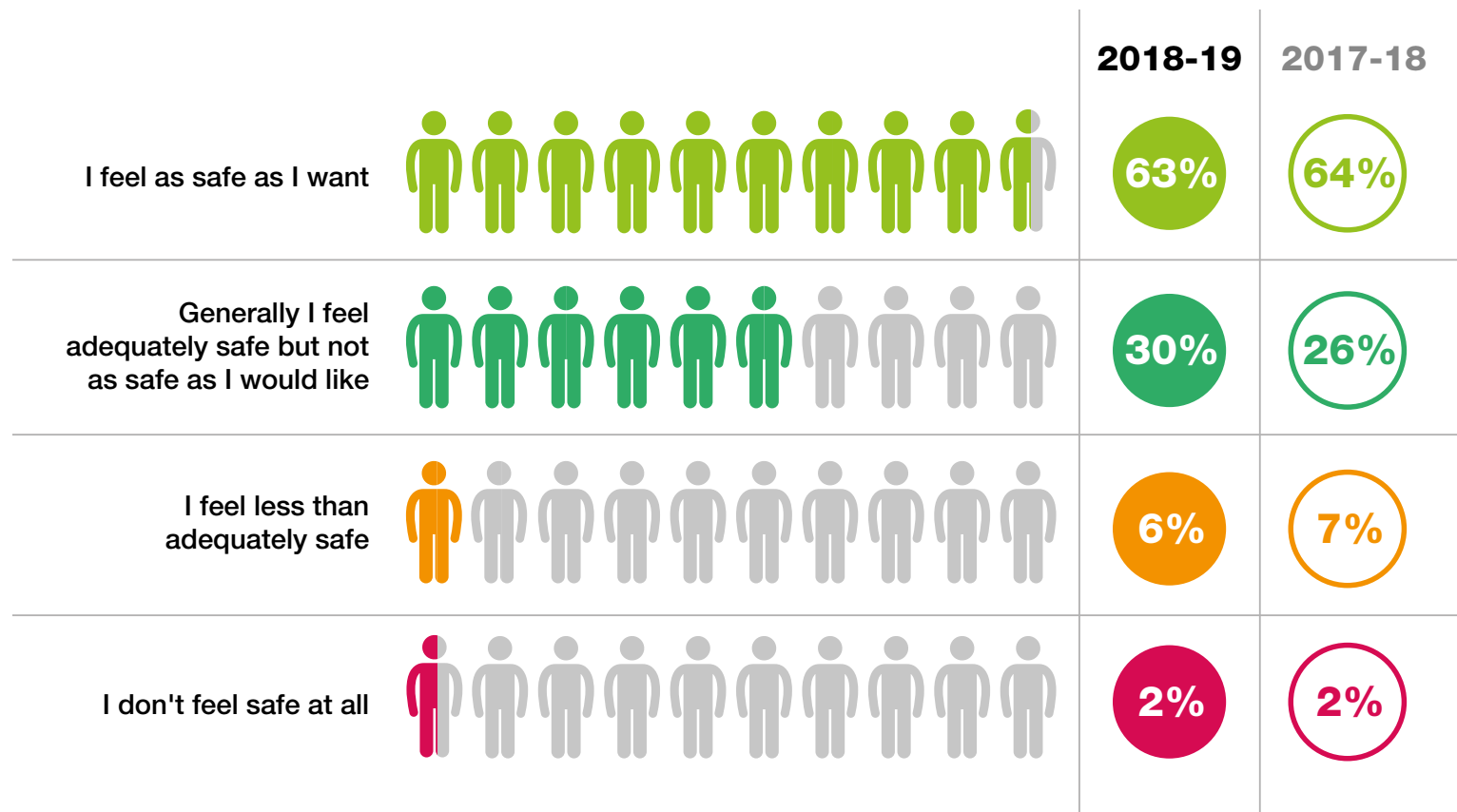
Action taken to manage risk associated with LB Camden residents (2018-19)



The action taken following enquiries reduced or removed the risk in almost two-thirds (56 %) of investigations. In some cases the risk remains because the subject of the safeguarding enquiries/ does not feel able to cease contact with the source of the risk.

Where risk remains, we continue to work with the person and their families with the aim of monitoring and reducing risk in the long term.

How safe people who use ASC services feel (2018-19)



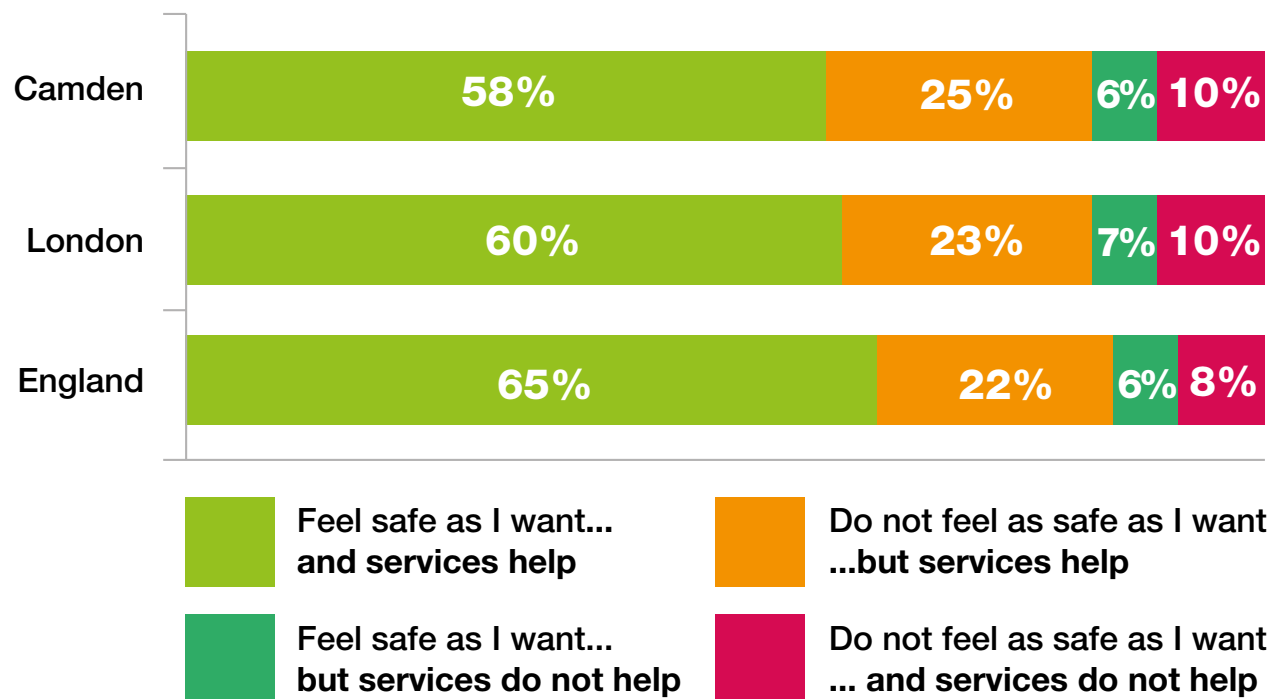
The annual survey of users of adult social care includes questions about feeling safe. All service users are given the chance to participate in the survey, not only those who have been involved in safeguarding concerns.

The data above has been weighted to ensure that the survey responses of different categories of service users, e.g. older people, learning disabilities, are calculated in proportion to the relative composition of the overall client population.

Source: ASCS 2018-19 (weighted)

At the time of publishing this report, the national data for 2018/2019 has not been published so it is not possible to benchmark our data against that of other areas. The national data for the previous year 2017/2018 is available on NHS Digital website and the graph below will be updated with 2018/2019 information when it is made public anticipated to be in November 2019.

How safe people feel by whether services helped them to feel safe



Source: ASCS 2017-18 (unweighted)

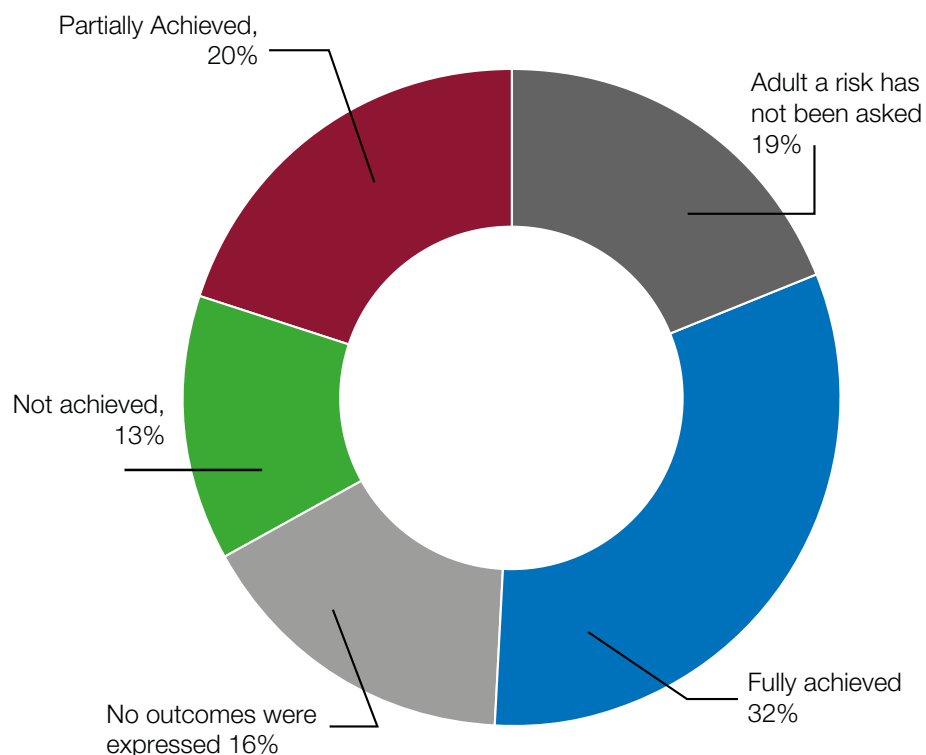
The survey results suggest the majority of adults who receive social care services from Camden feel safe (light green + dark green = 64%) however this is lower than 2016-17 when the equivalent figure was 71%.

A large majority consider adult social care services have a positive impact on their safety (green + amber = 83%) which matches the London-wide figure for this statistic.

Making Safeguarding Personal

During 2016-17, LB Camden introduced a new safeguarding workflow with greater facility to measure approaches consistent with Making Safeguarding Personal. This enabled information to be collected on user-defined outcomes and included recording which had their own outcomes met.

Desired Outcomes for completed Section 42 Enquiries



This new approach supports the core elements of Making Safeguarding Personal and endeavours to keep the service users at the centre of the process with a clear focus on outcomes.

Almost two-thirds (65%) of people for whom safeguarding enquiries were conducted stated their desired outcomes from the process and in just under a third (32%) of cases, these outcomes were fully achieved.

Of the other third of people involved in safeguarding enquiries (35%), some did not describe any outcomes which they wished to achieve but nearly a fifth of all clients (19%) were not asked about their desired outcomes.

Appendix 2: Camden SAPB attendance record by agency

Camden SAPB attendance record by agency

Agency	2017/2018				
	20/04/2018	20/04/2018	18/10/2018	18/01/2019	annual
Camden Council Adult Social Care	✓	✓	✓	✓	100%
Camden Council Housing		✓	✓	✓	75%
Camden Council Procurement					0%
Camden Council, Commubity Safety	✓	✓	✓	✓	100%
Community Rehabilitation Company				✓	25%
Camden & Islington NHS Foundation Trust	✓	✓	✓		75%
University College London Hospitals NHS Foundation Trust	✓	✓	✓	✓	100%
Royal Free Hospital NHS Foundation Trust	✓	✓	✓	✓	100%
Central & North West London NHS Foundation Trust	✓	✓	✓	✓	100%
Tavistock and Portman NHS Foundation Trust			✓	✓	50%
Camden Clinical Commissioning Group	✓	✓	✓	✓	100%
NHS England					0%

Metropolitan Police - Camden	✓	✓	✓		75%
Probation Service	✓				75%
London Fire Brigade - Camden	✓	✓	✓		75%
London Ambulance Service NHS Trust			✓		25%
Camden Carers Centre	✓		✓	✓	75%
Age Uk - Camden	✓	✓		✓	75%
Hopscotch Asian Womens Centre				✓	25%
Service User representative	✓				25%
Great Ormand Street Childrens Hospital NHS Trust	n/a	n/a	n/a	✓	
Camden Council - Intergrated Commissioning	✓	✓	✓	✓	75%
Average Attendance					79%

Independent Chair's comments on Board attendance

The attendance at the quarterly board meetings in 2018/19 can be viewed on the table on the left.

We have worked hard once again to ensure that all partner organisations on the SAPB are represented by a post holder of sufficient seniority and expertise and that ideally the same person should attend each meeting.

However, there are inevitably operational pressures on individuals and organisations as well as annual leaves, reorganisations and role changes.

Having said this, we feel that reinforcing the message on regular attendance is something that this board will continue to be persistent on.

Appendix 3: Partner Organisation Contributions

In this section, our partners set out how they have contributed to the work of the SAPB and to the ongoing improvement of local safeguarding adults arrangements. Each partner was asked to frame their contribution in response to the following 4 questions: -

What has your organisation done in 2018/19 to achieve the priorities of the Board?

What difference has your organisation made to improve the safeguarding of adults and in promoting their welfare?

How has your organisation challenged itself and others to improve safeguarding arrangements?

What are your top 3 priorities for 2019/20?

Age UK Camden

What has your organisation done in 2018/19 to achieve the priorities of the board	What difference has your organisation made to improve the Safeguarding of adults and in promoting their welfare?	How has your organisation challenged itself and others to improve safeguarding arrangements?	What are your top 3 priorities for 2019/20
<p>Empowerment – 100% staff continued to be trained on the importance of safeguarding and specific teams were trained on mental capacity. Age UK Camden continues to build on the legal requirements and responsibilities of Age UK Camden to further develop and embed a culture and confidence in supporting and guiding clients through the safeguarding process.</p> <p>Prevention – Continue to raise awareness and provide in house self-neglect awareness sessions to volunteers especially those visiting in the community. Prevention work also includes workshops from the Trading Standards and Police providing information on scams and financial abuse. In addition Age UK Camden also have the tools and resources to disseminate to older people within Camden.</p> <p>Protection – We ensure that there is a clear pathway for staff and volunteers to access guidance around any safeguarding or concerns they become aware of. Safeguarding, mental capacity and deprivation of liberty is also part of the induction programme for all new staff.</p>	<p>Have engaged with other agencies to ensure a wider awareness of Safeguarding and the various issues that this covers. For example invited Met, Camden Fire Brigade, Alcohol Awareness, Adult Social Care, and Camden Carers to information sessions. This has resulted in an increased knowledge and awareness of safeguarding and professional discussions in relation to safeguarding clients and how to start these conversations.</p> <p>The information and Advice Team provide dedicated advice appointments to support clients with applying for and completing Lasting Power of attorney forms. This has enabled many clients and their families and carers to formalise their wishes with confidence whilst they have the capacity to do so.</p>	<p>Continue to instil that safeguarding is everyone's responsibility and encouraging clients to make their own choices. This has increased staff and volunteer's confidence in brining any issues and concerns to the attention of the Safeguarding Leads.</p> <p>Safeguarding is now an integral part of all volunteer training especially volunteer befrienders which is focused on learnt experience and real life scenarios to enable them to fully grasp the issues involved in safeguarding.</p> <p>Bimonthly the reports on safeguarding continue to be presented to Age UK Camden Board of Trustees.</p> <p>A subsidiary of Age UK Camden (Opening Doors London) who support the older LGBT+ community have appointed their own Safeguarding Lead who works closely with the Safeguarding Leads in Age UK Camden. The ODL Safeguarding Lead provides a monthly safeguarding update to the Board of trustees.</p>	<ol style="list-style-type: none"> 1. Closer partnership working with High Risk Panel, SAR Sub Group and the SAPB. Continue to have workshops and awareness sessions for Staff and volunteers on Safeguarding, mental capacity, DoL's and self-neglect. 2. Continue to update and review Safeguarding procedures and develop a quarterly review of all safeguarding reports recorded by Age UK Camden and our subsidiary charities to ensure quality and consistency and to highlight further training needs. 3. Continue to learn and develop new procedures and knowledge in relation to the learnt experience especially in relation to Serious Case Reviews

Age UK Camden

What has your organisation done in 2018/19 to achieve the priorities of the board	What difference has your organisation made to improve the Safeguarding of adults and in promoting their welfare?	How has your organisation challenged itself and others to improve safeguarding arrangements?	What are your top 3 priorities for 2019/20
<p>Partnership – Age UK Camden have worked with Adult Social Care in relation to Family Group Conferencing with a member of staff receiving training and other staff also attending and providing support to clients engaged in the process.</p>	<p>Age UK Camden continue to contribute and attend the High Risk Panel meetings, the SARS sub group committee and Camden's SAPB. In addition Age UK Camden have a safeguarding lead involved in helping to develop the new Self-neglect tool.</p> <p>Areas where there is a high client footfall we have ensured that Safeguarding literature is clearly displayed and available encouraging client awareness and approach staff if they have any questions or concerns.</p>		

Adult Social Care – London Borough of Camden

What has your organisation done in 2018/19 to achieve the priorities of the board	What difference has your organisation made to improve the Safeguarding of adults and in promoting their welfare?	How has your organisation challenged itself and others to improve safeguarding arrangements?	What are your top 3 priorities for 2019/20
<p>Ongoing discussion about Camden's low conversion rate from concern to enquiry has encouraged staff to consider timely and proportionate actions. The conversion rate of 29.6% for April 2018 to Feb 2019 was much improved from 18% in the same period of 2017-18.</p> <p>ASC managers chair six-weekly High Risk Panel meetings which facilitate multi-agency and multi-professional discussion and shared risk assessment and decision making on high risk cases. The revised Terms of Reference and six-monthly reporting of the HRP to the SAPB via the Q&P subgroup will enable identification of relevant trends and learning.</p> <p>The design of the Modern Slavery & Human trafficking webinar was completed and the training will be rolled out to all Council staff to further raise awareness. This has been launched on Camden's learning and development portal for all council staff to have access to, and is mandatory training for all staff.</p>	<p>Safeguarding service manager, MASH manager, safeguarding lead practitioner and DOLS manager support regular meetings of MAPPA, MARAC, London DOLS Leads and London Modern Slavery Leads group. Joint working is promoted for all of the key safeguarding agendas. Learning is shared from these forums to relevant ASC staff.</p> <p>Making Safeguarding Personal continues to be a priority agenda for safeguarding work as well as for wider strengths-based practice under the three conversations model. There has been minimal increase in the percentage of people being asked about their desired outcomes – 61% in 2018-19 compared to 2017-18, and of their outcomes being fully achieved – 46% in 2018-19 compared to 37% in 2017-18. Our work will continue to be underpinned by the focus on outcomes.</p>	<p>Safeguarding monthly reports draw together information and raise awareness of concerns relating to provider services in Camden and specific complex cases, informing analysis of trends and issues in safeguarding activities.</p> <p>Safeguarding service manager and lead practitioner work closely with commissioning through joint visits and information sharing to identify areas of provider concerns and to agree actions to provide targeted support including training and deep dive into safeguarding activities.</p> <p>ASC managers and staff continue to contribute to SAR events and disseminate learning.</p> <p>Monthly forums provide an opportunity for sharing of provider concerns between ASC and health senior managers, including commissioning, quality assurance and safeguarding to facilitate information intelligence and joint actions. Further assurance is sought via regular meetings with CQC.</p>	<ol style="list-style-type: none"> 1. Mental Health/Section 75 review. A review of the Section 75 agreement between the Council and Camden and Islington NHS Foundation Trust has been completed. Both organisations have agreed to reconfigure the existing arrangements to seek to strengthen the role of social work within mental health services. 2. The review identified improving safeguarding as a key priority area and work is underway in this regard (safeguarding work stream). 3. Draft performance framework will be monitored under quarterly performance meetings, which includes outcomes around safeguarding. 4. Regular monitoring of safeguarding activities following revision of safeguarding workflow and review of data reporting

Adult Social Care – London Borough of Camden

What has your organisation done in 2018/19 to achieve the priorities of the board	What difference has your organisation made to improve the Safeguarding of adults and in promoting their welfare?	How has your organisation challenged itself and others to improve safeguarding arrangements?	What are your top 3 priorities for 2019/20
<p>The MASH team works closely with the Police, CIFT, CCG and hospital safeguarding leads to promote timely, proportionate multi-agency safeguarding responses.</p> <p>The Deprivation of Liberty Safeguards team continues to process applications in a timely fashion.</p>	<p>Safeguarding service manager, MASH manager, safeguarding lead practitioner and DOLS manager support regular meetings of MAPPA, MARAC, London DOLS Leads and London Modern Slavery Leads group. Joint working is promoted for all of the key safeguarding agendas. Learning is shared from these forums to relevant ASC staff.</p> <p>Making Safeguarding Personal continues to be a priority agenda for safeguarding work as well as for wider strengths-based practice under the three conversations model. There has been minimal increase in the percentage of people being asked about their desired outcomes – 61% in 2018-19 compared to 2017-18, and of their outcomes being fully achieved – 46% in 2018-19 compared to 37% in 2017-18. Our work will continue to be underpinned by the focus on outcomes.</p>	<p>Safeguarding monthly reports draw together information and raise awareness of concerns relating to provider services in Camden and specific complex cases, informing analysis of trends and issues in safeguarding activities.</p> <p>Safeguarding service manager and lead practitioner work closely with commissioning through joint visits and information sharing to identify areas of provider concerns and to agree actions to provide targeted support including training and deep dive into safeguarding activities.</p> <p>ASC managers and staff continue to contribute to SAR events and disseminate learning.</p> <p>Monthly forums provide an opportunity for sharing of provider concerns between ASC and health senior managers, including commissioning, quality assurance and safeguarding to facilitate information intelligence and joint actions. Further assurance is sought via regular meetings with CQC.</p>	<p>5. The condensed concern workflow is aimed to improve response in a timely manner following referral. The revised enquiry workflow will strengthen elements of Making Safeguarding Personal by asking the person about their desired outcomes and how safe they feel earlier in the safeguarding intervention and at the end of the process. There will be a selection of a range of outcomes which cover a holistic assessment of the person's wellbeing. The revised safeguarding plan template including detailed risk assessment will provide more robust management. The breakdown of secondary types of abuse will inform data reporting and themed areas for future audits.</p> <p>6. Rolling programme of safeguarding practice audit, including internal ASC case audit and joint ASC and CIFT audit involving other partners</p>

Adult Social Care – London Borough of Camden

What has your organisation done in 2018/19 to achieve the priorities of the board	What difference has your organisation made to improve the Safeguarding of adults and in promoting their welfare?	How has your organisation challenged itself and others to improve safeguarding arrangements?	What are your top 3 priorities for 2019/20
			<p>7. The revised audit tool details quality markers for the whole of the safeguarding intervention, including Making Safeguarding Personal, application of MCA and the statutory principles of safeguarding, information sharing and recording, involvement of advocacy and multi-agency working. An audit programme will be rolled out to ensure regular quality assurance of safeguarding work.</p> <p>8. Liberty Protection Safeguards (LPS) implementation project</p> <p>9. LBC project group will steer different work streams in preparation for the implementation of LPS, including colleagues across adult social care, children's services, legal, commissioning, performance, learning and development, communications, strategy and change. The LPS project will scope numbers of people who will come under LPS with its expansion into different community and domestic settings, to facilitate a smooth transition from DOLS to LPS. Regular update reports will be taken to senior management and to the SAPB via the Q&P subgroup, to ensure ongoing dialogue with relevant partners.</p>

Camden Carers Centre

What has your organisation done in 2018/19 to achieve the priorities of the board	What difference has your organisation made to improve the Safeguarding of adults and in promoting their welfare?	How has your organisation challenged itself and others to improve safeguarding arrangements?	What are your top 3 priorities for 2019/20
<p>Ensured that all staff have read and understand CCC Safeguarding Policy</p> <p>Safeguarding processes are part of CCC induction programme for all new staff</p> <p>100% of new CCC staff received Safeguarding Adults training</p> <p>100% of new CCC volunteers received Safeguarding Adults training</p> <p>CCC Safeguarding Policy displayed on CCS website and displayed in meeting rooms</p> <p>CCS held a Camden Carers Voice meeting (for current and former carers) on the theme of Safeguarding and the caring role. James O'Reilly, Independent Chair of Camden SAPB was invited along as the key speaker and carers were invited to ask questions and share their experiences, views and ideas.</p> <p>CCC have contributed to Camden SAPB Conference - bringing the carer and family perspective</p> <p>CCC have sat on the SAR sub group helping to draw out common themes that require learning from to prevent similar happenings in the future</p>	<p>CCC has played a central role in strengths based work and tackling of social isolation and loneliness which is a key priority in Camden. CCC in particular are ensuring that the issues for family and carers are fully heard and addressed. Examples of involvement: Family Group Conferencing and Citizen Led FGC; being central to the development of the 3 Conversations model of working in Adult Social Care which at its heart requires joint working, increased dialogue between statutory, health and voluntary sector professionals</p> <p>CCC Support and Wellbeing Workers have supported carers through safeguarding processes and/or have helped to resolve issues which may have been seen as Safeguarding but in fact were issues around the carer not getting the appropriate support/poor communication. On occasions CCC have challenged Adult Social Care to look at things from a different perspective with positive outcomes</p> <p>Carers report that CCC has helped to demystify the term</p>	<p>As key members of the CCG led Complex Care and Neighbourhood MDTs CCC have helped to challenge the thinking of other professionals in particular when addressing concerns around involved family and carers. CCC have then played an active part in working closely with other professionals and families to ensure a more positive outcome for all</p>	

Camden Carers Centre

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Camden Carers Centre

What has your organisation done in 2018/19 to achieve the priorities of the board	What difference has your organisation made to improve the Safeguarding of adults and in promoting their welfare?	How has your organisation challenged itself and others to improve safeguarding arrangements?	What are your top 3 priorities for 2019/20
<p>CCS have carried out numerous Carer Awareness training sessions with professional colleagues. Within this are explored potential safeguarding issues; the importance of positive communication and empathy in regards to the wellbeing of carer and cared for. The sessions are always co-facilitated with a carer</p> <p>CCC have developed a meaningful relationship with Caversham Group practice and in turn the wider neighbourhood – addressing social isolation and building communities</p> <p>CCC feedback quarterly to their Camden commissioners as to how many Safeguarding alerts have been directly raised by CCC and others that CCC have had involvement in. These are then explored at quarterly monitoring meetings to draw out themes/learnings.</p>			

Camden Clinical Commissioning Group

What has your organisation done in 2018/19 to achieve the priorities of the board	What difference has your organisation made to improve the Safeguarding of adults and in promoting their welfare?	How has your organisation challenged itself and others to improve safeguarding arrangements?	What are your top 3 priorities for 2019/20
<p>NHS Camden Clinical Commissioning Group (CCG hereafter) is a statutory partner of the Camden Safeguarding Adults Partnership Board (SAPB). The CCG is represented by the Director of Quality and Clinical Effectiveness, the Designated Nurse for Safeguarding Adults and the Elected Governing Body Member with the safeguarding portfolio. Camden CCG have been represented at all Board and subcommittee meetings in the reporting period. This also includes providing the Deputy Chair for the Board and Chair to the Quality and Performance subcommittee.</p> <p>In this reporting period, the CCG led on development of a toolkit to support the Board's statutory responsibility to undertake Safeguarding Adults Reviews (SARs) to the highest standard. The toolkit includes leaflets for practitioners and the public about the SAR process which have been shared with other Board's as examples of good practice.</p> <p>Working in partnership with the Local Authority and Police, we have participated in audit work to explore Making Safeguarding Personal in mental health practice and monitoring of subsequent action plans.</p>	<p>The CCG safeguarding adults professionals have provided a programme of learning for its member GP practices to support recognition of vulnerability to exploitation in adults. Delivered over two years, the programme has focused on self-neglect, modern slavery and human trafficking, radicalisation, mental capacity and human rights. Our established relationship with partner agencies have enabled Police, Local Authority and Third Sector organisations to contribute expertise to this programme of learning and build safeguarding relationships with GP practices in Camden.</p> <p>The CCG has responsibility for coordinating the local Learning Disability Mortality Review Programme (LeDeR). LeDeR reviews all deaths of people with a learning disability aged 4years upwards to improve care and reduce health inequalities. We have disseminated learning through the partnership around the importance of applying the Mental Capacity Act 2005, providing information to individuals, families, carers and practitioners about the risks of constipation and aspiration pneumonia and awareness of the Safeguarding Adults Board Escalation and Challenge Procedures.</p>	<p>Camden CCG are part of the North Central London Sustainability and Transformation Partnership (STP) which is made up of 28 health and social care organisations in this area. We have joined with our safeguarding adults partners across the STP to develop a forum to share good practice and address challenges. The forum has produced a safeguarding framework that provides assurance on activity while also promoting innovative practice in safeguarding adults such as reducing restrictive practice in health care. The framework will be embedded over 2019/20.</p> <p>As a statutory partner of the Board, we are keen to support innovation and deliver high quality safeguarding learning which is also an effective use of public money. We have supported new approaches to Safeguarding Adult Reviews by utilising our network of suitably qualified and experienced safeguarding experts across London to provide reciprocal arrangements for Independent Chairing of reviews where appropriate.</p>	<ol style="list-style-type: none"> 1. To continue to develop a North Central London approach to safeguarding adults across commissioned health services 2. To implement systems and processes to deliver the CCG responsibilities for the forthcoming Liberty Protection Safeguards 3. To support member GP practices to comply with the competencies set out in the Intercollegiate Document for Safeguarding Adults.

Camden Clinical Commissioning Group

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<p>Through our commissioning responsibilities, we have gained assurance that all commissioned services have appropriate arrangements in place to safeguard adults and work with other agencies to share clinical expertise to the local partnership. The CCG and NHS Trusts have published Modern Slavery Statements which set out the NHS commitment to tackle modern slavery. The CCG have membership of the Modern Slavery steering groups for NHS England and London, sharing information from these with the local partnership.</p>	<p>As part of both LeDeR and SAR learning, the CCG held a GP Mental Capacity Masterclass in September 2018, this was well attended and well evaluated. 97% of attendees reported they would be more likely to use the mental capacity templates within the electronic patient record as a result of the session.</p>	<p>We have developed and implemented a safeguarding adults and children assurance framework for our member GP Practices. The framework enables practices to review and record their safeguarding arrangements and share those with the CCG as part of providing assurance.</p>	

Camden & Islington Mental Health NHS Foundation Trust

What has your organisation done in 2018/19 to achieve the priorities of the board	What difference has your organisation made to improve the Safeguarding of adults and in promoting their welfare?	How has your organisation challenged itself and others to improve safeguarding arrangements?	What are your top 3 priorities for 2019/20
<p>During the year 2018/19 the Trust has committed itself to the goals of ensuring all service users and patients are protected from abuse and neglect and that we have the systems and processes in place to work effectively with our partners to realise the priorities of the board.</p> <p>Throughout 2018/19 the Trust has been committed to building processes with our partner agencies to effectively manage the raising of safeguarding adult concerns and leading and supporting both statutory and non-statutory safeguarding adult enquiries where there is a requirement to do so.</p> <p>Throughout the year the existing section 75 partnership arrangements have been undergoing extensive review and the Trust is committed to maintaining a spirit of collaboration, cooperation and coordination with our partner agencies into the future.</p> <p>During 2018/19 the Trust has been committed to ensuring the Making Safeguarding Personal initiative and the principles of both the Mental Capacity Act and the Care Act are at the heart of safeguarding practice and performance.</p>	<p>The Trust is required by its Clinical Commissioning Group (CCG) to meet 80% minimum compliance target at all levels for safeguarding adults Core Skills training. At the end of March 2019 these were: Level 1 (all staff in non-clinical roles) – 87%; Level 2 (all staff in non-registered clinical roles) – 92%; Level 3 (all staff in registered clinical roles) – 95%; Level 4 (specialist practitioners) – 100%.</p> <p>With regard mental capacity Core Skills training the Trust at the end of March 2019 recorded 83% compliance across all staff against a CCG target of 80%</p> <p>For the Prevent Core Skills training the Trust at the end of March 2019 recorded 93% compliance for Level 1-2 Basic Prevent Awareness Training (BPAT) and 95% compliance for Level 3 Workshop to Raise Awareness of Prevent (WRAP) both against a NHS England target of 85%; and 100% compliance for Level 4 specialist practitioner roles.</p>	<p>The Trust has challenged itself through a variety of routes.</p> <p>First, the Trust in 2018/19 has been building on the outcomes of the quality inspection by the Care Quality Commission in December 2017 through repositioning safeguarding from Operations Management to the Nursing Directorate and developing a Safeguarding Hub to oversee the performance of concerns raised and enquiries undertaken. A compliance audit of Hub performance is submitted to the Trust Safeguarding Committee each Quarter as evidence of assurance.</p> <p>Second, the Trust has developed a Safeguarding Operational Group to support the Trust Safeguarding Committee and the Acute Division.</p> <p>Third, there has been the development of a number of safeguarding products, practice guidance and 'grab sheets' across the Trust, including updated safeguarding screen savers and a YouTube safeguarding presentation.</p>	<p>The Trust has five key priority outcomes for 2019/20.</p> <p>Priority Outcome 1: ASSURE PRACTICE – We will make sure practice is person-centred and outcome focused.</p> <p>Priority Outcome 2: PREVENT – We will prevent abuse and neglect where possible.</p> <p>Priority Outcome 3: RESPOND – We will assure responses are timely and proportionate when abuse or neglect have occurred.</p> <p>Priority Outcome 4: LEARN – We will assure safeguarding practice is continuously improving and enhancing the quality of life of adults and children.</p> <p>Priority Outcome 5: AUDIT – We will ensure safeguarding practice is supported by sound and resilient audit.</p> <p>Our aim in the Trust is to ensure that formal safeguarding adult processes are appropriately applied where applicable and that our service users and patients are empowered to determine the outcomes they desire to prevent or minimise the continuation of abuse and neglect or the risk of it.</p>

Camden & Islington Mental Health NHS Foundation Trust

What has your organisation done in 2018/19 to achieve the priorities of the board	What difference has your organisation made to improve the Safeguarding of adults and in promoting their welfare?	How has your organisation challenged itself and others to improve safeguarding arrangements?	What are your top 3 priorities for 2019/20
<p>In meeting this objective the Trust has been committed to ensuring there are sufficient numbers of suitably qualified, competent, skilled and experienced staff deployed across all service areas and at all levels of the organisation in order to meet the priorities of the Board.</p> <p>In this respect the Trust is confident that staff who perform a safeguarding adult function will receive appropriate training, support, and supervision as is necessary to enable them to deliver the priorities of the Board.</p> <p>Central to this priority has been the empowerment of our service users and patients by placing their outcomes at the heart of all our safeguarding deliberations.</p>	<p>The Trust recorded a total of 347 safeguarding adult concerns raised during 2018/19 on the Datix incident log. These comprised: (i) Financial Abuse (82); (ii) Domestic Abuse (64); (iii) Physical Abuse (52); (iv) Sexual Abuse (48); (v) Psychological Abuse (43); (vi) Neglect (18); and (vii) Self-Neglect (15). This is at variance with the national data which identifies Neglect as the primary category.</p> <p>In addition to the above, the Trust recorded a total of 67 Prevent concerns raised during 2018/19.</p> <p>During 2018/19 the Trust delivered an integrated safeguarding adults and children learning programme within a Think Family approach based around the theme of exploitation which incorporated both the Making Safeguarding Personal and the Awareness & Response to Domestic & Sexual Abuse (ARDSA) initiatives.</p> <p>The outcome for the Trust being consolidated progress in safeguarding adults at risk from abuse and neglect, safeguarding children from maltreatment and protecting our communities from radicalisation and extremism.</p>	<p>Fourth, the Trust embarked on a major project with our two main borough partners to develop the Trust's Carenotes electronic patient record as the as the primary platform for the documentation of safeguarding in the Trust. The Trust anticipates that this infrastructure development will reduce risk and improve safeguarding outcomes.</p> <p>Fifth, the Trust has undertaken five single agency and eight multi-agency audits during 2018/19. These audits have provided both assurance of good practice and insight into performance where service improvement requires additional scrutiny.</p> <p>Sixth, the Trust has participated in three Challenge Events (North Central London – NCL / Camden SAPB / Islington SAPB) following submission of the Safeguarding Adults at Risk Audit Tool (SARAT) where responses were analysed and further actions identified.</p>	<p>To enable us to achieve this aim our top three priorities for safeguarding in 2019/20 are:</p> <ol style="list-style-type: none"> 1. To develop and enable the Trust Safeguarding Hub to generate best safeguarding practice throughout the Trust. This includes adoption and dissemination of the revised and updated pan-London Safeguarding Adults Policies and Procedures together with the amended Care and Support Statutory Guidance Chapter 14. 2. To work with partner agencies to develop the Trust Carenotes electronic patient record to hold the safeguarding adults workflow for adults at risk with mental health needs requiring a response from the Trust. 3. To maintain Core Skills training compliance at 90% for all Trust staff regarding safeguarding adults, safeguarding children, Prevent and mental capacity.

Central & North West London NHS Foundation Trust

What has your organisation done in 2018/19 to achieve the priorities of the board	What difference has your organisation made to improve the Safeguarding of adults and in promoting their welfare?	How has your organisation challenged itself and others to improve safeguarding arrangements?	What are your top 3 priorities for 2019/20
<p>The Trust's clinical information system SystemOne has a Safeguarding Information Node which allows all users to record significant safeguarding events and these can be viewed by all clinicians involved in a child or adult's care and in all external organisations that use the same system. This will lead to improved identification and information sharing of adults and children at risk.</p> <p>The past year has seen an increased focus for the Safeguarding Adults Team on the Mental Capacity Act (MCA), given the upcoming changes to legislation.</p> <p>The development of a Mental Capacity Assessment template for SystemOne is an important achievement for CNWL. It will provide assurance that staff are carrying out legally literate mental capacity assessments for all important decisions whilst complying with the principle of the Act.</p>	<p>Following a combined Serious Incident investigation of safeguarding adults incidents at St Pancras Rehabilitation Unit (SPRU), learning was widely shared across the services. Knowledge around MCA in relation to Safeguarding Adults was flagged up in the report as a concern, however, not deemed to be a contributory factor to the incidents.</p> <p>Nevertheless, MCA training/ Safeguarding Adults training session and material was increased to improve staff confidence in relation to identifying and raising concerns. A weekly improvement meeting continues to monitor progress.</p> <p>Vignettes (train-the-trainer) sessions as a training-pilot with champions have been introduced to the newly nominated Safeguarding Champions on all SPRU wards. They've attended initial Champion training and have received a Champion's Handbook (currently in draft form amid further development). Bi-monthly Safeguarding Adults Supervision will be provided in addition to ad-hoc advice and support.</p>	<p>With the upcoming changes to legislation and the introduction of Liberty Protection Safeguards (LPS) CNWL is preparing for the role as a 'Responsible Body' and this challenge has been added to the set of key priorities for 2019/20.</p> <p>Another major challenge identified will be to promote a higher awareness of the MCA in our clinical teams, and a better conception of how to assess mental capacity, including good documentation.</p> <p>To address this challenge the Trust has developed a recording template which will be easily accessible on SystemOne and provides guidance prompts for staff wanting to evidence their interactions with service users. This will be of particular importance when decisions are challenged or may be contradictory to previous assessments.</p> <p>A recent case highlighted the difficulties of managing a patient's safely when he refused interventions against clinical advice with. Following this challenging incident, additional bespoke MCA training will be rolled out around assessing mental capacity, best interest decisions, including supporting clinical staff with the necessary documentation.</p>	<p>MCA:</p> <ol style="list-style-type: none"> 1. The review of the MCA and the subsequent Amendment Act will require considerable work in the coming year to be prepared as a 'Responsible Body' as well as addressing and improving the legal literacy of all staff on the MCA. 2. We are further developing understanding of the MCA by implementing the Essential to Role training programme. The Mental Capacity template has to be embedded in practice and documented through SystemOne. 3. Early discussions have already taken place around the introduction of LPS within the Safeguarding and MCA Team but this will form a major priority for the Safeguarding Teams in this coming year.

Central & North West London NHS Foundation Trust

What has your organisation done in 2018/19 to achieve the priorities of the board	What difference has your organisation made to improve the Safeguarding of adults and in promoting their welfare?	How has your organisation challenged itself and others to improve safeguarding arrangements?	What are your top 3 priorities for 2019/20
<p>An interactive e-learning package has been developed with an associated competency test at the end. This training focuses on the key principles of the Act and how to conduct a mental capacity assessment and best interest decisions. This will be mandatory for all clinical staff and is based on the National Competency Framework.</p> <p>It is currently in the testing phase and will be launched during Quarter 2 2019/20 (Q2).</p> <p>A Trust Lead for Modern Slavery has been identified who will ensure that the Trust is represented in regional and local anti-slavery partnerships.</p> <p>Clinical Message of the Week on Modern Slavery was recently published online accessible to all staff in the Trust.</p> <p>Named professionals, safeguarding adult specialists and safeguarding advisors are continuing to raise safeguarding awareness within the Trust, taking appropriate action in response to emerging issues, offering training and supporting improvements in the service. The Trust has continued to be committed partner on all of the Local Safeguarding Adults Boards (LSAB) and will continue a central role in working with partners in developing local arrangements.</p>	<p>In collaboration with NHS England and the Home Office, CNWL now offer an e-learning package of Prevent to all members of clinical staff. There has been a sharp uptake of the e-learning training, which has enabled us to exceed the national target of 85% compliance. CNWL are currently at 96% for Prevent basic awareness and 90% for WRAP, a 5% increase for both.</p> <p>The Trust hosted a learning event on Domestic Abuse (November 2018) with the aim of raising the profile, increasing staff awareness and more formally launching the refreshed Domestic Abuse policy. The event was full to capacity – with speakers from a range of specialist services and agencies working with individuals and families impacted by domestic abuse (including adolescent to parent violence, specific concerns for the LGBTQ+ community and survivors relating their own stories). Feedback was extremely positive and demonstrated staff commitment to working with and understanding this complex area.</p>	<p>As a further support for our planned development in Mental Capacity practice, we are ensuring that MCA training becomes formally registered as essential to role for certain staff groups, which will enable us to more closely monitor compliance levels in this important subject.</p> <p>We also keeping up the pace to further improve on-going good practice in managing pressure ulcers with techniques developed in other parts of CNWL. These have had an acknowledged impact elsewhere and we are keen to develop them in our community services in Camden as well as on our in-patient wards.</p>	<p>Modern Slavery:</p> <ol style="list-style-type: none"> 1. CNWL are in the process of developing bespoke training for corporate staff in Procurement and Human Resources on the implications of the Act. This was an action from 2017-18 that has had to be rolled over to 2018-19 as other priorities have taken precedence. However, advice and training about modern slavery and human trafficking is available to all staff through the statutory and mandatory safeguarding training. <p>The Trust will ensure that we have a transparent Modern Slavery Statement on our External website in line with the Modern Slavery Act 2015.</p> <p>MSP:</p> <ol style="list-style-type: none"> 2. The Trust will be embedding MSP in practice, using the 8 step model. <p>The aim is to embed positive person-centred outcomes in practice and record these clearly on SystemOne.</p> <ol style="list-style-type: none"> 3. The priority is to have all agencies placing the MSP model at the centre of their response to vulnerable adults.

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<p>The Trust now has a nominated Making Safeguarding Personal (MSP) Lead who will promote this important agenda to so that all agencies place the MSP model at the centre of their response when dealing with safeguarding adults concerns.</p> <p>Safeguarding Adults Training: As of end of Q4, 2018/19 Level 1/2: 95% Level 3: 95%</p> <p>MCA (Currently not mandatory training for CNWL thought the issue continues to be covered at Trust Induction and further mandatory safeguarding training session, see above).</p> <p>Prevent As of end of Q4, 2018/19 Basic awareness: 96% for Workshop to Raise Awareness of Prevent (WRAP): 90%</p>			

Commissioning – London Borough of Camden

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<p>Commissioning teams continue to lead on service improvement across our commissioned services and are leading on the development of a quality standard framework. There is a focus on developing these standards collaboratively with providers to ensure they adopt a practical approach that leads to sustainable service improvements. Commissioners work in partnership with providers, for example through quarterly provider forum meetings. This ensures they are up to date with good practice, policy and local priorities such as Camden's approach to strength-based working or discharge to assess processes.</p> <p>We have improved the way we report about the quality of providers to the board to give a more strategic overview of the performance of all providers in Camden and to highlight key themes and trends within the services.</p>	<p>We meet quarterly with CQC to share information on safety and performance of all Camden based providers. We also work closely with CQC to follow up any issues identified through the inspection framework. We operate a quality assurance mailbox which enables social workers to alert commissioners of quality concerns. We respond to these quality alerts on an individual basis as required but also use the information to discuss general trends and quality issues with providers at monitoring meetings. Following quality alerts or safeguarding concerns, we ask providers to conduct root cause analysis so that we and they continue to take a Camden based "pr" approach to improving quality and to reduce the risk that a quality alert or safeguarding will occur again.</p> <p>We continue to work closely with the CCG's quality and safety team, for example undertaking joint visits to providers. We regularly report to the CCG Governing Body Quality and Safety Committee on performance and quality of providers</p>	<p>To challenge others to improve safeguarding arrangements our team continues to conduct safeguarding site visits with the safeguarding lead from ASC and/or the CCG. Our team continues to conduct safeguarding site visits with the safeguarding lead from Committee on performance and quality relating to employee recruitment and supervision, case files including risk assessments and medication administration charts, safeguarding practice, policy and examples of investigations. Where necessary we develop an improvement plan with the provider and build this into the usual monitoring process.</p> <p>We have challenged ourselves to improve contract monitoring practice and we are now testing out a more outcome focused approach to monitoring with providers.</p>	<p>Our top three priorities are:</p> <ol style="list-style-type: none"> 1. Measuring outcomes and what is important to our service users and monitoring our services to ensure these outcomes are delivered 2. Ensuring value for money from all our contracts 3. Developing more collaborative partnerships with providers

Community Safety & Emergency Management Service – London Borough of Camden

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<p>We have been able to increase investment in new projects and roles to tackle rough sleeping and anti-social street activity with the formation of the Camden Hotspot team: a multi-agency team composed of specialist outreach workers, Police and council patrol officers.</p> <p>At the heart of our street population services is our core outreach team providing vital service interventions and case management for vulnerable adults on our streets.</p> <p>We have delivered a hate crime reporting campaign during National Hate Crime Awareness Week holding drop in surgeries to encourage people to report hate crime. We have also increased the number of reporting sites to allow our most vulnerable residents to report.</p>	<p>Continue to reduce the risk of high-risk victims of Domestic Violence and abuse (DVA). Community Safety recently were successful in joining Pathfinders project working with Mental Health services to identify and support DVA victims who present to services. DV practitioners are co-located in a number of services including iCope, Early Intervention Service and Assertive Outreach Team</p> <p>We have reduced the numbers of rough sleeper by 40% i.e. we have supported 144 vulnerable people to move off the streets.</p>	<p>A collaborative partnership approach is integral to our work in making our residents and communities safe. Both our Domestic Violence & Abuse MARAC (Multi-Agency Risk Assessment Conference) and our Community MARAC focus on the Safeguarding aspects of all our MARAC subjects. As part of this Partnership, we both challenge and support the agencies in progressing any Safeguarding concerns.</p>	<p>Our top 3 priorities are:</p> <ol style="list-style-type: none"> 1. Domestic Violence 2. Drug Related Harm 3. Youth Safety <p>Anti- Social Behaviour (including rough sleeping and street activity)</p>

Hopscotch Asian Women's Centre

What has your organisation done in 2018/19 to achieve the priorities of the board	What difference has your organisation made to improve the Safeguarding of adults and in promoting their welfare?	How has your organisation challenged itself and others to improve safeguarding arrangements?	What are your top 3 priorities for 2019/20
<p>Hopscotch Homecare is a service providing homecare to South Camden under contract to Social Services.</p> <p>This year our service has gone from a small local one to this large contract and given us an opportunity to provide employment as care workers (and therefore empowerment) to local men and women, many of whom are stepping into reliable employment for the first time.</p> <p>The vision of every programme in our charity is focussed on providing our service users with a quality provision and we have achieved that this year.</p>	<p>Winning our homecare contract has exposed us to larger safeguarding risks and making us step up to a higher mark in all aspects of our service.</p> <p>We have conducted over 140 risk assessments.</p> <p>In other areas of the charity, like our Domestic Violence and Welfare support where we work with vulnerable adults, we have added in extra support for our workers to protect them, increase their knowledge and empower them to be able to do even more.</p> <p>Being part of the SAPB has broadened the outlook of the organisation to prioritise safeguarding in all our programmes and areas of work.</p>	<p>This year, as part of the contract with Camden we have had to take on many clients who have been transferred to us from other areas of Camden. To be able to manage this huge input, whilst protecting our new clients by ensuring their needs are properly met, has been a challenge which we have met.</p> <p>Half way through the year we employed new staff members very qualified and experienced in safeguarding who were able to audit our work and put improvements in place.</p>	<ol style="list-style-type: none"> 1. Ensure full/refresher/specialist training is provided to every care worker and staff member in a timely manner, including training for a new lead safeguarding officer. 2. Offer qualifications in Health and Social care to those staff members who are keen to move forwards in this industry. 3. To ensure that all new programmes have safeguarding training as a top priority for the staff who will deliver the work.

London Community Rehabilitation Company

What has your organisation done in 2018/19 to achieve the priorities of the board	What difference has your organisation made to improve the Safeguarding of adults and in promoting their welfare?	How has your organisation challenged itself and others to improve safeguarding arrangements?	What are your top 3 priorities for 2019/20
<p>Our focus in 2018/19 in relation to safeguarding has been twofold: first to strengthen our visibility across the partnership and secondly to ensure staff are skilled in the recognition of and responsiveness to any safeguarding concerns.</p> <p>LCRC have a centralised Public Protection Board established. The Boards' remit is to monitor quality and performance within our operational team and to have oversight to our wider safeguarding action plans which incorporate learning from Serious Case Reviews and Joint Targeted Area Inspections. These boards support us to focus and therefore develop our core expertise on risk management and desistance. Ensuring that all delivery including interventions, programmes and one to one work places emphasis on reducing reoffending and public protection. This also supports our commitment to working in partnership to enable excellent communication and information sharing.</p>	<p>LCRC have also developed a new case recording and assessment tool, REACTA, which specifically focuses on risks posed by the Service User to any identified children or vulnerable adults. London wide training has been delivered to our operational staff in the use of REACTA to increase our organisational responsiveness to the needs of children through thorough assessment, timely actions and managerial oversight.</p> <p>Our new operating model has allowed greater oversight to our Service User population and greater engagement with our local partners. The recent HMIP inspection published on 8 March 2018 shows a considerable uplift in our management of Service Users, which signifies a greater containment of risk and reduction in re-offending.</p>	<p>LCRC will continue to strengthen our management of Service Users in the community through increased managerial support, increased partnership working and the development of evidence based interventions reflective of our Service Users needs. This ambition is present across our organisation and will continued to be the focus of our work in the future.</p> <p>To develop this further we are in liaison with the Child Safeguarding Leads in Camden to arrange briefings for the CRC staff around Adult Safeguarding and engaging in other meetings such as Multiple Complex Needs, Vulnerable Adolescents Strategy Group and 18+ Together. We continue to have lead SPOCS managing the SGO cases. Raising awareness of expectation of CRC staff when making referrals and involvement in multi-agency meetings and learnings from Serious Case Reviews would significantly develop and increase multi-agency working.</p> <p>Our commitment to safeguarding children remains paramount and will continue to be so.</p>	<p>Our priorities for 2019/20 includes:</p> <ol style="list-style-type: none"> 1. Quality focus, workforce, interventions & innovation. 2. Stakeholder engagement 3. CRC attendance at Adult Safeguarding Boards.

London Community Rehabilitation Company

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<p>In respect to strengthening our visibility and partnership working, five Contracts and Partnerships Managers have been deployed across the specific LCRC areas with this as their strategic focus. They are tasked with attendance at Safeguarding Children's Boards, engagement with Serious Case Reviews and Joint Targeted Area Inspections, along with building relationships with our key stakeholder.</p>	<p>LCRC have also developed a new case recording and assessment tool, REACTA, which specifically focuses on risks posed by the Service User to any identified children or vulnerable adults. London wide training has been delivered to our operational staff in the use of REACTA to increase our organisational responsiveness to the needs of children through thorough assessment, timely actions and managerial oversight.</p> <p>Our new operating model has allowed greater oversight to our Service User population and greater engagement with our local partners. The recent HMIP inspection published on 8 March 2018 shows a considerable uplift in our management of Service Users, which signifies a greater containment of risk and reduction in re-offending.</p>	<p>It is our intention that with the imposition of a new case recording and assessment approach, REACTA, all our Offender Managers will be able to provide a thorough and thoughtful analysis of the risks presented to any children in contact with Service Users and for robust actions to be implemented in order to safeguard identified children. With this, the envisaged impact will be a reduction in unnecessary checks causing local authorities undue strain as well as an uplift in quality referrals and multi-agency working. The effectiveness of this approach will be measured over the next 12 months.</p> <p>Whilst the imposition of REACTA is still in its infancy, the impact of the tool has not yet been able to be measured. Our intention is for all Offender Managers to provide a thorough and thoughtful analysis of the risks presented to any children in contact with the Service User and for robust actions to be implemented in order to safeguard identified children. With this, the envisaged impact will be a reduction in unnecessary checks causing local authorities undue strain as well as an uplift in quality referrals and multi-agency working.</p>	<p>Our priorities for 2019/20 includes:</p> <ol style="list-style-type: none"> 1. Quality focus, workforce, interventions & innovation. 2. Stakeholder engagement 3. CRC attendance at Adult Safeguarding Boards.

Housing Department – London Borough of Camden

What has your organisation done in 2018/19 to achieve the priorities of the board	What difference has your organisation made to improve the Safeguarding of adults and in promoting their welfare?	How has your organisation challenged itself and others to improve safeguarding arrangements?	What are your top 3 priorities for 2019/20
<p>We finalised plans for a new landlord service at the beginning of 2019. We decided to change the way we work so that instead of having to deal with different council teams for different things, our residents would have a new neighbourhood housing officer as their single trusted point of contact. We also decided to have more housing officers with fewer homes to look after and more time to get to know the people who live in them. Our new service will be accessible and approachable to make it more likely that people who need help will ask for it and /or accept it.</p> <p>Staff in the new neighbourhood teams will use reflective practice and be trained in listening and communications skills to help them develop understanding relationships with residents. We appointed a psychologist for the first time in January 2019; she is supporting staff to work with residents who have mental health problems to improve the services they receive.</p>	<p>Housing services contribute to safeguarding adults in multiple ways from cleaners and caretaking staff who act as the Council's "eyes and ears" on estates, to repairs staff who make homes safe, housing officers who tackle anti-social behaviour and support workers who work with the most vulnerable.</p> <p>Staff in housing roles are well placed to identify safeguarding issues. Rent officers and staff who provide money advice for example may be the first to identify financial abuse. Housing Options staff may be the first advisors to speak to someone fleeing domestic violence when they receive an enquiry about rehousing. As a result the Council ensures all housing staff receive mandatory safeguarding training and understand the contribution they can make in their individual roles.</p>	<p>Our Landlord Services review put a spotlight on our services. We tested how we work against what our tenants have told us about the kind of landlord they want us to be. This formed the basis of our new service.</p> <p>Our service welcomes and supports resident scrutiny and challenge especially through the work of our tenant participation team.</p>	<ol style="list-style-type: none"> 1. Successful launch of our new neighbourhood teams in the north of the borough from June 2019 and in the south from September 2019. 2. A new caretaking service for our residents following our caretaking review. Our estate caretakers are often the first port of call for our most vulnerable residents. 3. Implementation of the improvements identified by our sheltered housing review.

Housing Department – London Borough of Camden

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<p>In November 2018 we began our caretaking review. This recognises the importance of our estate caretakers as the visible face of the Council on the ground and, often, the first port of call for our most vulnerable residents. We consulted with 1587 residents to identify their priorities at the beginning of 2018 using community researchers to do home visits to help make it easy for our oldest residents to take part.</p> <p>We increased the number of specialist debt and welfare benefits advisors in our service in response to Universal Credit and to help front line housing staff support residents with money issues. Our landlord services identified this as one of the main areas our tenants want us to help them with.</p>			

London Fire Brigade – Camden

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<p>London Fire Brigade have continued to carry out Home Fire Safety Visits and have prioritised those who are more vulnerable in the community</p> <p>In Camden 2664 home fire safety visits have been carried out in 2018/19 and as well as fitting smoke alarms home fire safety advice has also been provided.</p> <p>All secondary school in Camden are being targeted to give fire safety advice on the risks of fire.</p> <p>Care homes have also been visited to ensure the elderly receive safety in the home advice.</p>	<p>All crews in Camden have carried out safeguarding training and are able to recognise the signs of abuse and are aware of the procedures to report abuse.</p> <p>London Fire Brigade are developing a more in-depth 'Safe & Well' visit which enables staff more time with the vulnerable communities and be able to sign post more assistance</p> <p>Staff are continually looking at ways to give safety advice, such as the recent initiative of visiting children centres for new mothers and ensuring they review the fire risks within their home with young children, especially escape plans in case of fire.</p>	<p>LFB staff have undertaken safeguarding training.</p> <p>Camden's three fire stations have all undertaken dementia awareness to become dementia friendly with a number of staff being dementia champions. We will be considering how we can further roll this out to further expand their role to welcome the community into the fire stations</p>	<ol style="list-style-type: none"> 1. Stations to become more open to the public such as dementia safe havens 2. To focus on the most vulnerable in community for home safety visits 3. To work with partners to reduce the risk of hoarding.

Metropolitan Police (Camden)

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<p>Following the omni-competence model currently embedded with Central North Safeguarding, the training has been implemented and a robust training program around Safeguarding continuing into 2019/2020. This is being delivered by the central Safeguarding Training team. This has increased the knowledge and skill set of officers to recognise and deal effectively with the abuse of vulnerable adults.</p> <p>The SG Hub Chief Inspector has represented the MPS at Board level and is co-chair of the SAR sub-group. Having the additional CI role ensures that the MPS is able to fully meet its partnership role requirements with the proper managerial oversight of the Multi Agency Safeguarding Hub (MASH). This has been essential in enhancing a partnership approach.</p> <p>A Local Policing Team Inspector co-chairs the community MARAC meeting. This provides a forum for a structured plan involving all relevant agencies. This has been supported by the Policing and Partnership Team.</p>	<p>There has been a corporate Abuse and Neglect of Vulnerable Adults (ANVA) Policy and Toolkit published by the MPS. This provides a guide for officers from both initial investigation to secondary supervision and provides an overview of the Care Act and the Mental Capacity Act. There is also a Lead Responsible Officer (LRO) who leads on ANVA for the MPS. This provides clear ownership and direction learning lessons from the Safeguarding Children Review. This makes up one of the strands of Vulnerability overseen by a Commander.</p> <p>The Safeguarding Adults Dashboard has been completed and provides staff with insight on reported crime and crime type against vulnerable adults. These crimes are marked with a Vulnerable Adults (VA) flag. The Dashboard also provides details on Adult Coming to Notice (ACN) Merlins and allows further breakdown of reasons why come to notice and will link to name of subject. There were 5268 ACN across Central North BCU in the last 12 months (to May 2019) that were recorded on the MPS Merlin system (26% repeat subjects).</p>	<p>Recognising that the monthly MARAC meeting could delay essential support for vulnerable adults, the MPS are leading on a project to establish MARAC best practise and have visited other force areas to review other meetings for assessment.</p> <p>We continue to actively contribute to the SAR process so that we maximise every opportunity to learn and develop best practice in adult safeguarding. MPS are working with the LA to introduce an audit process for the MARAC meetings.</p> <p>Safeguarding have identified that there is a requirement for officers to build key relationship with Adult Social Care to assist with investigation of vulnerable adults within a carer environment. The unit is currently being implemented.</p> <p>It has been identified (through the Dashboard) that Vulnerable Adults are not being accurately recorded on the crime reporting system. Training from a Safeguarding officers has been completed across all Emergency Response Teams.</p>	<ol style="list-style-type: none"> 1. There is significant complexity around investigations into the Abuse of Vulnerable Adults within a care setting, whether that is within the home environment by carers or family members of in a hospital / residential setting. This includes a suspicion of death due to neglect. Although training has increased the skillset within the omni-competence model this requires specialist response. A small unit will be formed to deal solely with these investigations. This will enable the officers to form strong working relationship with ASC and become Subject Experts within this area. To improve response to ANVA investigations in carer setting. 2. To develop, with the LRO, a bespoke strategic plan for Safeguarding Adults for central North. This will incorporate all aspects of Central North Safeguarding and the police response.

Metropolitan Police (Camden)

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<p>There has been a partnership approach between CN and NHS Mental Health Trusts. This has incorporates a SIM officer who holds a number of cases of persons who repeatedly come to notice of police and Mental Health Teams. The SIM officer currently holds 10 cases. This assists in a partnership plan for subjects.</p>			<p>3. To continue to deliver training and explore options of training with external agencies to build relationships and understand perspectives. To hold and maintain an up to date skills audit of officers. To look for good practice in other force area's in dealing with Vulnerable Adults.</p>

Royal Free Hospital NHS Foundation Trust

What has your organisation done in 2018/19 to achieve the priorities of the board	What difference has your organisation made to improve the Safeguarding of adults and in promoting their welfare?	How has your organisation challenged itself and others to improve safeguarding arrangements?	What are your top 3 priorities for 2019/20
<p>1. Royal Free London NHS Foundation Trust Safeguarding Adults & MCA training compliance: LI 1: 88%, L 2: 87%, L 3: Prevent BPAT/WRAP : 86%</p> <p>2. Safeguarding concerns: 1076, +83%, an amazing increase.</p> <p>3. Top 3 concerns raised: Neglect - 54% Self-Neglect : 10% Domestic Violence: 9%</p> <p>4. Completed 1 and finalising a 2nd LeDeR Review</p> <p>5. Safeguarding Adults Review: Implemented sessions learnt from Camden & Islington SAR's</p> <p>6. Hospital based Domestic & Sexual Violence Advisor (IDSV) continue to have a positive presence in the team, resulting in the increase in referrals.</p> <p>7. The Safeguarding Team with members of the Public Health team are organising a week of awareness sessions to support our staff reporting Domestic Abuse that they may be suffering in silence.</p>	<p>1. The increase in staff training and awareness has resulted in the increase of referrals for DV, neglect & people who self-neglect</p> <p>2. Lessons learnt from SAR's has resulted in bespoke MCA training delivered to the Endoscopy unit at RFH.</p> <p>3. Level 3 safeguarding adult training has predominantly focused on MCA and has been delivered across all three hospital sites</p> <p>4. Two Access 2 Acute (A2A) films are being finalised for staff working in inpatient and outpatient departments around the care of people with a learning disability</p> <p>5. Our Acute Liaison Nurses (ALNs) now have access to photo symbols and have produced an easy read information leaflet about safeguarding</p> <p>6. Our ALNs were nominated for a Nursing Times Award as part of the A2A London Network</p>	<p>There are monthly Safeguarding Meetings with the Safeguarding Team where key issues and areas of development are discussed and actioned.</p> <p>There are quarterly safeguarding operational group meetings across sites which include representation from matrons and senior staff, and report on progress and future plans for safeguarding</p> <p>There is a quarterly Safeguarding Adults and Children Committee which works to improve safeguarding arrangements across the Trust.</p> <p>A member of the safeguarding team is attending the Camden SAPB Multi-Agency Self-Neglect Toolkit Task & Finish Group, which will help to improve the outcome for clients who are self-neglecting when they present in the acute setting.</p> <p>ALNs took part in the Task and Finish Group: Constipation & Aspiration Pneumonia information cards</p>	<p>1. To launch a campaign in July 2019 to raise awareness of support systems in place for staff experiencing domestic abuse, in response to our survey results.</p> <p>2. To work with newly nominated safeguarding link workers from each ward/department, ensuring that our strategy and plan is delivered through collaborative working.</p> <p>Seven minute briefings to be delivered in every area where we have a link worker every month to promote and train on key priorities</p> <p>3. Continue to deliver level 3 safeguarding adult training. The safeguarding team has commenced adult safeguarding level 3 training to our staff, with a wide range of topics which is part of our mandatory training programme.</p>

Royal Free Hospital NHS Foundation Trust

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<p>8. The Safeguarding Adult Lead is a member of the forum to write the Code of Practice for the new LPS MCA Standard</p> <p>9. RFLNHSFT is a member of the London Mental Capacity Forum.</p> <p>10. The Adult Safeguarding Lead is also the chair of NHS England and NHS Improvement – London Safeguarding Adult and Prevent Provider Forum.</p> <p>11. Written an integrated Restraint Policy and reviewed our Allegations against Staff Policy in response to learning from a Serious Incident report.</p>			<p>Training will follow a modular model and will strongly focus on MCA/DoLS but also include seminars on domestic abuse, trafficking/modern slavery, substance misuse, homelessness, self-neglect, Making Safeguarding Personal and other safeguarding themes. Where possible the children safeguarding and adult safeguarding level 3 training will be combined and delivered together in a session promoting a think family approach</p>

Tavistock & Portman Hospital NHS Foundation Trust

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<p>The Trust has sought to strengthen the links with the Camden Safeguarding Adults Board and its sub-groups.</p> <p>The Trust's Medical Director has met with the Camden SAB Chair and has been attending the quarterly board meetings as well additional Board events e.g. SARAT Challenge Event. The Trust has agreed to attend sub-groups where this is required such as Safeguarding Adult Reviews or where representation is considered useful by the CSAB.</p> <p>Review of the Adult Safeguarding Training Programme.</p> <p>The Trust completed a mapping of the workforce in respect of roles and responsibilities against the levels of the Intercollegiate skills and competencies.</p> <p>briefing paper on Intercollegiate document and new requirements around adult safeguarding training, was sent to the Trust Board. This led to the Trust agreeing a new mandatory adult safeguarding training programme and how this is delivered. Notice has gone out to all teams to advise of Level 1 & 2 Adult Safeguarding E-Learning Training now available and how to access this.</p>	<p>Nature of Trust Services:</p> <p>The Tavistock is a specialist mental health service and its adults' services are predominantly ones which provide psychoanalytic psychotherapy or other types of therapy e.g. family therapy. As such, the very nature of the services delivered are about promoting the wellbeing of their patients. Patients often feel safe enough with a therapist to disclose where they are experiencing or have experienced abuse. Patients are often referred into these services because of their experiences of abuse. As such, Therapists and Psychiatrists are well placed to support these adults psychologically and emotionally in a way that enables them to recover from the trauma and go on to access the other types of support they may require.</p> <p>Safer Recruitment Training has been delivered across the Trust.</p> <p>At least one of the panel members on all interview panels will have completed the safer recruitment training: this has resulted in panels making informed and safe decisions.</p>	<p>The Trust was inspected by the CQC. The results can be seen here:</p> <p>A Trust wide survey was undertaken to establish the level of confidence of practitioners in the area of adult safeguarding. This asked questions about:</p> <ul style="list-style-type: none"> - How confident staff felt about their adult safeguarding knowledge - How confident staff felt to raise an adult safeguarding concern - How confident staff felt to get support in this area - Whether staff knew where to find essential information i.e. policy and procedures <p>The results were overall extremely positive and most staff felt confident about responding to adult safeguarding concerns or seeking support where they needed it.</p> <p>The survey also asked staff to list the main types of concerns they encounter and this has been used to inform the Trust's Safeguarding Strategy for 2019-20.</p>	<ol style="list-style-type: none"> 1. To support better recording of Mental Capacity Assessments by developing a recording template which will be easily accessible and MCA guidance for all staff 2. To deliver a Learning Events programme that enables learning from complex cases (in addition to statutory review learning), to be disseminated in an engaging and participatory way 3. To ensure staff have access to guidance and safeguarding supervision to enable them confidently respond to all the types of adult safeguarding issues they encounter

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<p>In addition, the Trust has commissioned monthly Level 3 Adult Safeguarding Training until December 2019, to enable Clinical Leads and staff who work directly with Adults, to receive the full training.</p> <p>Feedback from Service Users</p> <p>As one of the Trust's standard monitoring tools, all patients are asked to feedback their sense of safety and experience of using services both during and at the end of receiving a service.</p>	<p>The Trust also strongly advocates to have service users/patients on interview panels, wherever possible, so they can participate in the interview process – including asking questions and contributing to identifying the most appropriate individual for the post.</p> <p>Having the TRAC recruitment system' has enabled safer recruitment, as the system supports and assists HR administrators in obtaining the necessary information in the most accurate aspect such as correct number of references (including the number of years in line with the recruitment policy), gaps in employment, personnel details etc.</p>	<p>Improving reportable data on Adult Safeguarding within the Trust</p> <p>Care Notes is the system that is used to record patient data. Clinicians document safeguarding issues within case notes, risk assessments and supervision records. The Trust updated their safeguarding adult's concern form to capture more reportable data. This more comprehensive data will be used to help understand safeguarding activity in the Trust and the specific issues that are affected Trust patients.</p>	

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<ol style="list-style-type: none"> 1. Rated as “Good” by CQC in 2018. Safeguarding received positive inspections under “Safe” and for MCA and Consenting under “Effective” 2. UCLH contributed to the successful campaign with the Law Commission and the Government to reform the Mental Capacity (Amendment) Bill which received Royal Assent on the 16th May 2019. 3. UCLH continues to provide leadership nationally by being a valued member of the National MCA Leadership Forum, which raises awareness of the MCA across the UK. As a leader in shaping and improving practice, UCLH hosted a successful 6th Annual Mental Capacity Conference for 160 professionals across the two countries in May 2019. 4. Staff training for the Government Prevent Strategy for the anti-radicalisation and counter terrorism strategy has improved staff access by the implementation of the NHS England e-learning course in January 2019. 	<ol style="list-style-type: none"> 1. The improvement of the service provision i.e. increase staff capacity will make a difference in allocating additional time & resources to improving patient care & safety 2. The new role of LD HSS has demonstrated evidence that quality time is provided for patients with LD when accessing our care & services. The key benefits are: decreased risks of a General Anaesthetic for an MRI procedure, decreased patient anxieties for hospital admissions & procedures (e.g. phlebotomy), advising appropriate strategies for staff, assuring families & carers 3. The successful campaign & leadership in the MC (A) Law will help to support patients who lack capacity of their Human Rights & any unlawful detentions which may occur 	<ol style="list-style-type: none"> 1. UCLH continues to participate & contribute with partner agencies in SAR’s, DHR’s, LeDER Reviews & SI’s through a programme of transparency & honesty to learn lessons from incidents. 2. UCLH, as a joint partner of the Camden Safeguarding Board, submits its reports to the CCG’s and Camden Safeguarding Quality & Performance Committee. We are committed to continuous quality assurance and improvement. 3. UCLH has successfully launched the electronic EPIC system which amalgamated 59 systems & applications on the 1st April 2019. This will improve access to patient records, reduce data breaches, tracking notes & provide a real time reporting of patients. The safeguarding process is integrated into the system with new addition – safeguarding & LD Flags. This initiative will reduce risks, improve information sharing & prevent further harm to patients 	<ol style="list-style-type: none"> 1. “Making Safeguarding Personal” – empower patients to make informed choices and exercise personal autonomy 2. Develop a strategy and framework to meet statutory changes by the MC (A) Law. Develop new training framework to improve staff awareness of the MCA to prepare for MC (A) Law 3. Commit to Learning from Safeguarding Adults Reviews(SAR’s), Domestic Homicide Reviews (DHRs), LeDER Reviews and Serious Incidents (SIs)

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<p>5. UCLH was nominated to participate in the Pathfinder Project, funded by the Department of Culture, Media & Sport and the Department of Health & Social Care as one of 8 organisations in the country to improve best practice for domestic violence</p> <p>6. Successful recruitment of an LD Health Support Specialist (LD HSS), a two year funding by UCLH Charities</p> <p>7. Funding for an additional WTE Band 7 Safeguarding Nurse has been approved. Recruitment to commence in April 2019.</p> <p>8. UCLH continues to participate with the LeDer Mortality Review, jointly delivered by Bristol University and NHS England. There are 4 reviewers trained. There were 6 notifications and 2 are currently being investigated.</p>	<p>4. The expanding team of the LD CNS & LD HSS serves to improve the safety & well-being of people with LD through their bespoke & personalised care, thereby supporting the principles of the MSP</p> <p>5. UCLH, by participating in the Pathfinder Project will share good practice with 8 other organisations across England & seek to develop more effective tools to safeguard victims of DV & SV.</p>		

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<p>9. Funding was approved by NHS England for UCLH for the third year, to host our 6th MCA Conference for trust staff and multi-agency professionals from across England and Wales. This popular annual national event enables staff to interrogate new case laws with the legal and specialist teams to ensure patients' human rights are respected.</p> <p>10. Three members of the Safeguarding Team have successfully qualified as Best Interest Assessors</p> <p>11. Under Modern Slavery (MS), the Safeguarding Nurse, trained as a MS Trainer, successfully trained 44 staff to raise awareness</p> <p>12. Successfully referred 4 patients with complex needs to the Court of Protection to achieve positive and desired outcomes for patients, mostly for discharge planning</p> <p>13. Built in and streamlined a more effective safeguarding and MCA DoLS process on the EHRS system (EPIC) for live launch in April 2019.</p>			

London Ambulance Service (LAS) NHS Trust

Our priorities in 2018-19

- Secure sufficient resources to develop safeguarding in the Trust
- Monitor trust's safeguarding processes and compliance
- Support Trust with safeguarding practice & requirements
- Assure Trust processes by driving consistency & improvement in safeguarding practice
- Forge effective relationships internally and externally
- What we did
- Secured funding to increase safeguarding team by 100% to enable a dedicated safeguarding specialist in each area of Trust.
- 7% increase in safeguarding concerns and referrals to 23,471.
- Introduced 24/7 safeguarding telephone line for staff
- 90% safeguarding training Compliance
- Introduced Quarterly Safeguarding Newsletter
- Produced new safeguarding pocketbook for staff
- Introduced Chaperone and Supervision policies
- Held Safeguarding Conference for over 170 staff and partners
- Introduced Learning Disability and Mental Capacity Act Strategies.

Our priorities for 2019-20

To be outstanding in quality standards and drive continual improvements

- Excellent Governance and Assurance of Trusts safeguarding processes and compliance
- Development of the Safeguarding Team
- Successful delivery of safeguarding training plan, local education and supervision
- Safeguarding innovation and review current practices to identify cost savings.
- Ensure integration of 111 & IUC
- Forge effective relationships internally and externally to safeguarding children and adults

In conclusion the LAS is committed to safeguarding and has invested in the safeguarding team to ensure trust is compliant with standards and provides the highest level of care for its most vulnerable patients.

The Full LAS annual report can be found on the Trust website.

Find out more

For more information, please contact us:

Phone: **020 7974 4444**

Email: **CamdenSAPB@camden.gov.uk**

The annual report is available to the public on the board's website

www.camden.gov.uk/safeguarding-adults