

BRISTOL SAFEGUARDING ADULTS BOARD



ANNUAL REPORT 2016-17

Bristol Safeguarding Adults Board

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MESSAGE FROM THE CHAIR

I am very pleased to present Bristol Safeguarding Adults Board Annual Report for 2016 - 2017. Safeguarding is everyone's business; all adults have the right to live a life free from abuse. Bristol Safeguarding Adults Board leads adults safeguarding arrangements across the city. The report identifies the work we have undertaken between April 2016 and March 2017 to make improvements to our safeguarding systems and practice across Bristol.

Much of what has been achieved over the last 12 months has been the result of all relevant agencies across Bristol continuing to work together for the benefit of the community. In order to continue to improve practice work has been completed to ensure that practitioners have access to local guidance and procedures, including the development of our first Prevention and Early Intervention Strategy and multi-agency guidance on self-neglect which was informed by a Serious Case Review we published. Improvement to practitioners' understanding of the Mental Capacity Act was one of our priorities this year and we held our second joint safeguarding conference with South Gloucestershire on this subject. We secured a nationally renowned speaker and attendance and feedback was excellent.

We have continued to build the support structures for the Board and it was pleasing to launch the Joint Business Unit this year. The challenges experienced in recruitment to some of the posts in the unit alongside the considerable amount of work associated with our Serious Case Reviews and Safeguarding Adult Reviews has resulted in some areas of work not being taken forward as we would have wished. I am confident that with the continued multi agency commitment to our work this will be rectified over the coming year.

I remain mindful of the continued pressures on partners in regards to resources. I would like to thank all members of the Board and our Sub Groups for their continued commitment and expertise. In particular I would like to thank Tracey Judge, Victoria Caple, Claire Hayward and Paulette Nuttall who chair and lead the work of our Sub Groups and whose energy and resolve has been invaluable in driving our work forward. The Board will continue to look at ways it can operate more efficiently by working more closely with the Bristol Safeguarding Children Board and other relevant forums both locally and regionally.

As always there remains much work to do over the next 12 months. In particular we will continue to oversee and assure the learning from our Serious Case Reviews. We have made some progress in engaging with the public in our work but there is more we can do to ensure that our activities are informed by all groups across our community. We will also enhance our understanding of new challenges to the safeguarding agenda such as modern slavery, human trafficking and sexual exploitation. These are areas in which vulnerable people can be at increased risk or targeted. We need to ensure our safeguarding responses are appropriate and robust.

The next year will be demanding but these demands can be overcome more effectively by maintaining the strong multi agency partnership that has been established by the Board. I look forward to leading the work of the Board over the next 12 months alongside all our partners as we continue to safeguard vulnerable people across Bristol. I hope both members of the public and practitioners find this report valuable and interesting. The Board welcomes feedback and comments on its contents. If you would like to make a contribution to our work please contact BSAB@bristol.gov.uk



Louise Lawton

Independent Chair of Bristol Safeguarding Adults Board

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EXECUTIVE SUMMARY

2016-2017 has seen the Bristol Safeguarding Adults Board grow and develop as it established itself in its second year as a statutory Board. We've remained committed to the Six Principles of Safeguarding and ensuring that a strong and effective partnership is at the heart of the city's work to ensure that we safeguarding adults from abuse and neglect.



PREVENTION

This year the BSAB launched the Prevention and Early Intervention Strategy and undertook a inter-agency Learning and Development Needs Assessment.

The Prevention and Early Intervention Strategy sets out everyone's roles in making sure we stop abuse or neglect happening to adults in the first place. Next year we will be auditing how well organisations have done in making sure there are services and support available for adults at the earliest opportunity.

The inter-agency training needs assessment identified inter-agency training would be beneficial in the areas of Mental Capacity Act, Self-Neglect and Prevent. The BSAB does not currently have funding to have our own trainer however we are writing a range of training materials that will be able to be downloaded from our website. We are raising awareness of the Bristol City Council Self Neglect training which

is open to professionals across the city, and we provided a conference focused on Mental Capacity Act and Human Rights to support inter-agency development in this area of work.

BSAB also launched a range of new posters and leaflets to raise awareness in professionals and the public in what safeguarding adults is and how to report abuse.

PROTECTION

Bristol Safeguarding Adults Team received 4,205 contacts this year concerning adults believed to be requiring safeguarding. The Board published two Serious Case Reviews and commissioned a further Safeguarding Adults Review. These reviews are undertaken when an adult with care and support needs dies or is seriously injured as a result of abuse or neglect.

One area we have developed to support the ongoing improvement of practice working together to safeguard adults, in response to these reviews, is the available policies and guidance for professionals working in the city. This year we've published four new guides to help professionals work better together. They are all on our website www.bristolsafeguarding.org. These guides were developed in partnership with a wide range of organisations in order to review where practice was effective and how to strengthen pathways to support this.



The four new policies are:

- Guidance for agencies for working with adults at risk
- Resolution of Professional Disagreements in Work Relating to the Safeguarding of Adults
- Information Sharing Guidance and Quick Guide to Information Sharing
- Multi-agency Guidance on Self-Neglect

PARTNERSHIP AND ENGAGEMENT



This year the BSAB agreed to fund the development of a new, independent website. This has been a big piece of work and the website will go live in July 2017 at www.bristolsafeguarding.org. This website will help the public and professionals know they have the right information and be kept up to date with what we are doing.

We will also be launching our new Twitter account @BristolLSAB as part of the Website launch. Follow us to find out more!

ACCOUNTABILITY

The Board maintains oversight of the reporting on the Safeguarding Arrangements in the city. We have identified a gap in the data we receive in respect of adults experiencing a mental health crisis. We will seek to address this in 2017-2018.

The levels of safeguarding referrals for adults at risk have risen very slightly this year. Concerns for adults living at home remain in the majority, followed by adults in care settings. Care providers make up 38% of the referring agencies. When reviewing the person believed to be causing abuse or neglect, the highest proportion of safeguarding concerns referred to Bristol City Council are linked to a professional care, health or social worker. Family members are the second highest source of concern. In responding to these safeguarding referrals, the Board was provided data that indicated an increase in the number of adults whose objectives were met or partly met through the safeguarding investigation process which is positive progress. There is on-going work required to ensure that adults' advocates are reported and recognized through the safeguarding process, particularly if they are family members rather than professional advocates.

LOOKING AHEAD

The BSAB still has much to do to achieve its three year Strategic Plan. We aim to use our new online profile to increase engagement with the public and accessibility of good quality, accurate information for professionals. We need to establish a robust schedule of multi-agency audits to ensure that adults are not falling through gaps between services and assure ourselves on the interpretation and analysis of the data we are provided. We know we must continue to work closer with Children's Services across the city, particularly improving the recognition of abuse of younger adults, better coordinating whole family responses and in sharing expertise and resources. As ever in safeguarding adults, we need to keep raising awareness and equipping professionals and the public in the identification and response to abuse in all forms.

1. ABOUT THE BOARD

Governed in accordance with the provisions of the Care Act 2014 sections 42 – 46, the BSAB is the key statutory body overseeing multi-agency adult safeguarding arrangements across the City of Bristol. It was established in line with the statutory requirement to have a Local Safeguarding Adults Board in each Local Authority area set out in the Care Act 2014.

The BSAB comprises senior leaders from a range of different organisations. It has two basic objectives **to help and protect adults who meet the criteria for safeguarding by co-ordinating the safeguarding work of agencies and to ensure that this work and the work of individual organisations effective.** It oversees and leads on adult safeguarding across the locality and considers a range of matters that contribute to the prevention of abuse and neglect. These include the safety of patients in its local health services, quality of local care and support services, effectiveness of prisons and approved premises in safeguarding offenders, and responsiveness of further education services.

WHAT IS SAFEGUARDING ADULTS?

Safeguarding adults is about protecting those at risk of harm from suffering abuse or neglect. Abuse can happen anywhere. It can happen at home, in a residential or nursing home, in a hospital, at work or in the street.

Safeguarding adults is about working with adults with care and support needs to keep themselves safe from abuse or neglect. It is about people and organisations working together to prevent abuse.

Section 42 (1) of the Care Act 2014 states: Safeguarding duties apply to an adult who:

- has needs for care and support (whether or not the local authority is meeting any of those needs) and;

- is experiencing, or at risk of, abuse or neglect; and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

BRISTOL SAFEGUARDING ADULTS BOARD STATEMENT OF PRINCIPLES

Safeguarding is a responsibility for everyone. The following 6 key safeguarding principles must be followed and underpin the ways in which the BSAB agencies, professionals and other staff work with adults:

1. **Empowerment** – Presumption of person led decisions and informed consent. People feeling safe and in control, being more able to share concerns and manage risk of harm either to themselves or others.
2. **Prevention** – It is better to take action before harm occurs. Working on the basis that it is better to take action before harm happens.
3. **Protection** – Support and representation for those in greatest need. Support and help for those adults who are vulnerable and most at risk of harm.
4. **Proportionality** – Proportionate and least intrusive response appropriate to the risk presented. Responding in line with the risks and the minimum necessary to protect from harm or manage risks.
5. **Partnership** – Local solutions through services working with their communities. Working together in response to local needs and expectations.
6. **Accountability** – Accountability and transparency in delivering safeguarding. Focusing on outcomes for people and communities and being open about their delivery.

INDEPENDENT CHAIR

The Independent Chair of the BSAB is Louise Lawton. Louise has held this post since October 2014. She is supported by the Bristol City Council Service Manager for Safeguarding Adults; a Safeguarding Business Unit Manager; and the BSAB's Joint Business Unit which was set up in partnership with the Bristol Safeguarding Children Board. The Independent Chair is tasked with ensuring the Board fulfils its statutory objectives and functions. Key to this is the facilitation of a working culture of transparency, challenge and improvement across all partners with regards to their safeguarding arrangements.

The ultimate responsibility for the effectiveness of the BSAB rests with the political leaders of Bristol City Council and the Chair is accountable to Chief Executive (City Director of Bristol City Council).

JOINT BUSINESS UNIT

As set out in the 2015-16 Annual Report, the BSAB's partner agencies agreed to fund the implementation for a Joint Business Unit in partnership with the BSCB. This unit was implemented in September 2016. It consists of:

- 1 Business Manager
- 1 Policy and Projects Officer
- 1 Project Officer
- 0.5 Data Analyst
- 1.5 Administrators



There have been delays in recruiting to the positions of the Data Analyst and half time administrator so these positions were vacant in 2016-2017.

Adam Bond, Business Manager, moved to a new post in November 2016. Becky Lewis was recruited to the position and joined the team in March 2017.

The vacancies within the BSAB Business Unit and the volume of work required to undertake the commissioned Safeguarding Adults Reviews have significantly impacted the work of the Board in 2016-17. While we have made good progress a number of key areas have not had the resourcing required, for example there is not sufficient data analysis. The BSAB recognises these risks to the Board's functioning and is working hard to minimise the risk and recruit to the posts.

The team supports work across both the Children and Adults Safeguarding Boards promoting better cross-working and responsible stewardship of resources through reducing duplication and Board administrative functions. This has proved very positive in the first six months with a focus on joint projects.

LEAD MEMBER

The Lead Member for Adult's Services has the responsibility for ensuring that Bristol City Council fulfils their legal responsibilities to safeguard children and young people. Councillor Claire Champion-Smith was the Lead Member for the BSCB until the end of March 2017 when Helen Holland became Cabinet member for Adult's Services.

“Undoubtedly, one of the most important roles for a local authority is to protect vulnerable people of all ages from harm. Adults can be vulnerable for a range of reasons – some through physical and mental incapacity, some through self-neglect and some because they are preyed on and abused by those they trust. Some are vulnerable through

historic abuse that was not challenged at the time. All need appropriate care and support if they are to live safe and content lives.

For all the agencies involved in their care, there is the tricky challenge of personal rights and freedoms to negotiate: this is an aspect that the public do not always understand. Facilitating a shared understanding of human rights and responsibilities is, to my mind, an important task for the Board. Resources are tight in all public services, need is increasing so trust based on shared understandings and common purpose is essential. Without a strong and effective board, some residents of Bristol could so easily slip through the safety net.

I would like to thank the Board for its work on behalf of adults in the city. I trust you find this report wide ranging and interesting and a reminder that safeguarding is the responsibility of us all."

Clare Campion-Smith (Bristol City Council, Lead Member for Adults 2016-2017)

BOARD MEMBERSHIP

The following organisations are the core statutory members of the Board and operate as an Executive Group with responsibility for overseeing the governance of the BSAB:

- Bristol City Council
- Bristol Clinical Commissioning Group (NHS)
- Avon and Somerset Constabulary

Alongside the above the following partners are also members of the Board.

- NHS England
- University Hospitals Bristol NHS Foundation Trust
- North Bristol NHS Trust
- BCC Councillor (Lead Member) for People Directorate
- Avon and Wiltshire Partnership Mental Health NHS Trust
- National Probation Service
- BGS Community Rehabilitation Company
- Bristol Community Health
- Care Provider Representatives
- Voluntary Sector Representatives

A number of organisations are Associate Members of the Board. Associate members support the work of the Board and its Sub Groups but only attend meetings with agenda items relevant to their organisational remit. They are comprised of the following organisations:

- The Prison Service
- The Crown Prosecution Service
- Care Quality Commission (CQC)
- South West Ambulance Service NHS Trust
- Healthwatch – The Care Forum
- Avon Fire and Rescue
- Voluntary, Faith and Community Sector organisations
- Representatives of service users and carers' forums

BOARD ATTENDANCE

Board members' attendance is monitored by the Joint Business Unit to ensure agencies' commitment to this work. If there is repeat non-attendance this is challenged by the Board Chair. Some associate members of the Board do not regularly attend unless there is a relevant item for them. Their attendance is therefore not included below.

P	Present
D	Deputy attended
A	Apologies sent
NA	No attendance or apologies
0	Not Board member at the time

Membership	Role	Agency	May-16	Aug-16	Nov-16	Feb-17	% attendance
EXEC	Board Chair	Independent	P	P	P	P	100%
	Director of Adult Social Services	Bristol City Council - Adult Social Care	P	P	P	D	75%
	Investigations Head of Manage	Avon & Somerset Police	D	P	P	P	75%

	Transformation and Quality Director	Clinical Commissioning Group	P	P	D	D	50%
FULL BOARD MEMBER	Clinical Director	Bristol Community Health	P	P	A	D	50%
	Transformation and Quality Director	Clinical Commissioning Group	P	P	A	A	50%
	Senior Probation Officer	BGSW CRC	P	A	NA	NA	25%
	Head of Bristol & South Glos LDU	National Probation Service	D	D	A	D	0%
	Lead Cabinet Member	Bristol City Council	A	P	A	P	50%
	Service Manager - Children Social Care	Bristol City Council - Children Social Care	P	A	A	P	50%
	Head of Patient Experience	NBT	D	P	P	A	50%
	Deputy Chief Nurse	UHB	P	P	P	P	100%
	Care Homes Director	Provider Representative	P	P	A	P	75%
	DoLS Team Manager	Bristol City Council - Adult Social Care	P	P	P	P	100%
	Associate Director	AWP	P	P	P	P	100%
	Service Director, Housing Delivery Management	Bristol City Council - Housing	P	A	A	A	25%
	Strategic Commissioning Manager	Bristol City Council - Commissioning	NA	P	A	NA	25%

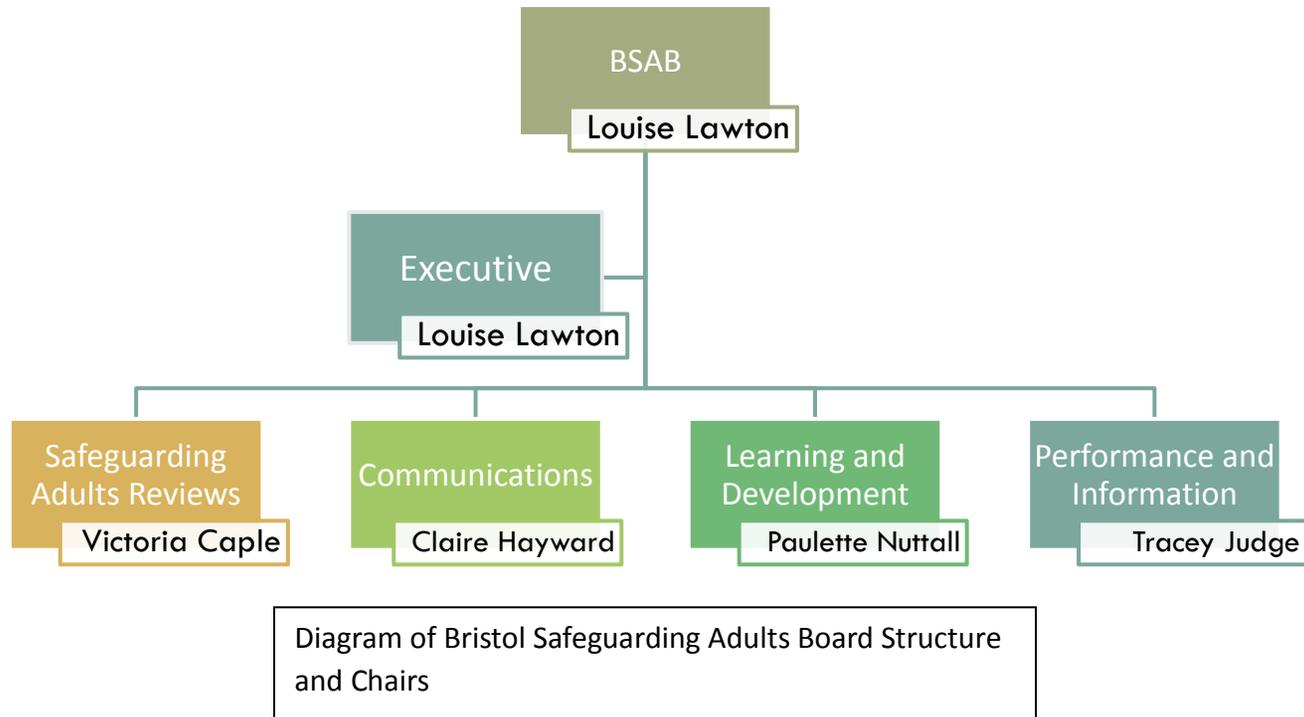
	Interim Clinical Director for System Leadership	Bristol Mental Health	NA	P	P	A	50%
	Service Manager - Crime and Substance Misuse Service	Bristol City Council - Safer Bristol	P	A	P	P	75%
	Team Manager	Bristol Dementia Partnership	0	P	P	P	75%
ASSOCIATE MEMBERS	Head of Safety	HMP Bristol	0	P	P	A	50%
	Adult Social Care Directorate	CQC	A	A	P	A	25%
	Project Coordinator – Healthwatch Bristol	The Care Forum	P	A	NA	NA	25%
	Bristol Older People's Forum	Age UK Bristol	A	A	NA	NA	0
	CEO	One25	P	P	A	0	50%
SUB GROUP CHAIRS	Sub Group Chair	Performance and Information Sub Group	P	P	P	P	100%
	Sub Group Chair	Safeguarding Adult Reviews Sub Group	P	A	P	P	75%
	Sub Group Chair	Communication & Engagement Sub Group	P	P	P	P	100%
	Sub Group Chair	Learning & Development Sub Group	P	P	P	P	100%

BOARD STRUCTURE AND SUB GROUPS

The BSAB meets as a full Board four times a year at a minimum. At the full Board decisions are made on the Business Plan for the year, agreement is sought for new policies or procedures, reports and audits are scrutinized in respect of the effectiveness of safeguarding arrangements in the city, Safeguarding Adults Reviews are received and new operating models are reviewed and evaluated. Board members are senior decision-making managers from their agency who can be held accountable for practice within their organisation or agree to align resources to respond to identified issues.

The full Board is supported through the Executive Group. This group is chaired by the BSAB Independent Chair and is attended by the senior managers from the three core funding agencies and the BSAB Business Manager. This group drives forward strategic improvement, maintains oversight of the resourcing of the Board, and ensures compliance with governance arrangements.

The operational work of the BSAB is undertaken by the Board's Sub-Groups and Working Groups. A Sub-Group is a permanent standing group of the Board and a Working Group is a time-limited group supporting the delivery in a specific area of practice. These groups are chaired by representatives from across the Board's organisations including Operational Managers from the Police, Bristol City Council Social Care, Bristol Clinical Commissioning Group and representatives from Voluntary and Community Sector Organisations. They are attended by representatives from across the city who ensure that the Strategic Business Plan for the year is delivered. This includes activities such as developing new resources, running conferences and undertaking multi-agency audits.



FINANCIAL ARRANGEMENTS 2016-2017

In preparing this report the Board found inaccuracies in the financial reporting for 2015-2016 in respect of the level of surplus carried forward to 2016-2017. This is currently being reviewed by Bristol City Council finance department who provide the financial support and functions to the Bristol Safeguarding Adults Board so this report does not include any surplus reported in the previous financial report.

Contributions to the Board		Expenditure	
BCC Core Contribution	54,020.00	BSAB Chair Salary	17,031.17
A&S Core Contribution	15,597.00	BSAB Chair Travel	2,201.96
CCG Core Contribution	27,010.00	BSAB Staff Salaries	62,203.00
BCC Additional Contribution SCR, Legal and Website	12,116.71	Interim BSAB Manager Salary	1,880.00
A&S Additional Contribution SCR, Legal and Website	6,058.36	SCR Reviewers	17,598.42
CCG Additional Contribution SCR, Legal and Website	6,058.36	Legal advice	3,000.00
Contributions from 15/16 invoiced in 16/17	1,310.00	SCIE Training	2,050.00
		Equipment hire	79.50
		Conference Leaflet	412.40

		Stop Adult Abuse Week Materials	225.00
		Conference BSAB Banner	150.00
		BSAB Conferences Room Costs	421.00
		Catering	138.80
		Other Transport	84.77
		Other staff costs	44.00
Total Income	£122,170	Total Expenditure	£107,520
		Surplus carried over to 2017/2018	£14,650

2. TRANSPARENT ANALYSIS OF SAFEGUARDING IN BRISTOL

BRISTOL CONTEXT¹

Bristol is the 8th largest city in England and the 10th largest local authority in England. Bristol Local Authority accounts for around 70% of the total population of the built-up area of the city, which is often referred to as ‘Greater Bristol’, or the ‘Bristol Urban Area’. The population in 2016 was estimated to be 454,200 people.

Population by age

Bristol has a relatively young age profile with more children aged 0-15 than people aged 65 and over. The median age band of people living in Bristol in 2016 was 30-34 years old, this compares to the England and Wales median of 35-39 years. The profile of Bristol’s population by five year age band and sex is illustrated in below.

Age Band	Males Number	Males Percentage	Females Number	Females Percentage	Persons Number	Persons Percentage
0-15	43,100	19.0	41,600	18.4	84,700	18.7
16-24	35,000	15.4	35,700	15.7	70,700	15.6
25-49	89,800	39.5	83,400	36.8	173,200	38.1
50-64	32,700	14.4	33,300	14.7	66,000	14.5
65 and over	26,900	11.8	32,700	14.4	59,600	13.1
All ages	227,400	100.0	226,800	100.0	454,200	100.0

¹ Population information taken from ‘The Population of Bristol: July 2016. <https://www.bristol.gov.uk/documents/20182/33904/Population+of+Bristol+July+2016/858ff3e1-a9ca-4632-9f53-c49b8c697c8c> and <https://www.bristol.gov.uk/documents/20182/33904/Mid-2016+population+estimates+for+Bristol+local+authority/12cac653-c259-433a-1185-478b06cc66d3>

WORKING AGE

Bristol has a much higher proportion of working age (16-64 year old) people than nationally - 68% of the total population in Bristol is of working age compared to 63% in England and Wales. The highest proportions are amongst the 20-39 year olds which make up more than a third (37%) of Bristol's total population compared to just over a quarter (26%) nationally.

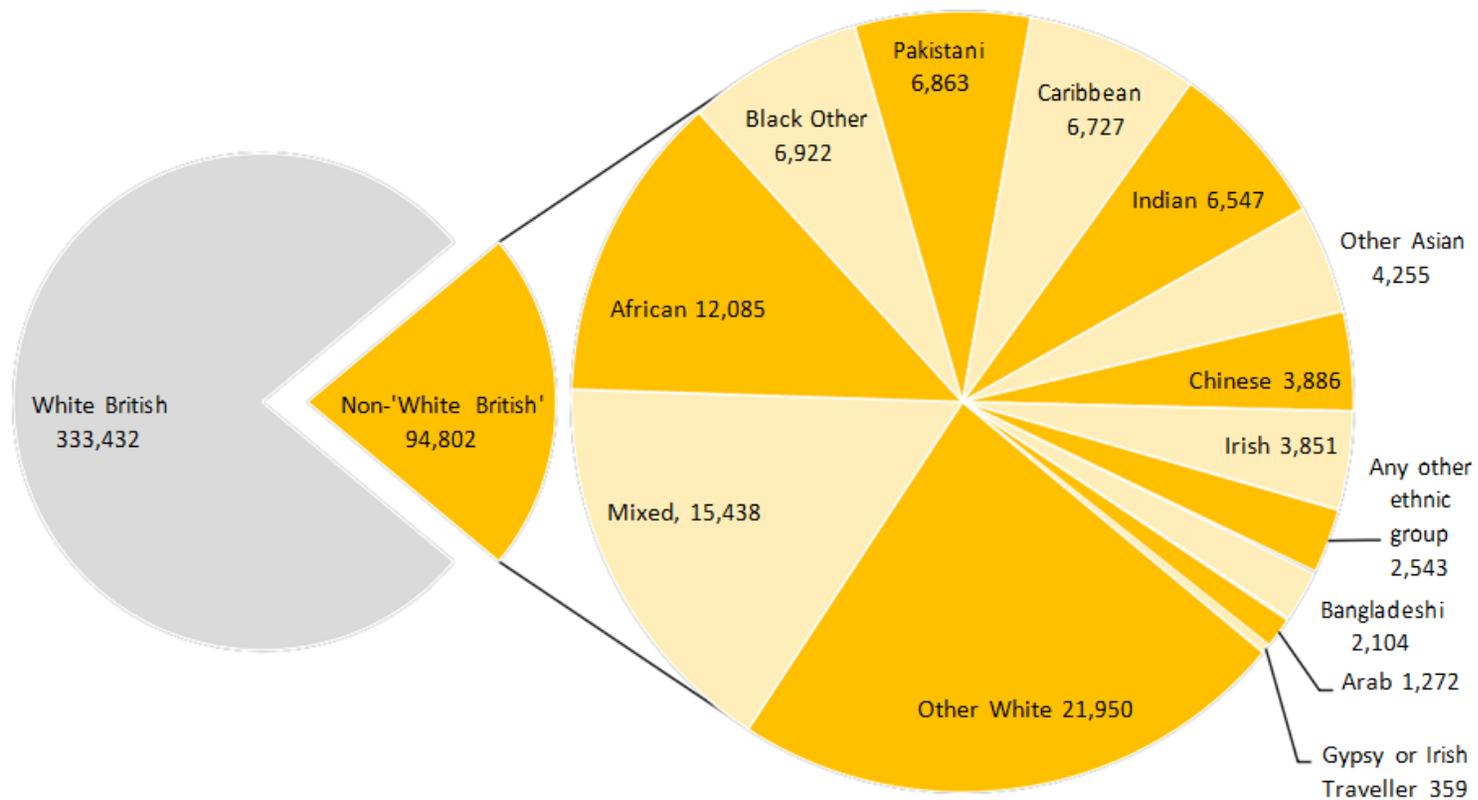
OLDER PEOPLE

Bristol's 59,600 older people make up 13% of the total population, i.e. 1 in every seven people living in Bristol is aged 65 or over. The proportion of older people is lower than in England and Wales as a whole where 18% of the population are aged 65 and over. There are 9,000 people living in Bristol aged 85 and over.

ETHNIC GROUP

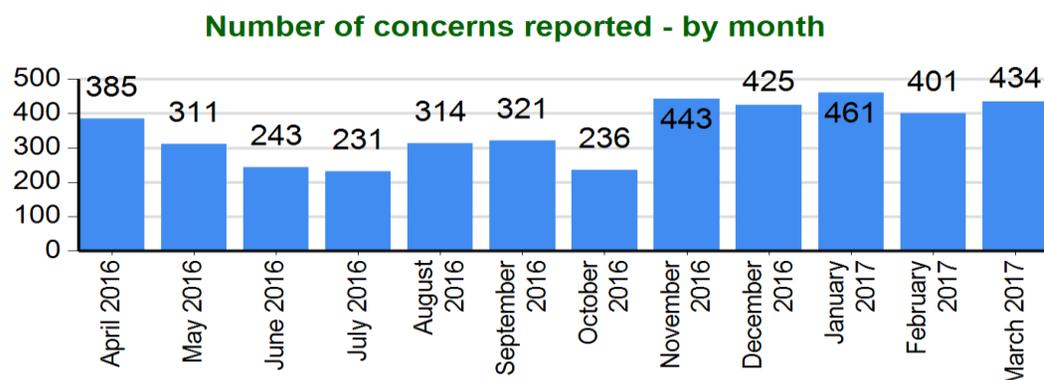
The Black or Minority Ethnic group (BME) population (all groups with the exception of people who define as 'White') make up 16% of the total population in Bristol. This is an increase from 8.2% of all people in 2001. All groups with the exception of people who define as 'White British' make up 22% of the total population in Bristol – this group includes people who define as White European for example. This is an increase from 12% of all people in 2001.

The age profile of the BME population is much younger than the age profile of the Bristol population as a whole. The proportion of children (aged 0-15) who belong to a BME group is 28%, the proportion of people of working age (aged 16-64) who belong to a BME group is 15% and the proportion of older people (aged 65 and over) who belong to a BME group is just 5%. This means that Safeguarding Adults services may have less experience of meeting the needs of these groups and require ongoing support and coordination of services.



Source: 2011 Census Office for National Statistics © Crown Copyright 2013 [from Nomis]

SAFEGUARDING ADULTS REFERRALS



In 2016-2017 the number of concerns reported to the Bristol City Council Safeguarding Adults Team was 4,205. This is very similar to 2015-2016 when 4,019 reports were made.

38% of concerns were reported by Care Providers. This is a significant increase on the 29% reported by Care Providers in 2015-2016 and 24% reported in 2014-2015. This shows a steady significant

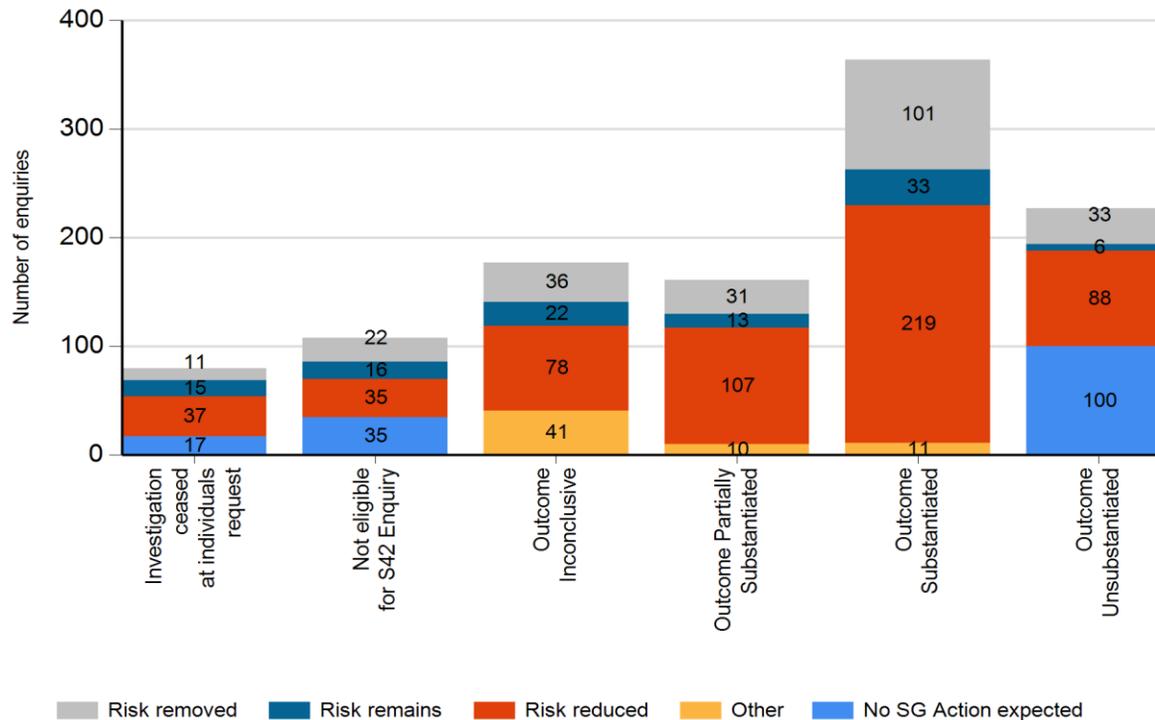
increase in reporting of concerns by providers. This is believed to be due both to greater understanding of the Care Act (2014) by Care Providers through the first two years of implementation and pressure to notify by commissioners. However, the BSAB will be undertaking an audit of referrals made to the Safeguarding Adults Team to check this anecdotal reporting in more detail.

184 concerns were reported by the individual themselves or a family member. This is not significantly changed from 2015/2016. The BSAB will be increasing their public presence in 2017/18 through the launch of a new independent website to better inform the public of the avenues to report adult safeguarding.

12% of referrals were made by police. This is an increase on 2015/16 when there was a drop to 5% (from pre-Care Act level of 24% referrals from police in 2014/2015) after a change in the constabulary's operating model, improvements in understanding and implementation of the Care Act so referrals were sent to the correct team.

SECTION 42 SAFEGUARDING ADULTS ENQUIRIES

Completed Section 42 Enquiries Outcomes and Risk Status (for specified period)



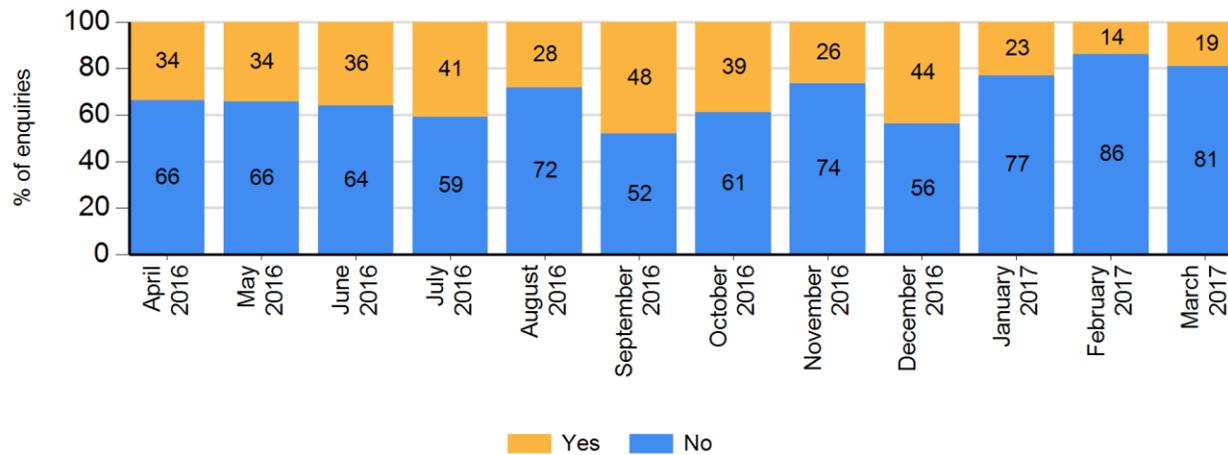
1,375 referrals progressed into Section 42 Safeguarding Adults Enquiries. 80 enquiries ceased at the individuals request. 108 were deemed ineligible for a section 42 during the process and the enquiry was halted, 177 had an outcome that was inconclusive, 161 had an outcome that was ‘partially substantiated’, 364 had an outcome fully substantiated; and 227 had an outcome that was ‘unsubstantiated’. At present 258 do not have an outcome recorded. Most of these will still be ongoing. Of the 1,117 enquiries completed in 2016/2017, risk was reduced or removed in 90.5% of cases.

Inconclusive outcomes most often occur where there are mental capacity issues and the adult at risk is unable to give their own account and there are no witnesses. In these cases a protection plan is still put into place as the person may still be at risk of further harm or neglect.

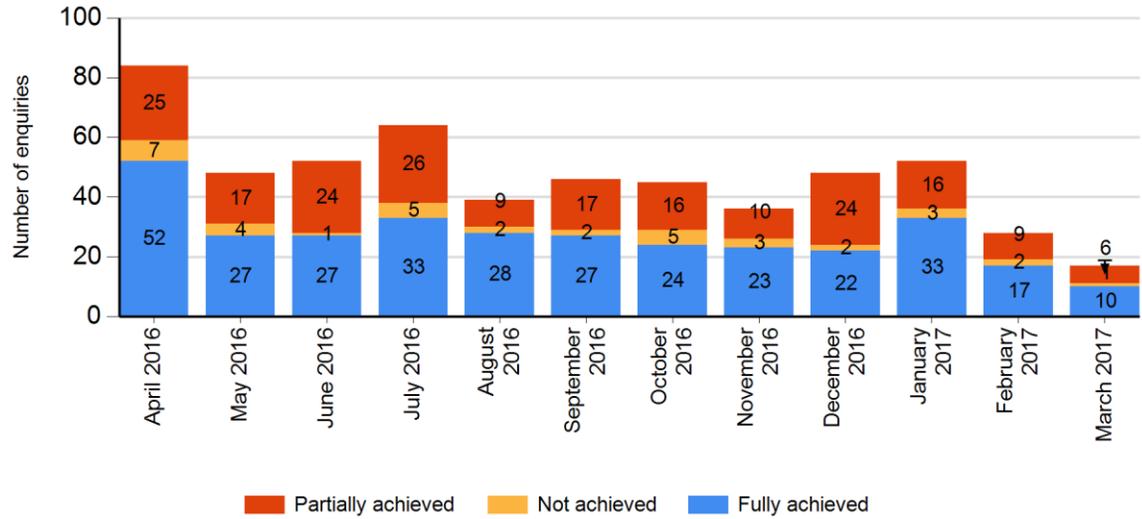
CONSENT

One of the BSAB priorities is to improve the involvement of adults in their safeguarding. Despite work in this area we have seen little increase in the number of adults who were made aware of the Safeguarding Adults Team referral by the referrer with the average over the year being only marginally higher than the last. In 2017-2018 we will therefore be supporting Bristol City Council in the redesign of their referral form to make the expectation for this more explicit, as well as providing some guidance on making referrals to professionals in the city to continue to promote the importance of informing and involving adults.

Consent to use procedures (was victim aware of enquiry?) - where recorded

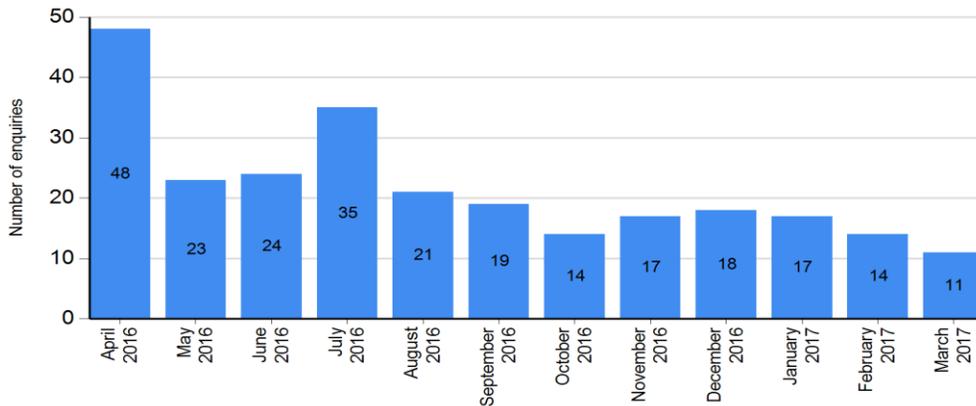


Of those that were initially expressed...



Once undertaking a Section 42 enquiry just over 50% of adults were asked their outcomes at the start and end of the intervention. We will continue to support this to increase. The outcomes were partially or fully met in most cases as shown in the table. The table shows completed Section 42 enquiries which is why more recent months are lower with enquiries still ongoing.

Enquiries where the Adult at risk has an Advocate



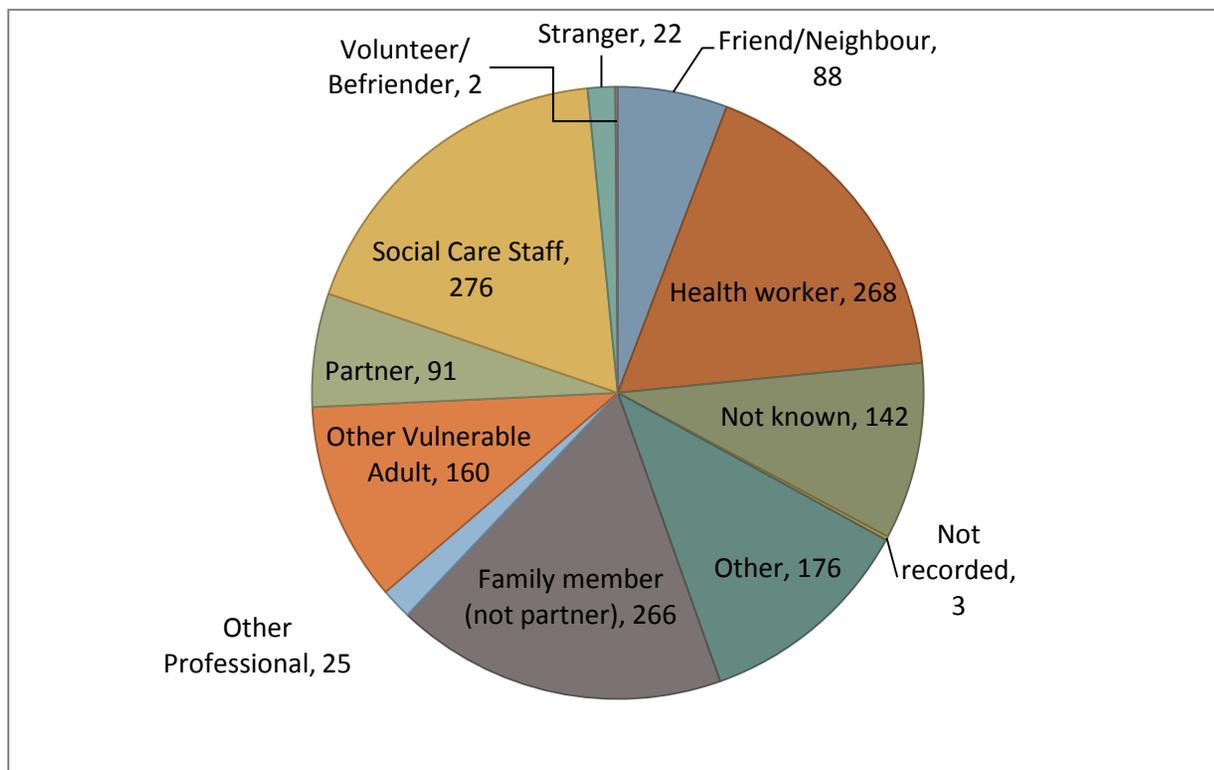
There has been a downward trend in adults being recorded as having an advocate in Section 42 Enquiries this year. This will be an area the BSAB seeks to understand in greater detail in 2017-18.

PREVALENCE OF ABUSE

As might be expected, the group with the highest rate of referrals to the Safeguarding Adults Team were for Older Adults increasing from 65-74 but peaking in the 75-84 age band. Neglect and Acts of Omission are the primary concern for these age groups. This is likely to be because of a larger population of adults in these age groups who are in receipt of care and support.

Abuse type by location	Care Home	Community	Community Service	Hospital	Other	Own Home
Discriminatory	2	0	1	3	12	11
Domestic Abuse	4	0	0	1	19	46
Financial and Material	22	0	3	10	93	173
Neglect and Acts of Omission	155	4	4	95	53	194
Organisational	34	1	0	6	6	8
Physical	114	6	2	42	76	75
Psychological Abuse	12	0	1	4	35	38
Self Neglect	1	0	0	1	18	58
Sexual	14	0	2	11	24	16
Sexual Exploitation	0	0	0	0	5	3

The location where abuse/neglect of adults is taking place in Bristol remained consistent with that reported last year. Following significant work raising awareness of Self Neglect, BSAB received data this year on the prevalence of Self Neglect which will provide a benchmark for future data to measure the impact of our work in this area such as the launch of the Self Neglect policy. It is likely that Self Neglect is still under recognised and reported with 80 cases referred so we will continue to monitor this and plan to organise a conference raising awareness of Self Neglect next year.



Safeguarding Enquires were most likely to be made due to suspected abuse or neglect by a health or social worker. These made up 36% of all referrals. Family members or partners were the second highest source of suspect harm. The BSAB is working with the BSCB to put on a learning event for organisations on responding to Persons of Concern in a Position of Trust. This will build on the BSAB *Managing Concerns about People in Positions of Trust* Guidance published in October 2015.²

² <https://bristolsafeguarding.org/media/1127/managing-concerns.pdf>

DEPRIVATION OF LIBERTY SAFEGUARDS

The Deprivation of Liberty Safeguards (DoLS) are an amendment to the Mental Capacity Act 2005. The DoLS under the MCA allows restraint and restrictions that amount to a deprivation of a person's liberty to be used in hospitals and care homes – but only if they are in a person's best interests. To deprive a person of their liberty, care homes and hospitals must request standard authorisation from a local authority. A 2014 Supreme Court judgement found that more adults were found to meet the criteria of requiring DoLS assessment and authorisation than had been previously applied.

Bristol City Council have faced the same challenges of capacity and resource reported by local authorities nationally with the high number of people requiring DoLS assessments. BSAB receives regular reports on the number of outstanding DoLS assessments to maintain oversight of this.

In March 2017 The Law Commission published a report setting out recommendations, together with a draft Bill following extensive consultation. The final report and draft Bill recommends that the DoLS be repealed with pressing urgency and sets out a replacement scheme for the DoLS. In addition the draft Bill suggest wider reforms to the Mental Capacity Act to ensure greater safeguards for persons before they are deprived of their liberty. BSAB are awaiting the Government's response to this report along with LSABs nationally.

CARE QUALITY COMMISSION

The Care Quality Commission are the independent regulator of health and social care services in England. They inspect acute hospitals, specialist mental health services, community health services and GP practices and give a series of ratings including an overall rating for the whole service. Services are either graded Outstanding, Good, Requires Improvement or Inadequate.

As of February 2017, the Care Quality Commission has inspected 135 services in Bristol. The majority (68%) were rated as Good. 1 was rated Outstanding overall. 30% were rated as Requires Improvement. This is higher than the national average of 23.55% of services. Only 1 service was rated as Inadequate. From this we know there is some very high quality practice in Bristol, but also significant work to do to ensure that adults receive the highest quality, most effective services. To ensure better scrutiny and oversight, the BSAB now receives quarterly reports on Service of Concern in Bristol so they are able to monitor any trends or respond quickly to issues.

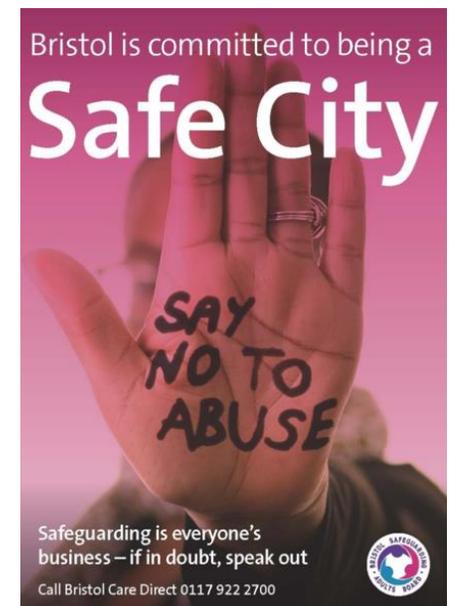
3. STRATEGIC PLAN UPDATE

The BSAB published a three year Strategic Plan from the establishment of the Board.³ The Strategic Plan considers actions required by the Board under the six Safeguarding Principles. Updates on the progress of work under Empowerment and Proportionality can be found in Section 2 of this Annual Report in relation to the effectiveness of Section 42 Safeguarding Adults Referrals and the involvement of adults in their safeguarding. Supporting these areas of work, BSAB has set up a database of service user voice groups with which it consults on relevant areas of work. This is to enable the participation of adults is embedded across the work of the Board.

PREVENTION

The BSAB developed its work and oversight of Prevention in two key areas this year, the launch of the Prevention and Early Intervention Strategy and the Learning and Development Needs Assessment.

The Prevention and Early Intervention Strategy⁴ was launched in 2016 and sets out the roles of different stakeholders to ensuring Prevention and Early Intervention is embedded throughout the system. The impact of this strategy's implementation at a strategic and commissioning level will be reviewed in 2017-2018 to identify any citywide gaps in service provision and allow the BSAB to advocate for coordination and targeting of resources.



³ <https://bristolsafeguarding.org/media/1106/bsab-strategic-plan-final.pdf>

⁴ <https://bristolsafeguarding.org/media/1122/prevention-strategy.pdf>

This year the Learning and Development Sub Group undertook a training needs assessment. The BSAB does not currently have sufficient resources to offer an inter-agency training programme however the assessment identified key gaps providing opportunities for co-commissioning of training across agencies and sharing of training resources to improve single agency training. The training needs assessment informed the Training Strategy 2017 and has allowed the Learning and Development Sub Group to produce briefing notes and targeted learning events for wider resource dissemination and production.

The highest priority need area identified was Mental Capacity Act training. This informed the theme of the 2016 Annual Conference.

PROTECTION

This year the BSAB has focused on ensuring that practitioners have access to accurate local guidance, policy and procedure to improve practice. We have developed, published and implemented four policies this year:

Guidance for agencies for working with adults at risk⁵

Resolution of Professional Disagreements in Work Relating to the Safeguarding of Adults⁶

Information Sharing Guidance⁷ and Quick Guide to Information Sharing⁸

Multi-agency Guidance on Self-Neglect⁹

The impact of these policies will be audited in 2017-2018 by the Performance and Information Sub Group through targeted multi-agency audits.

⁵ <https://bristolsafeguarding.org/media/1123/guidance-for-adults-at-risk.pdf>

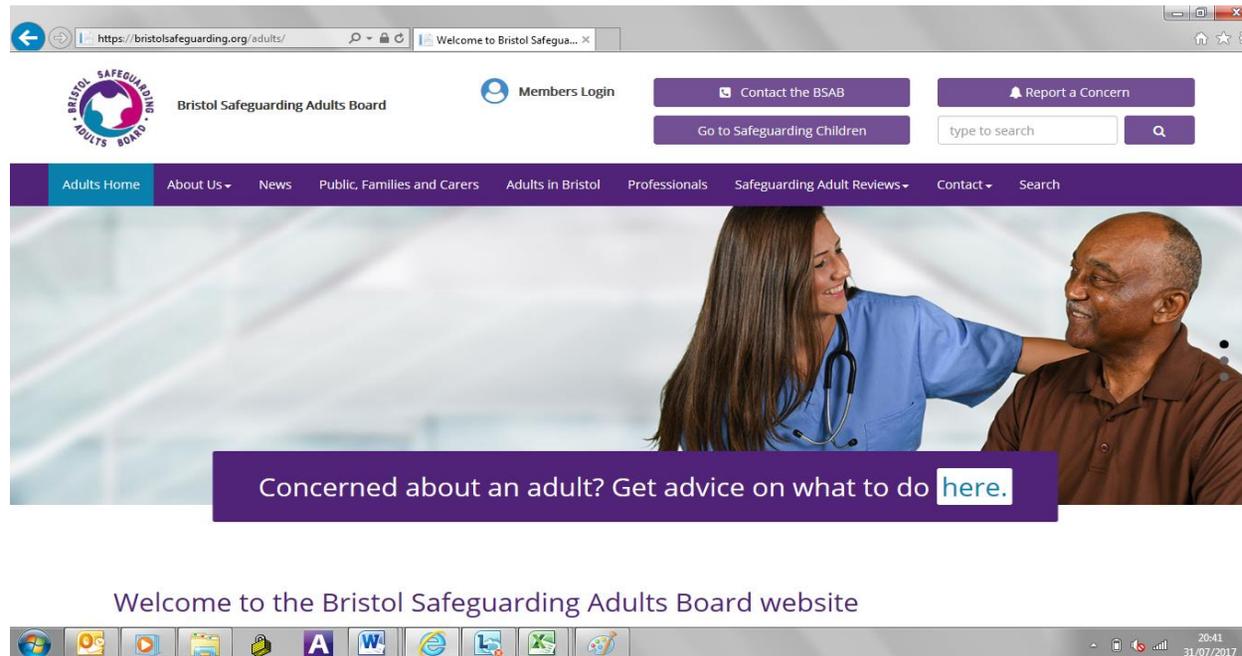
⁶ <https://bristolsafeguarding.org/media/1117/escalation-procedure.pdf>

⁷ <https://bristolsafeguarding.org/media/1120/info-sharing-guidance.pdf>

⁸ <https://bristolsafeguarding.org/media/1121/guide-to-info-sharing.pdf>

⁹ <https://bristolsafeguarding.org/media/1124/guidance-for-self-neglect.pdf>

PARTNERSHIP AND ENGAGEMENT



This year the BSAB funding partners agreed to fund the development of a new, independent website for the Bristol Safeguarding Adults and Children Boards. This has been a significant piece of work and the website is due to go live in July 2017 at www.bristolsafeguarding.org. This website will provide a platform for sharing information with the public and professionals to ensure that they have access to accurate information and guidance. We will also be launching our new Twitter account @BristolLSAB as part of the Website launch.

BSAB took a leading role in the regional coordination of the **Stop Adult Abuse Week** events running from 13th June 2016. The Board coordinated a Communications Strategy across the partnership with a focus on reporting adult abuse. The key message of **“If in Doubt – Speak Out”** was disseminated across social media messaging and a guide, leaflet and posters were produced and disseminated across the partnership agencies and displayed in services to the public.

ANNUAL CONFERENCE – SAFEGUARDING AND MENTAL CAPACITY: EVIDENCE-BASED DECISION-MAKING

In response to learning identified in our published Serious Case Reviews and the training needs assessments we ran a joint Conference with South Gloucestershire Safeguarding Adults Board in October 2016 on the subject of the Mental Capacity Act and Deprivation of Liberty Standards. We were lucky to secure Sir James Munby, President of the Family Law Division as the key speaker as well as speakers from the Independent Mental Capacity Advocacy service and British Institute of Human Rights. The Conference had excellent representation from across the partnership and there was positive feedback from the overwhelming majority of attendees.



Claire Hayward (BSAB Sub Group Chair) and Nick Thorpe (South Gloucestershire SAB Training Sub Group) at the Annual Conference

ACCOUNTABILITY - SELF-ASSESSMENT SAFEGUARDING AUDIT

The BSAB undertook a Self-Assessment audit of organisations safeguarding adults. The monitoring tool used was trialled in 2014/15 by the Association of Directors of Adult Social Services (ADASS) South West Regional Safeguarding Adults group and has been used by BSAB since

then. The level of audit returns across organisations in the Board remains lower, for the second year in a row, than we would expect. This will remain an area requiring challenge and support going forward. In exploring reasons for low returns, BSAB has received requests for future self-assessments to be conducted in partnership with adjoining local authorities to reduce resource pressures on agencies. BSAB have agreed biannual assessments working in partnership with the four adjoining local authorities going forward. This builds on the model established by the Joint Business Unit for undertaking Section 11 Audits for children. In the alternate years challenge approaches will be undertaken to monitor progress and evaluate the effectiveness of safeguarding in individual organisations.

The audit considered the following overarching areas:

- A. The Difference Being Made** (*Outcomes and Peoples Experiences*)
- B. What is Being Done to Prevent Abuse and Neglect** (*Leadership, Strategy, and Commissioning*)
- C. How Well Things are Managed When Abuse and Neglect Occurs** (*Service Delivery and Effective Practice and Performance and Resource Management*)
- D. How Partners Work Together** (*Local Safeguarding Boards*)

Areas of strength in Bristol are:

The highest scoring area was 'How Partners Work Together'. Partners felt their engagement through the BSAB was positive and contributed to improvements in safeguarding. Partners highlighted how they were able to support the work of the BSAB through their involvement on our partnerships such as the Learning Disabilities Partnership and Safer Bristol.

Nearly all submissions noted the benefit of the multi-agency policies and guidance produced by the BSAB this year.

Area B was also high scoring. While many agencies recognised the room for further improvement and were not complacent about the need for more development they highlighted active multi-agency involvement in raising awareness through Stop Adult Abuse Week events; good compliance with single agency Safeguarding Adults training; and health partners cited well integrated patient safety review processes and well integrated patient feedback mechanisms.

Areas of development for Bristol are:

- Improve data collection related to Safeguarding Adults. This was also an area that the BSAB needs to develop which is why we are attempting to recruit to a Data Analyst position.
- Improvement of work between Adult and Children services and at points of transition between services. This is a Board priority for 2017-2018.
- Police and Social Care to improve their feedback mechanisms.
- Increase scrutiny to ensure safeguarding policies are embedded in practice.

These areas will be reviewed with the BSAB organisations as part of the Challenge and Support work undertaken by the Joint Business Unit in 2017-2018.

4. NEW MODELS AND PILOTS

THREE TIER MODEL



Health and Social Care in Bristol restructured in January 2016 in order to implement a Three Tier Model, of which Community Support Services forms a key element. The model advocates the need for quality services based in the community for adults in need of social care, in order to prevent or delay the need to move into residential/nursing or domiciliary care, in cases whereby Community Support Services can meet their needs. The key focus of the model is minimising a dependency on social care when outcomes can be achieved in an independent or semi-independent environment through support services. The aim is to provide help when it is needed to enable people to regain independence. Community Support Services act as a flexible, individualised platform which offer temporary options for people on their way towards greater independence.

MASH PILOT 2016

Bristol City Council worked with key health and police partners to develop a Multi-Agency Safeguarding Hub (MASH) arrangements for Bristol. The Bristol MASH Project Group set up a task group in 2015 to determine whether there should be MASH arrangements in Bristol. The task group looked at national best practice and designed a pilot that would respond to local needs and drivers for change.

The pilot ran for three months from June 2016 to end of August 2016, to coincide with the fixed-term appointment of 1 full time equivalent health professional who acted as the health services researchers and decision-makers for the MASH.

The MASH received adult cases where there were potential safeguarding concerns and uncertainty if they met the threshold for Section 42 inquiries. The three core agencies (police, health services and local authority) provided research and made joint decisions for the MASH. Avon and Wiltshire Mental Health Partnership also provided adult mental health information on request and attended the weekly adult MASH discussion where possible however their lack of capacity to attend regularly was identified as a barrier to implementing the pilot.

The pilot found that further work is required to establish effective structures for multi-agency safeguarding work for adults. It was time consuming to find the right MASH referrals and the process added delays to the safeguarding processes. For adults, a weekly MASH process did not reflect the pace at which decisions are usually needed.

It was found that a MASH would be most useful for cases where there are doubts over threshold decisions or where the case requires interpretation of the Care Act (2014), for example where substance misuse or sexual exploitation is a concern. It was found that the multi-agency meetings were beneficial in having more information to better understand risks, and that the process improved inter agency understanding and partner working. The pilot did not show that decisions would have been different without MASH, but professionals valued having a fuller picture.

It was found that not all MASH participants had a strong understanding of Care Act and adult safeguarding thresholds and so highlighted the need for ongoing work promoting training in this area.

Given these findings overall time and effort required was not found to be proportionate to the value added to the system. Instead the organisations are looking at ways of better organizing to gain the benefits provided by MASH, including improving recording systems and considering co-location arrangements.

CONNECTING CARE

Connecting Care is a local electronic patient record that allows health and social care professionals directly involved in an individual's care and support, to share a summary of the medical record and any safeguarding concerns. BSAB organisations with a statutory role have worked with the South West Clinical Commissioning Group to implement Connecting Care for children and adults in the city. This is facilitating Mental Health trusts being able to access information about an individual's wider health involvement. This is a transformation project which is ongoing and is a platform that can develop improved multi-agency working across a range of applications in the future as it develops.

INSPIRE BETTER HEALTH TRAINING

The introduction of the Care Act in April 2015 introduced specific changes for the Prison service and the way in which they manage/respond to safeguarding adult concerns. Prior to The Care Act if there was a safeguarding referral this would be sent externally to the Local Authority.

However under the Care Act the responsibility for safeguarding adults in Prison has moved to the National Offender Management Service (NOMS). Therefore Prisons now internally manage all allegations of neglect and abuse.

In April 2016 Bristol Community Health (BCH) became the lead health provider for Prison healthcare. The BCH Safeguarding Team to offer bespoke training for BCH staff within prisons so they can have specific support in how to recognise an adult at risk within a prison setting and support on how to manage safeguarding concerns alongside the prison staff. In 2017/2018, prison specific training has been delivered and has been offered to the wider multi-agency healthcare teams working within the prisons.

ONE25 IN-HOUSE SCRIPTING SERVICE



One25 is a Bristol-based charity, specialising in enabling women to break free from street sex-work, addiction and other life-controlling issues and build new, independent lives. They have implemented a new in-house scripting services which supports women away from drug dependency and street sex work to fund it. This service has been set up in partnership with Bristol ROADS.

SWARM APPROACH TO PRESSURE SORES

A 'SWARM' approach is being taken by North Bristol Trust (NBT) to patients falling or acquiring a pressure area at grade 2. The SWARM approach allows for a rapid root cause analysis of the issue usually discussed by an inter-agency or multi-disciplinary team. In the case of pressure sore, SWARM enables a multi-disciplinary review of the immediate situation early on and prevent escalation of harm. A member of the NBT safeguarding team attends these meetings to ensure the safeguarding perspective is provided. The implementation of this approach has promoted early intervention and safeguarding of adults with pressure sores.

5. SAFEGUARDING ADULTS REVIEWS (SAR)

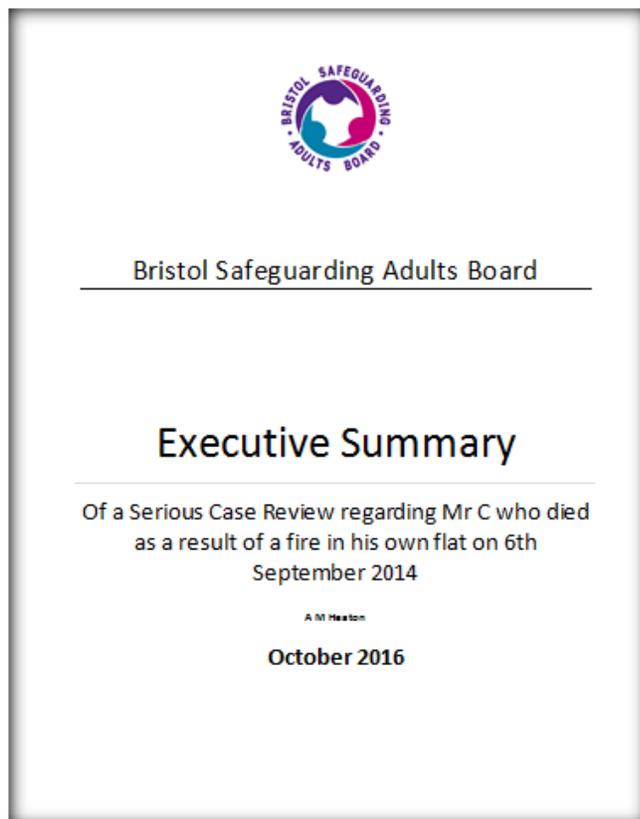
This year the Safeguarding Adults Review Sub Group fulfilled their training plan by commissioning SCIE Systems Review training for managers across the partnership. This has significantly increased the partnership's knowledge and application of undertaking systems learning reviews. We have developed new comprehensive SAR Guidance which is due to be ratified and launched in the first Board of 2017-2018. This has significantly tightened up our referral and commissioning framework to improve governance oversight by the SAR Sub Group and the Executive Group with the intention of reducing delay and ensuring the quality of reviews produced. There are no instances in which a finding of a Serious Case Review has not been accepted by the Board.

Two Serious Case Reviews (SCRs) were published by the BSAB in the year 2016-17. As these were commissioned before The Care Act (2014) they are SCRs and not Safeguarding Adult Reviews. In 2016-2017 BSAB continued work on a third SCR commissioned in 2015. This is due to be published in 2017-2018. BSAB also supported the BSCB in undertaking a review into the death of a newborn baby and her mother. The BSCB ZBM Serious Case Review is due to be published in April 2017 and we will respond to the findings following publication.

In 2016-2017 BSAB accepted one referral for a Safeguarding Adults Review in respect of two individuals. The referral was submitted by Avon and Somerset Constabulary. The BSAB is awaiting the conclusion of criminal proceedings to progress this review however Independent Reviewers have been commissioned and preparatory work for the review begun.

The BSAB agencies reported in their annual submissions an increasing number of concurrent review processes in response to serious incidents. This includes the Domestic Homicide Reviews, Mental Homicide Reviews and single agency Root Cause Analysis reviews. Bristol is also due to roll out Learning Disabilities Mortality Reviews in 2017. BSAB is working to with partners to ensure that where possible duplication is minimized and that resources are not over-stretched.

REVIEWS PUBLISHED IN 2016-2017



MR C (OCTOBER 2016)

The Mr C review concerned an adult who died in a fire at his residence. Self-neglect and hoarding were suspected factors in Mr C's death.

In response to the Serious Case Review the BSAB launched guidance on responding to Self Neglect¹⁰. This included a Hoarding risk assessment tool designed by Avon Fire and Rescue Service to support multi-agency assessment of the risks associated with clutter¹¹. A multi-agency conference is planned on the theme of Self Neglect for June 2017 with Professor Emeritus Michael Preston-Shoot as the keynote speaker.

The Resolution of Professional Disagreements protocol was also developed as a result of the findings of this review. It is due to be audited early in 2017-18. One key area for development is the internal recording of challenge within organisations to allow for accurate reporting.

Bristol City Council and Avon and Wiltshire Partnership Mental Health Trust have developed systems for tracking adults who have been in a secure setting under Section 117 of the Mental Health Act. Avon and Wiltshire Partnership Mental Health Trust have also implemented a 'Co-existing Mental Health and Alcohol and Drug Problems (Dual

¹⁰ <https://bristolsafeguarding.org/media/1124/guidance-for-self-neglect.pdf>

¹¹ <https://bristolsafeguarding.org/media/1126/clutter-image-rating.pdf>

Diagnosis) Strategy' (2016-18) and a Trust wide dual diagnosis clinical network. Practitioners have been supported through the development of a range of resources and tools, and dual diagnosis training opportunities have been established from practitioners in the trust. There is a planned review of Trust dual diagnosis disorder policies to capture learning from the SCR to be undertaken.

Avon Fire and Rescue Service have developed and implemented new electronic recording system to improve recording of risk critical information. They have also developed a pathway to access advice from mental health practitioners.

NHS England and the Bristol Clinical Commissioning Group have provided Self Neglect training for GPs across the city.

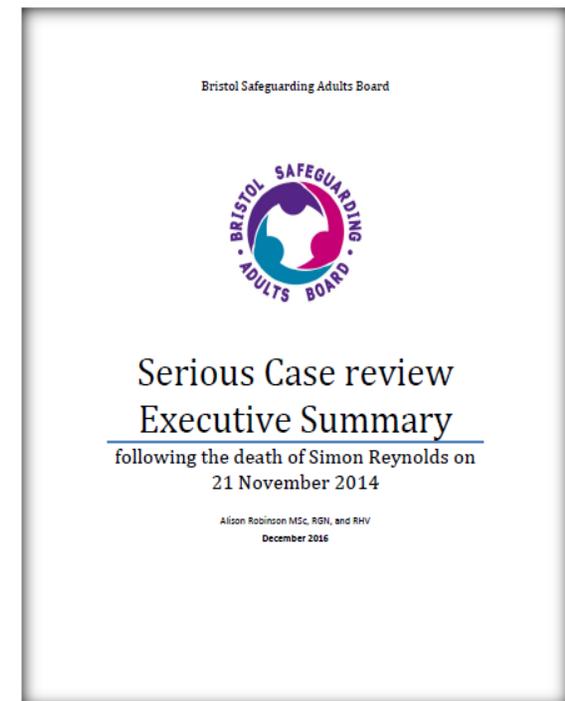
Bristol Adult Social Care undertook an audit of their Self Neglect cases and implemented changes based on this. They established clearer expectations of engaging with the legal team for advice on cases of Self Neglect and Hoarding.

Bristol Housing are implementing a new computer system and focused on improving links with mental health services and adult care and support services to improve information sharing about risk. They are due to review their relevant policies.

SIMON REYNOLDS (DECEMBER 2016)

The Simon Reynolds review concerned an adult in mental health crisis who died from a self-inflicted choking injury after being taken to a Place of Safety.

In response to this Serious Case Review and other findings on the effectiveness of Section 136 Place of Safety there is a regional multi-agency redesign project underway. This project also



recognizes the issues about availability of 136 beds. The governance and operating protocol incorporate Parity of Esteem principles highlight in the report to ensure oversight in the delivery of practice. The project is currently in Phase 4 with planned implementation by Q3 (Oct-Dec 2017). Interim actions to improve service user experience and safety have been implemented such as a change in the staffing mix at the Place of Safety to ensure it is safe to receive admissions 24 hours a day. Admission protocols and mental health review processes have been updated in line with NICE guidelines.

Acute trusts who are BSAB partners have an identified Consultant leading work on identifying and are implementing management processes for patients identified as high risk and in Mental Health Crisis.

The Bristol Clinical Commissioning Group have continued to fund the Mental Health Street Triage Crisis Team for a further year following a successful pilot. This supports community based triage at times of mental health crisis, particularly supporting frontline officers to respond effectively and appropriately.

BSAB will monitor and seek assurance on the effectiveness of the new Section 136 Place of Safety model when it is implemented in 2017.

6. PRIORITIES FOR 2017-2018

In its third year as a statutory Safeguarding Board, 2017-2018, the BSAB will seek to cement the governance work undertaken in the first two years and develop increasingly nuanced oversight and understanding of the Safeguarding work in the city.

We will particularly aim to develop in the following areas:

1. Improve data analysis of the multi-agency response to mental health crisis and the effectiveness of criminal justice response to offences against adults in receipt of care and support
2. Undertake multi-agency audits into Section 42 Referrals and Enquires and Self Neglect
3. Improve cross-working and arrangements with Child and Family safeguarding
4. Improving the multi-agency response to perinatal mental health
5. Develop guidance on Large Scale and Organisation Abuse Investigations
6. Run learning events on Self Neglect, Safeguarding Young Adults and Responding to Concerns about People in Positions of Trust
7. Improve oversight of Community Safety work in the areas of Modern Slavery, Domestic Abuse, Sexual Exploitation, Mate Crime and Prevent
8. Improve Public Engagement and Communication

REPORT SUSPECTED ABUSE: SAFEGUARDING ADULTS AT RISK

If you're being abused or think someone else is being abused, you must tell someone.

If you're a professional use the online **safeguarding adults referral form** https://www.bristol.gov.uk/en_US/social-care-health/report-suspected-abuse

CALL CARE DIRECT

Telephone **0117 922 2700** 8.30am to 5pm Monday to Friday (answerphone outside office hours).

CALL THE POLICE

Telephone 101

In an emergency telephone 999

Textphone 18001 followed by 101

Textphone in an emergency 18000