

Blackburn with Darwen



# **Blackburn with Darwen SAFEGUARDING ADULTS BOARD Annual Report 2019–2020**

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## Foreword

This annual report provides a summary of the work undertaken by the Safeguarding Adults Board in Blackburn with Darwen over the last year.

Of course, the devastating effects of the Covid-19 pandemic have dominated this year. We cannot underestimate the disproportionate affect this crisis has had on the most vulnerable adults and our thoughts are with those that have lost someone and those who have suffered and continue to do so. It is however incredibly impressive that the agencies that are responsible for safeguarding and protecting our most vulnerable adults have been able to maintain their services and our thoughts and thanks must also be with those professionals that have worked on the front line throughout this crisis, often at great personal risk to themselves.

Adult services in Blackburn with Darwen, supported by the Council have done everything they can to protect and support people. Blackburn have a very high level of vulnerable adults who are registered as homeless, prior to the Covid-19 crisis there was considerable work undertaken to deal with this issue and Blackburn were highlighted by central government, as an area that was making significant progress. Given this, it has been impressive that all of Blackburn's homeless individuals had been housed and supported within a very short period. Working closely with the Lancashire Resilience Forum professionals in Blackburn with Darwen provided an efficient system of maintaining contact with elderly and 'shielded' residents and an efficient system to ensure food deliveries were made to those that needed them. This commitment to the most vulnerable was replicated across all agencies and the third sector who played a massive role in protecting and supporting a huge number of people. As you will be aware, parts of the Borough have continued to face a longer lock down period than elsewhere but despite this, the council supported by other agencies have been able to maintain services to the most vulnerable.

There is of course a huge amount of work being undertaken that is not related directly to the Covid-19 crisis. For instance, preventative work around domestic abuse and neglect. This work is found summarised within the report. Blackburn with Darwen has had a long-term commitment to dealing with domestic abuse and with the current added pressures; it is good to see that this has been maintained.

Unfortunately, the one major issue overshadows much of the good work that has been undertaken but that is inevitable and will not change for some time. As we move forward, the Safeguarding Board will continue to monitor the work of agencies to ensure the highest possible standards maintained.

I would just like to thank again all of those that have worked so hard to protect and safeguard adults in these difficult times.



**Steve Ashley**  
**Independent Chair**

## 1. THE BOARD

### 1.1 Purpose of the Board

The Care Act 2014 requires a local authority to establish a Safeguarding Adults Board (SAB), which aims to help and protect individuals who it believes to have care and support needs and who are at risk of neglect and abuse and are unable to protect themselves, and to promote their wellbeing. Section 43 (3) sets out how the SAB should seek to achieve its objective, through the co-ordination of members' activities in relation to safeguarding and ensuring the effectiveness of what those members do for safeguarding purposes. An SAB may undertake any lawful activity which may help it achieve its objective. Section 43 (4) sets out the functions which an SAB can exercise in pursuit of its objective are those of its members. Section 43 (5) Schedule 2 includes provision about the membership, funding and other resources, strategy and annual report of an SAB. Section 43 (6) acknowledges that two or more local authorities may establish an SAB for their combined geographical area of responsibility. <https://www.legislation.gov.uk/ukpga/2014/23/section/43>

Six principles set out in the Care Act:

**Empowerment**

**Prevention**

**Proportionality**

**Protection**

**Partnership**

**Accountability**

**The Board has three core duties** under the Care Act 2014:

Publish a Strategic  
Plan

Publish an Annual  
Report

Undertake  
Safeguarding  
Adults Reviews

### 1.2 Partnership Structure

The Safeguarding Adults Board is supported by an Independent Chair to oversee the work of the Board, to provide leadership, offer constructive challenge, and ensure independence. The day-to-day work of the Board is undertaken by the Sub-Groups and the Safeguarding Business Unit. The Business Unit supports the operational running of these arrangements and manages the Board on behalf of the multiagency partnership. The Board facilitate joint working, ensure effective safeguarding work across the region, and provide consistency for our partners who work across Pan Lancashire.

## **2. WHAT DOES ADULT SAFEGUARDING LOOK LIKE IN BLACKBURN WITH DARWEN**

### **2.1 Population**

The latest Office for National Statistics (ONS) population estimates are for mid-2018, and show that Blackburn with Darwen had a total of 148,942 residents (an increase of 170 since mid-2017). Blackburn with Darwen has a much younger age profile than average. 28.4% of its population is aged under 20, which is the 6th highest proportion in England.

The latest population projections from ONS are based on the population estimates for mid-2016, and look ahead to 2041. For Blackburn with Darwen overall, they predict a slow, almost imperceptible fall in population. However, the 65+ age group is expected to rise by approximately 8,300 over the period - i.e. by almost 40%. The 85+ group in particular projected to rise by over 80%, from approximately 2400 to 4400.

### **2.2 Deprivation**

The 2019 Indices of Deprivation published in September 2019, replaced the previous 2015 edition. The index is constructed from an array of deprivation indicators covering 'domains' such as poverty, health, education, crime, living environment, housing and access to services. The best-known output is the Index of Multiple Deprivation (IMD), which combines all 39 indicators. Deprivation at the Lower Super Output Area (LSOA) level shows the Index of Multiple Deprivation mapped for Blackburn with Darwen's 91 Lower Super Output Areas (LSOAs). 33 of them (i.e. over a third) are among the most deprived tenth (or 'decile') of LSOAs nationally, so Blackburn with Darwen clearly has more than its 'fair share' of very deprived LSOAs. Two of these LSOAs are among the most deprived 1% in England, and a further 12 are in the most deprived 5%. The Borough also has large rural LSOAs-that are less deprived areas. Each of the 'domains' also has its own index. On the Health Deprivation and Disability domain, 46 of Blackburn with Darwen's LSOAs (i.e. just over half) are in the most deprived decile, and none at all in the least deprived three national deciles. All of the commonly used methods suggest that Blackburn with Darwen is relatively more deprived in 2019, than in 2015.

## 2.3 Safeguarding Adults s.42 Enquiries, 2019-20

<b>Counts of Safeguarding Activity</b>	<b>Count</b>
Total Number of Safeguarding Concerns	<b>629</b>
Total Number of Section 42 Safeguarding Enquiries	<b>332</b>
Total Number of Other Safeguarding Enquiries	<b>247</b>

<b>Counts of S.42 Enquiries by Type of Risk</b>	
Physical Abuse	<b>71</b>
Sexual Abuse	<b>14</b>
Psychological Abuse	<b>25</b>
Financial or Material Abuse	<b>90</b>
Discriminatory Abuse	<b>4</b>
Organisational Abuse	<b>5</b>
Neglect and Acts of Omission	<b>153</b>
Domestic Abuse	<b>0</b>
Sexual Exploitation	<b>0</b>
Modern Slavery	<b>0</b>
Self-Neglect	<b>10</b>

The number of safeguarding concerns in 2019-20 is approximately a third lower than in 2018-19, and over a half lower than in 2017-18. This significant decrease has resulted from the embedding of the adult continuum and proactive screening in the adult safeguarding team, resulting in safeguarding queries being directed to appropriate queries relating to quality of care issues. In 2017-18, only 64% of concerns resulted in investigations for S.42 enquiries and other concerns, by 2019-20, 92% of concerns resulted in investigations. Under the categories of abuse/neglect, 'physical abuse' and 'neglect and acts of omission' were the main categories where numbers declined. In all other categories, the numbers were static, besides the categories of 'financial or material' and 'sexual abuse' where local and national campaigns encouraging reports has resulted in gradual increased identification of abuse.

### 3. THE ROLE AND ACHIEVEMENTS OF THE SUB-GROUPS

#### 3.1 Learning and Development (L&D) Sub-Group (Pan Lancashire)

Learning and Development during this period was re-focussed to 2018–2019 priorities to ensure all activity was accessible to both the adults and children's workforce. The Lancashire sub-group transitioned to a joint adults and children's group in April 2019 to facilitate this change. Furthermore, in December 2019 the first LSAB/CSAP joint L&D meeting was held to reflect the transition to the new Pan Lancashire multi-agency safeguarding arrangements, now known as the Blackburn with Darwen, Blackpool and Lancashire Children's Safeguarding Assurance Partnership or CSAP. Terms of reference, membership and a joint pan Lancashire training programme was agreed for implementation between April 2020 and July 2020. To facilitate this and to further plan for September 2020 onwards, development day took place in the week prior to Covid 19 lockdown in March 2020.

Work has also continued to procure a new L&D Learning Management System (LMS). Training is now aligned to the core programme and priorities of the LSCB and LSAB. Courses include: Attachment, Child Development & Resilience, Bullying, Self-Harm & Suicide, Child Neglect, Domestic Abuse, Emotional Abuse, Fabricated & Induced Illness, Honour Based Abuse & Forced Marriage and Female Genital Mutilation, Mental Care Act for 16 and 17 year olds, Professional Dangerousness, Safeguarding Special Educational Needs & Disabilities children, Safeguarding Young People, Safer Online Behaviour, Exploitation, What Happens When a Child Dies, Supervision Skills for managers, Toxic Trio, Understanding Hostile and Uncooperative Families and Young People & Drugs. Training continues to be delivered by a mix of external trainers and the multi-agency practitioner training pool.

A number of new courses have been developed to meet demand, learning from reviews and aligned with priorities. The 'Families affected by Alcohol' course was delivered in July 2019 in partnership with Future Foundations/ Addaction. In April 2019, the AftaThought training company was commissioned to deliver briefing sessions to 120 participants covering Adults Safeguarding Legislation.

A suite of materials developed by the Mental Capacity Act (MCA) sub-group and LSCB partners following the launch of the MCA Learning and Development plan. The suite of packages designed to deliver information to the adult workforce including carers and frontline workers. A training package was made available to care homes and external partners to deliver to staff in house. Two MCA Training for Trainers was delivered to managers to cascade information within their organisations.

#### **Learning and Development Priorities from 2019–2020** (realigned to 2018-19)

- **Improvement and maintenance** of the present training availability through the safeguarding partnerships
- **Respond to and adapt to new opportunities** for Learning and Development for an all age workforce and throughout the transition to new CSAP arrangements
- **Transition to a new system** upgrade for delivery of e learning and learning management system
- **Continue to respond to identified need** from Children's Safeguarding Practice Review (CSPR), Safeguarding Adult Review (SAR) and national and local agendas and deliver evidence based, responsive, effective and cost efficient learning and development opportunities to Lancashire safeguarding practitioners.

## 3.2 Communications and Engagement Sub-Group (Pan Lancashire)

### Communications and Engagement Sub-Group (Pan Lancashire)

The Pan Lancashire Communications and Engagement sub-group is a multi-agency group hosted by the Blackburn with Darwen, Blackpool and Lancashire Safeguarding Adults Boards and Children's Safeguarding Assurance Partnership (CSAP). The Terms of Reference, Membership and Strategy were reviewed following changes to children's safeguarding arrangements, and the establishment of CSAP to ensure it still meets requirements of the CSAP and the three Safeguarding Adult Boards.

The Communication and Engagement sub-group operates under the Safeguarding Boards to:

- Co-ordinate the communication and engagement activity of the Boards;
- Agree key safeguarding messages and communicate them effectively through a variety of channels;
- Identify and implement effective methods of engagement with partners, service users and members of the public.

A Pan Lancashire Communication and Engagement strategy was produced and approved at April 2019 Board.

#### Communication and Engagement Priorities:

- **Learning from Case Reviews:** to ensure key messages from reviews are effectively delivered and changes in practice are evident
- **Service User Engagement:** to ensure service user voice is heard in order to influence service provision and development (Making Safeguarding Personal - MSP)
- **Diverse/Seldom Heard Communities:** to improve engagement with diverse communities to ensure these communities are safeguarded and are aware of key messages
- **Communications Pathway:** to develop a clear pathway and a coordinated approach for all communications across pan-Lancashire to include statutory and non-statutory partners and the public
- **Key Messages:** to prioritise and apply the communication pathway to emerging themes, issues and campaigns

#### Activity on Priorities:

##### **Learning from Case Reviews**

The group had oversight of an ongoing piece of work around "Professional Curiosity" which is a frequent theme arising from case reviews. A task and finish group was established to consider how professional curiosity could be embedded and encouraged in practice to explore how professionals could be further supported. Awareness was raised to encourage practitioners to "think the unthinkable" or "ask the question". Lancashire Constabulary promoted the "Think Child" campaign, which was used successfully as an internal police campaign. The police extended the campaign to "Think Vulnerability" to encompass an all-age approach to recognising vulnerabilities and safeguarding abuse in adults and children.

##### **Diverse/Seldom Heard Communities**

There is a large and diverse population residing across pan Lancashire, and due to its vast diversity, it has presented a challenge in identifying a specific areas of focus, in terms of diversity and communication and engagement activity. The Lancashire Quality Assurance and Performance (QAAP) completed an exercise, which presented safeguarding referrals and types of abuse broken down by ethnicity and district. This was to determine if specific abuse types occur more in certain communities. It was difficult to determine a specific pattern from the data, due to blank entries against ethnicity, data and abuse type.

### **Communications Pathway**

The group agreed a pathway which provided a consistent approach to communicating key safeguarding messages with all stakeholders. The pathway contains:

- Communication types and channels – to assist consideration of appropriate routes and opportunities to sharing key messages
- Stakeholder map – to ensure all key stakeholders are considered
- Communication channel identification template – to consider and set out the methods to use for each message/procedure/campaign/learning
- Communication plan examples – to provide detailed communication brief ahead of delivery

### **Adult Safeguarding Week**

National Safeguarding Adult Week took place from 18<sup>th</sup> to 24<sup>th</sup> November 2019. The Ann Craft Trust led the week nationally with a focus on five key themes: Modern Day Slavery; Domestic Abuse; Self-Neglect; Transforming Care; and Safeguarding in Sport and Activity. The sub-group agreed that to support the week and release messages and resources focused on Modern Slavery, Domestic Abuse and Self-Neglect.

A communication brief was released to all partners to share consistent key messages, resources and guidance on the above themes throughout the week. Residential and Domiciliary Care providers were contacted and encouraged to take part by raising awareness with staff and residents within their settings.

### **Campaigns promoted during 2019-2020**

- Safeguarding Awareness Week - November 2019
- Self-neglect Framework Launch - April 19
- Financial Abuse - April 2019
- Prevent Awareness - ongoing (during reporting period)
- Online Abuse - ongoing (during reporting period)

## **3.3 Quality Assurance and Performance Management (QAPM) Sub-Group**

The QAPM sub-group met to review the QAPM returns. The QAPMs identified that the LSAB needed to focus on creating and implementing the BwD Vulnerable People Strategy. During 2019-2020, the strategy was agreed and action plan developed, and an officer employed by the Council to co-ordinate the activity in the action plan. This will include how partners address vulnerable adults due to their risk factors like homelessness, substance misuse, mental health and other co-morbidities.

## **3.4 Safeguarding Adults Review (SAR) Sub-Group**

During the year there were no SAR referrals for the group and learning from national and regional SARs was disseminated through the Board as appropriate.

## 4. PARTNER ACTIVITY

### Lancashire Constabulary

The role and purpose of Lancashire Constabulary is to protect the public. Adult safeguarding is driven by the Safeguarding – Investigation – Prevention (S.I.P) mantra. This drives Lancashire Constabulary's vulnerability strategy and action plans which prioritise the areas of business for the police. Lancashire Constabulary plays a lead role in the Adult Safeguarding Board membership and continues to share and drive the priorities such as Domestic Abuse, in conjunction with partners. All staff have received vulnerability training within the last two years who have responsibility for identifying and responding appropriately to those most vulnerable in communities. Lancashire Constabulary provide both an immediate response resource for those adults identified at risk and undertakes a pro-active role through neighbourhood community activity, in preventing harm and promoting the welfare of individuals. A core function of identifying and responding to risk and harm is paramount in all areas of safeguarding within Lancashire Constabulary.

The Constabulary continue to raise awareness of vulnerability and safeguarding through various channels. Campaigns were planned and run in collaboration with partners, to raise awareness and deliver key messages with the aim of protecting people from harm and ensuring safeguarding is everybody's business. Some examples include:

**Fraud:** The Constabulary has made the public aware of C19 related Scams, which have been in circulation. Social media, local press and community magazines are being utilised.

**Mental Health:** Promoting the use of AMPARO bereavement support, which Covid-19 now available across all of Lancashire from the 1 April 2020. This is a listening ear service for those affected by suicide, recognising the increase risk posed to those affected by suicide

**Domestic Homicide Reviews:** Learning in relation to Domestic Abuse (DA) and Mental Health (MH). This area of learning has been included within the Force DA action plan and activity undertaken via an internal blog and Vulnerability Coaches, plus training to all staff.

**Pan Lancashire Anti-Slavery Partnership:** Numerous public facing events and awareness raising sessions have taken place. Alongside this there have been a number of "Constabulary Operations" covering areas such as sexual exploitation; criminal exploitation; labour exploitation and fraud.

### Key Achievements in 2019–2020

- **Fraud** - All community safety officers have received training in identifying and responding to victims of fraud. A weekly activity in conjunction with Action Fraud is prioritised to offer face-to-face contact and advice/support to the public to this increasingly sophisticated area of demand.
- **Vulnerability Coaches** - The Constabulary has invested in additional training and coaching for a cohort of approximately 150 Vulnerability Coaches. The Coaches are a group of staff from all areas of business who have volunteered to become peer support within their teams. This is for advice and support and to deliver key messages and support campaigns across the Force in line with Force vulnerability related priorities.
- **Domestic Abuse-Operation Encompass** - Op Encompass has assisted in a shift in focus from concentrating on individual incidents to longer-term family focused solutions to harm identified. Referrals are continuing to improve in terms of compliance and consent, resulting in improvements in effective safeguarding for children and adults. The ongoing Multi-Agency Risk Assessment Conference (MARAC) review is continuing to develop a pilot that will incorporate a holistic response to high-risk victims and perpetrators.

- **Stalking or Harassment** - Stalking or Harassment Protection Orders were introduced in January 2020, the Force undertook a detailed launch and has been successful in obtaining two orders to date.

### **Lancashire and South Cumbria Clinical Commissioning Groups (CCGs)**

Lancashire and South Cumbria CCGs have a statutory duty to ensure that arrangements are made to safeguard and promote the welfare of children, young people and adults to protect them from abuse or the risk of abuse. The CCG's are required to take account of the principles within the Mental Capacity Act and to ensure that health providers from whom they commission services have comprehensive policies relating to the application of MCA (2005) and if appropriate MCA Deprivation of Liberty Safeguards (2009).

As commissioners of local health services CCGs are required to assure themselves that the organisations from which they commission have effective safeguarding arrangements in place; including independent providers and voluntary, community and faith sector, to ensure that all service users are protected from abuse and the risk of abuse.

The CCGs need to demonstrate that their Designated Lead Professionals for Adults, Children and Children in Care are embedded in the clinical decision-making of the organisation, with the authority to work within local health economies to influence local thinking, practice development and continuous safeguarding improvement.

Designated Lead Professionals for Safeguarding are experts within the field and strategic leaders. They are integral in all parts of the CCGs commissioning cycle, from procurement to quality assurance and in the delivery, development, and review of services to ensure that the views and wishes of adults and children are clearly sought and respected.

#### **Key Achievements in 2019–2020**

- Introduction of a new safeguarding model to support Integrated Care System leadership, including the implementation of health governance arrangements, which take into account the legislative requirements for safeguarding and the changing health landscape and how we deliver services.
- Development of a Memorandum of Understanding (MOU) across the CCGs to support a clinical collaborative network approach to safeguarding. The aim is to increase resilience and strengthen the role of the designated lead professionals to support greater flexibility to meet service development initiatives. The designated lead professionals work together as one safeguarding network to deliver safeguarding functions in a hub and spoke arrangement across the Integrated Care System/ Integrated Care Partnerships.
- Implemented service development task group to strengthen arrangements for the monitoring and quality assurance of placements for individuals placed in Continuing Health Care funded settings out of area.
- Provision of safeguarding system leadership to support and promote learning from Safeguarding Adult Reviews and Domestic Homicide Reviews, with a targeted response to service development. This includes the development of safeguarding champion models across the regulated care sector, domiciliary care and primary care, along with creative approaches to learning including use of communications and technology to make learning accessible to all.

## **Healthwatch Blackburn with Darwen**

Healthwatch Blackburn with Darwen work in conjunction with the local authority and Care Quality Commission (CQC) to implement safeguarding alerts as identified. These are identified either through our engagement projects or through our programme of Enter and View visits to health and social care settings.

A dedicated and experienced team visit residential care homes as part of our Enter and View programme and produce a published report which reflects the experience of people living and working there. The lead of the team also conducts an environmental and observational assessment. Safeguarding alerts may be raised as a result of this assessment or as a result of direct conversations with staff, residents and relatives.

The Healthwatch Blackburn with Darwen team receive intelligence directly from the public by telephone, email and by public engagement. On these occasions Healthwatch will raise Safeguarding alerts as deemed appropriate and direct individuals to support agencies such as Advocacy. The remit of Healthwatch Blackburn with Darwen is to listen to the voices of the public and convey those views to service providers. This is particularly important in terms of the “seldom heard” or more vulnerable. The Enter and View reports alongside our general reports identify areas of concern and bring them into the public arena.

### **Key achievements in 2019/20:**

- Healthwatch were able to highlight issues around the discharge of residents with dementia from hospital to either residential care or domiciliary care, concerns around triage and assessment and lack of communication with carers.
- Healthwatch were able to achieve positive responses from statutory agencies in respect of the issues we raised. We were able to effect change and improvements to the residents’ experience of care.

## **Lancashire and South Cumbria Foundation Trust (LSCFT)**

LSCFT provide health and wellbeing services across Lancashire and South Cumbria including:

- Secondary mental health services
- Perinatal mental health services
- Forensic services including low and medium secure care
- Inpatient child and adolescent mental health services
- Physical health and wellbeing services

The Trust has a Safeguarding Vision that aligns the national and key local priorities to improve safeguarding outcomes in LSCFT. It provides a framework to base measurements and assurances of safeguarding practice and describes plans to have robust safeguarding arrangements across the Organisation that are integrated into the delivery of the care. This vision aims to embed safeguarding at the heart of everything we do; ensure that the Trust, via the Safeguarding Team, we have effective safeguarding and accountability structures; ensure we promote learning through experience; develop competence, knowledge and a skill base in safeguarding and MCA across the Trust; and engage with the service users and patients in strengthening participation in line with Making Safeguarding Personal.

The Safeguarding team has led the implementation of the priorities within the Trust Safeguarding Vision and through analysis of the impact of delivery of the six core priority areas, triangulating this with dissemination of learning from SARs and DHRs.

LSCFT have strengthened safeguarding practice and systems to sustain compliance with revised statutory Safeguarding, MCA and Prevent Guidance and responsibilities, seeing improvement in the quality of Section 42 referrals which in turn provides clarity and feedback from initial triage and application of the “threshold” document. We have made significant progress in raising awareness to Domestic Abuse and embedding routine enquiry wider into clinical practice. We have engaged with multi agency partners to deliver a co-ordinated approach to domestic abuse and actively strengthened internal processes for MARAC as well as supported the MARAC redesign.

LSCFT hosted a successful Safeguarding Conference. The focus was on safeguarding and relationships at a professional, personal and harmful level. Guest speakers inspired and reminded us we must respond by working together, to offer protection and support to the vulnerable people. The most memorable parts were listening to survivor’s accounts of domestic abuse and also criminal exploitation. We were privileged to hear their moving and difficult stories and how services can support. This has had a direct impact on our approach to Domestic Abuse.

LSCFT have raised the profile of contextual safeguarding, trauma-informed care and Think Family. The safeguarding team a strong clinical presence in teams, attending MDT/CPA meetings to support community teams and the wards with complex cases requiring input from safeguarding and may require safeguards in the community and on discharge.

### **National Probation Service (NPS)**

The NPS protects the public by working with service users to reduce reoffending and harm. It works jointly with other public and voluntary services to identify, assess and manage the risk in the community of service users who have the potential to do harm. The NPS has a remit to be involved with victims of serious sexual and other violent crimes. NPS completed all Court assessments and pre-sentence reports as well as the management of all Approved Premises.

The NPS share information and work with the SABs and other agencies including local authorities and health services, and contributes to local Multi-Agency Public Protection Arrangements (MAPPA) procedures to help reduce the reoffending behaviour of sexual and violent service users, to protect the public and previous victims from serious harm.

### **Key Achievements in 2019–2020**

- Strong focus on completion of mandatory Adult Safeguarding training both eLearning and classroom until Covid-19 arrived (eLearning remains a focus at the current time).
- At a strategic level, the NPS Health and Social Care lead is meeting regularly with the Association of Directors for Adult Services to aim to improve the interface between the two organisations.
- Dedicated Multi-Agency Risk Assessment Conference (MARAC) practitioners providing support to colleagues and representing NPS at MARAC meetings.
- Audit work to check on NPS engagement with Boards and sub-groups to ensure appropriate representation in all relevant forums.
- As an organisation with Autism re-accreditation, have continued our work in this area.

## **North West Ambulance Service (NWAS)**

The NWAS Safeguarding Annual Report provides an overview of safeguarding activity for NWAS during 2019-2020 and assurance relating to the scoping, development and implementation of safeguarding related processes.

Safeguarding activity has continued to rise in 2019-2020, and a number of improvement projects were identified to ensure continuing safeguarding demand was met.

### **Key Achievements in 2019–2020**

- **Safeguarding Training:** The publication of the child and adult intercollegiate document, made some recommendations of the required levels of safeguarding training. This document reviewed, all Paramedic Emergency Service (PES) patient facing staff being trained to level 3 safeguarding. In addition, staff identified on the Training Needs Analysis (TNA) as requiring level 3 safeguarding training who will continue to receive this training. Level 2 training is overseen by the Learning and Development Team who work closely with the Safeguarding Team. A bespoke safeguarding training session is in development.
- **Safeguarding case reviews:** The Safeguarding Team continue to be involved in serious case reviews, safeguarding adult reviews and domestic homicide reviews. NWAS has particular learning in relation to concealed and denied pregnancy, incorporated into the level 3 safeguarding training.
- **Safeguarding Assurance Framework:** Submitted to the Commissioners and evidence requests received was being worked on to support the assurance framework.
- **Project emerald** is the title of the safeguarding innovation project, to introduce a new safeguarding platform for recording safeguarding concerns and will replace the current Eriss system.

## **Cumbria and Lancashire Community Rehabilitation Company (CLCRC)**

CLCRC are represented on the Lancashire, Blackpool and Blackburn with Darwen Safeguarding Adults Boards by Deputy Directors, to help protect adults with care and support needs to ensure that local safeguarding is operationally understood and adhered to and work with partners to prevent abuse, harm and neglect.

CLCRC works with both service users and victims. Vulnerable Adults (VAs) could be part of the caseload or could be the dependents or associates of those individuals. CLCRC staff will generally undertake the role of 'Alerter', identifying a potential threat to a VA. However, staff should also be responsible to local authority enquiries under the section 42 duty as required by the Care Act 2014. The concerns are reported and resolved in a multi-agency partnership with local authority policy and procedures and police action, if appropriate.

CLCRC is aware that the identification and protection of VAs is core to their work. This is due to the nature of probation business as a statutory agency and in partnership in the community. All people are entitled to a life without exploitation or abuse. Therefore, the following principles will apply: CLCRC will work with other agencies in the protection of vulnerable adults from abuse. CLCRC have safe recruitment practices to help to protect vulnerable people from those in a position to exploit them, and have policies that enable staff protection if they report abuse in their organisation. At all times, CLCRC staff must engage fully and openly with professionals from other agencies when dealing with a vulnerable adult.

Actions from the safeguarding plan incorporated into the sentence and risk management plan completed by CLCRC. Consideration given to whether the safeguarding issue warrants a risk escalation to the National Probation Service (NPS). This is because CLCRC work with service users assessed as presenting low and medium risk of serious harm and any assessed increase in too high or very high risk of serious harm must be referred to the NPS.

### **NHS England and NHS Improvement (North West)**

NHSE/I has responsibility for oversight of the safeguarding system in health. Working alongside the Designated Safeguarding Leads NHSE/I:

- Disseminates national policy on behalf of both NHS England and NHS Improvement across the system
- Convenes a regular safeguarding network and escalates significant issues with potential system-wide relevance - such as significant issues from serious case reviews, safeguarding adult reviews, domestic homicide reviews, and other statutory processes that may require a national resolution
- Ensures effective arrangements are in place across the local NHS system to discharge safeguarding duties such as information sharing, sharing best practice and embedding learning from incidents, as well as leading and defining improvement in safeguarding practice at a local level
- Ensures effective systems are in place for responding to incidents of abuse and neglect of children and adults, to ensure that timely and appropriate referrals are made
- Ensures both NHS England and NHS Improvement staff are appropriately trained, supervised and competent to carry out their safeguarding responsibilities
- Ensures safeguarding expertise is provided to support Clinical Commissioning Groups (CCGs) assurance processes
- Ensures that provision is made for specialist safeguarding advice to NHS England commissioners, working with Designated Professionals as appropriate, to support them in commissioning services and monitoring contractors' performance, and ensuring compliance with safeguarding statutory duties and the Mental Capacity Act

NHS E/I has supported the Lancashire and South Cumbria Safeguarding Integrated Care System (ICS) network in the development of a transformational model of safeguarding across the ICS. There is a clear commitment to a combined adult and children system wide approach to safeguarding across the ICS. The benefits of such an integrated approach to strategic safeguarding arrangements and leadership are:

- There will be greater consistency in the delivery of statutory functions across the ICS improving resilience across the system and safeguarding networks whilst enabling the development of a sustainable and flexible safeguarding model.
- The development of a transformational model provides an opportunity to consider new ways of delivering the functions of the designated role across the ICS to maximise system expertise, ensuring collaboration and avoiding duplication of effort and resource.

### **Lancashire Fire and Rescue Service (LFRS)**

LFRS as an Emergency Service, we identify potential safeguarding concerns when attending fire incidents or carrying out Home Fire Safety Check visits. We do not support service users and carers individually but work with multi-agency partners on self-neglect cases etc.

### Key Achievements in 2019–2020

- Awareness of safeguarding and our internal procedures increased to all LFRS staff
- Checks within LFRS completed on all referrals made to monitor quality
- Commitment from LFRS Senior Managers and the Combined Fire Authority (Governing Body) re Safeguarding and quarterly reports presented to Strategic Boards for reporting purposes
- A new prompt poster, called 'Safeguarding ABCDE' produced and shared in various ways across the Service. ABCDE poster also shared with Safeguarding Boards and with all other fire and rescue services via the national body - National Fire Chiefs Council (NFCC)

### Blackburn with Darwen Council

#### Adult Services and Prevention

The department holds responsibility for the Safeguarding Adults Team, which is required to undertake statutory functions with regard to safeguarding duties in line with the Care Act 2014.

### Key Achievements in 2019–2020

- Provision of the Safeguarding Adults Team which has been remodelled to be more closely aligned to Integrated Neighbourhood teams
- Embedding the Adults Continuum
- Dealing well a number of complex and tricky investigations
- New ways of working with more of an emphasis on supporting and managing Safeguarding concerns and enquiries at the 'Front Door'. This has resulted in an improved duty function
- Development of a new way of recording and processing Safeguarding issues within Mosaic case recording system. This is due to go live August 2020 (delayed due to Covid19)
- The bid for a safeguarding officer apprentice has been successful – this role will provide an opportunity for an apprentice to work across the safeguarding and DoLS teams to pursue a career path in social and business support. This will be the second apprentice; we have been successful in securing a permanent position for our DoLS team apprentice.
- The Deprivation of Liberty (DoLS) team has managed significant demand well and introduced new systems and processes to improve efficiency. An additional team manager has been recruited to oversee DoLS and workforce development

#### **Case Study**

*A request made for a Mental Health Act assessment due to JC presenting as vulnerable. She was leaving her house late in the evening with some safeguarding concerns due to potential risks she was taking. During this time, reported that she was having flu like symptoms and agreed to self-isolate for seven days in line with government guidance relating to Covid 19. Following on from this, further safeguarding concerns raised due to her setting a bin on fire in her bedroom.*

*Further Mental Health intervention requested to determine if JC's mental health had deteriorated so much that she was unable to assess risks or understand the consequences of her actions. Alternatively, consideration of a cognitive deficit that affected JC's ability to make specific decisions in line with MCA (Mental Capacity Act). JC has an acquired brain injury and needed an urgent place of safety. Mental Health Doctor was of the view that the concerns*

*relating to JC's presentation were due to the acquired brain injury and did not consider that Psychiatric admission to hospital was required or appropriate.*

*The mental health team had ongoing concerns for JC's lack of capacity to make decisions in all aspects of daily living including care, treatment and relationships. Another consideration was a male relative whom she resided with was controlling of her immediate environment. She was extremely vulnerable and at further risk of being exploited.*

*This case referred to adult safeguarding and adult social care with numerous social workers involved in keeping JC safe whilst she was living in the community.*

*Further support accessed from her GP, Lancashire Fire and Rescue Service, Police, Care provider and colleagues at the hospital.*

*Daily support from crisis support services offered to JC and her relative. JC's physical health deteriorated and subsequently her GP arranged transport for JC to go into hospital to rule out delirium and request input from neurology.*

*Support from safeguarding team at the hospital requested to ensure JC not discharged without liaison with BwD safeguarding adult's team and the allocated social worker informed. Numerous placements considered to accommodate JC, however, this proved very difficult due to her health conditions.*

*Once JC was well enough for discharge, the MDT involved with her discussed next steps taking into account JC's views. They deemed that it was appropriate JC transferred to a discharge to assess bed within an appropriate setting for a person with an acquired brain injury to ensure she has the best support to consider longer-term support options.*

*A placement eventually found at a neuro unit within the local health footprint. JC is now involved in further assessments with a long-term view to her living independently.*

*The safeguarding team along with partner agencies have supported and worked in a collaborative manner to ensure the best possible outcome and reduce the risks that were present for JC.*

## **Community Protection & Housing Service**

The areas of responsibility include Counter Terrorism, Counter Extremism, Domestic Abuse, Community Safety/Community Protection, Homelessness & Rough Sleeping and Road Safety.

### **Key Achievements in 2019–2020**

#### **Counter Terrorism**

- In 2019, the Home Office approached Blackburn with Darwen Borough Council (BwDBC) to establish a 'Centre of Excellence' to oversee Prevent delivery for Lancashire. In addition to the existing BwD staff, since September 2019, the Home Office provided grant funding for additional posts to cover the wider geographic footprint.
- In January 2020, the Home Office advised that BwD was no longer a priority area in its own right however, the risk and threat to Lancashire as a whole, was significant and the Home Office were committed to providing funds for a regional resource to risk model, coordinated by BwDBC.
- This new approach enables the Lancashire specified authorities to flex the resource based on the changing risks and hot spots identified through the Counter Terrorism

Local Profile, Monthly Dashboard, Channel referrals etc. The intention is to provide support and resources into areas which have a diffusion of threat (e.g. not focused on one authority area) focusing on hot spots rather than administrative boundaries.

- Face to face Prevent training delivered to 2,949 individuals aged 22+(492 Adults, 512 front line practitioners, 130 other staff and 1815 teaching staff) between 01/09/19 – 31/03/20.
- The number of Channel referrals sent to the team increased over 100% on the previous years. The adoption rate is indicative of referrals that are more appropriate, training has improved and staff are more confident in reporting concerns and seeking advice.

### **Counter Extremism**

- Responding to Covid-19 fact checking communications, monitoring tensions and working with community organisations to mitigate the effects of extremism as well as undermining extremist narrative.
- Examples include: a programme called Covid-19 Conversations where use of digital technologies was used to bring together different members of the community to talk about Extremism
- Using media and partners to highlight and promote (in some instances, humanise) the work streams and using social media in an unprecedented way to connect with those who need us.

### **Domestic Abuse**

- Investment in Independent Domestic Violence Advisor (IDVA) provision has allowed the borough to maintain support for anyone who needs it from a qualified IDVA.
- Provision of Refuge to include specialist provision for Asian heritage communities remaining open and accessible through Covid-19.
- Rapid development of alternative engagement technologies, introducing on-line chat and associated digital engagement platforms for people to seek support and receive support to include delivering work with perpetrators.
- Maintaining our Complex Case Hub (CCH) – working with those that need our help with multiple and complex issues as part of an integrated

### **Community Protection & Homelessness**

- Providing accommodation for anyone who needs it, maintaining Severe Weather Emergency Provision 7 days a week irrespective of the weather meaning no person needs to sleep outside.
- Rapid deployment of Covid-19 Care and Covid-19 protect housing options supporting the rapid discharge of hospital patients with no fixed address and mitigating the use of multi occupancy shared facility accommodation for those who need to isolate.

### **East Lancashire Hospitals NHS Trust (ELHT)**

ELHT was established in 2003 and is a large integrated health care organisation that provides high quality acute secondary healthcare for the people of East Lancashire and Blackburn with Darwen.

The NHS England Safeguarding Children, Young People and Adults at Risk in the NHS: Safeguarding Accountability and Assurance Framework states:

- Providers are required under statute and regulation to have effective arrangements in place to safeguard adults at risk of harm and abuse in every service that they deliver.
- Providers must demonstrate embedded safeguarding at every level in their organisation with effective governance processes evident.

- Providers must assure themselves, the regulators, and their commissioners that safeguarding arrangements are robust and are working.

Safeguarding arrangements must include:

- Identification of a named lead for adult safeguarding and an Mental Capacity Act (MCA) lead
- Safe recruitment practices and arrangements to address allegations against staff.
- Provision of an Executive Lead for adults at risk
- A suite of safeguarding policies and procedures that support local multi-agency safeguarding procedures
- Effective training of all staff commensurate with their role and in accordance with the Intercollegiate Document
- Providing effective safeguarding supervision arrangements for staff
- Developing an organisational culture where all staff are aware of their personal responsibilities for safeguarding and information sharing.
- Developing and promoting a learning culture to ensure continuous improvement.
- Policies, arrangements and records to ensure consent to care and treatment obtained in line with legislation and guidance such as the Mental Capacity Act 2005.

#### Key Achievements in 2019–2020

- **Roles and Competencies**

The ELHT Safeguarding Adults Team has worked alongside counterparts from Learning and Development to deliver the requirements of the Adult Safeguarding: Roles and Competencies for Health Care Staff guidance published in 2018. This has resulted in successful delivery of Level 1, Level 2 and Level 3 Safeguarding Adults Training, reaching the mandated levels of compliance in each area.

- **Domestic Abuse and Sexual Violence**

Significant work undertaken in ELHT to raise the profile of the domestic and sexual abuse agenda. This has included the development of the Independent Domestic Violence Advocate (IDVA) and Hospital Sexual Violence Liaison Officer (HSVLO) roles within the Trust. The most evident measurable outcome, of raising the profile of these types of abuse has been an increase in the number of referrals, in particular a high volume of first time disclosures. Alongside this, the presence of these staff has enabled both patients and staff to feel supported in confronting a very difficult topic.

- **Safeguarding Care Plans and Mental Health**

Following internal consultation, a revised Safeguarding Mental Health Care Plan was developed. In order to test its effectiveness, we did a pilot in a number of clinical areas, for a period of three months. Following the pilot, an audit highlighted the benefit of these revised plans, in particular noting the improved outcomes for patients and a smoother referral process to other agencies involved in the individuals care. Given the success of this pilot, with further work to ensure that these care plans are implemented trust wide.

- **Safer Discharge**

As a part of ongoing quality improvement within ELHT, 2019-2020 saw a focus on “Safer Discharge”, based around the *value statement*

*“As a patient, I expect my transfer to be a positive step, that is best for me and worry free. Having listened to my wishes and been informed along the way, that results in me getting where I prefer to be at the right time, with the right people involved, knowing I can manage with a plan of who to contact if I need to”.*

This work undertaken collaboratively with clinical staff, in direct response to a number of safeguarding alerts raised in relation to potentially unsafe discharges/transfers from the hospital to the community. A direct result of this work is that the number of allegations are substantiated has significantly decreased. There will be continued work to ensure this positive trend continues.

### **Age UK Blackburn with Darwen**

As a local voluntary sector provider Age UK Blackburn with Darwen has a crucial role to play in recognising potential harmful situations through a range of community based provision and supporting older people to access support to deal with these situations. In relation to safeguarding, we work with both older people who are at risk of abuse from others along with those who, for a variety of reasons, are not able to care for themselves fully and are risk of neglecting their health and wellbeing. In 2019-2020 the key themes from safeguarding issues raised by our workforce relate to financial abuse and self-neglect. During the year, staff have raised 12 cases, which resulted in 8 reports to either Adult Services safeguarding team or the Police or both, the remaining 4 cases managed by the organisation in conjunction with relevant local partners. Most cases were identified by personnel within Advice and Information, and Integrated Care services. During the year, we have provided refresher training for all staff on safeguarding and safeguarding is a standard item on all staff supervision meetings.

This case study provides an example of working in partnership to support successful safeguarding:

#### **Case Study**

*M is 69, lives alone and has a history of mental illness, and although she has some support from family members this is intermittent. M, well known to Age UK and has accessed a number of services over the years including community activities, Advice & Information and befriending. Due to their mental illness, M is particularly vulnerable and has been a victim of a financial Scam previously. M has recently made numerous allegations to our staff including the proceeds of the sale of their property had been taken from her bank account by family. She is very distrustful of other organisations and she has changed suppliers/banks on a number of occasions. In response to the allegation regarding the sale of property proceeds, due to our relationship with M agreed, that we would carry out a joint home visit with the officer from the Safeguarding Team to discuss the allegation. M struggles with managing paperwork and due to the amount of changes made to utilities, banks and other service suppliers we found large amounts of bills and letters. With M's consent, we agreed we would help them sort out the paperwork using two Age UK staff members whom they trusted, who were successful in getting the paperwork more organised and clarity on the financial position. We then carried out a second joint visit, again to resolve the house sale. There was no evidence was found by the Police or Safeguarding team about the allegation. It transpired that a family member held the proceeds in an account to prevent M being the victim of another Scam, but that funds regularly transferred into M's own bank account for her to use. We also made a referral for a cleaner so M could keep on top of housework. We continue to have regular contact with M and support her with ongoing management of issues and paperwork, which she is happy with as she view us as a vital part of her support network.*

## **The Wish Centre**

The Wish Centre is a specialist domestic abuse service providing advice, support, crisis interventions and accommodation for victims impacted by domestic abuse. Safeguarding is an integral part of service delivery and therefore the organisation ensures that the full staff team, trustees and volunteers have completed level 1 safeguarding training. To ensure the safeguarding of users, The Wish Centre worked closely with the safeguarding team in East Lancashire Hospital Trust as well as the Safeguarding teams in BwD, to ensure successful outcomes for service users. Staff have attended the adult continuum of need training and follow the process outlined.

Staff and volunteers are also required to complete level 1 safeguarding training and level 2 if they have face-to-face contact with service users. During supervision, the training completed or due for refresher was checked under learning and development. Updates and alerts from the safeguarding boards are circulated via email to the team, and stored for reference on the internal server. All the agency policies are reviewed and updated every 2 years and are easily accessible for all the staff and volunteers on the internal server. Staff have all received training on the Care Act, and understand and adhere to section 2 of the act. All service user support plans are devised with service users and are reviewed and updated on a regular basis. The organisation also contributes to safeguarding training and actively engages in serious case reviews and domestic homicide reviews.

### ***Case Study – (Donna anonymised)***

*Donna referred to Wish Centre by staff at local Foodbank; they said that Donna had attended the food bank with her partner. They know Donna as she used their services in the past many times. They managed to get her on her own by stating she had to fill in some paperwork. Donna disclosed that her ex-partner had beaten her up that morning and that she was scared and needed to get away. Donna was living with her partner; the tenancy was in his name.*

*IDVA spoke to Donna on the phone and gave staff at the foodbank the safety advice that given to Donna. An appointment made to see Donna and backup safety plan, discussed with food bank staff in case Donna was unable to come to meet the IDVA.*

*Donna had been in this relationship for 3 years - abuse started very early in and Donna suffered emotional, psychological and physical abuse throughout including attempts to strangle and suffocate her. The harassment had increased, and stalking behaviour had started when Donna had tried to separate previously.*

*Due to the abusive relationships, that Donna has had in the past her children being removed many years ago and were on SGO's with various family members. Donna's contact with them is sporadic. Donna was also using substances, and this had escalated post separation including the use of cocaine and heroin.*

*Donna's ex-partner moved into a property close to her and the escalation in harassment caused her to leave the property making her homeless. As the harassment continued, Donna eventually moved in with the perpetrator. Donna was very isolated from her family and friends and stated that she not allowed contact with anyone even her female friends. Donna's depression and anxiety had also escalated during this time.*

### ***Actions & Outcomes***

*IDVA supported Donna to look at housing options – Donna did not want to access refuge and IDVA advocated with housing needs to find suitable accommodation in another part of the*

*town. IDVA encouraged Donna to access recovery support and took her to the appointments at CGL. Civil and criminal options discussed, and Donna supported to access legal advice.*

*The case was referred to Marac and safeguarding options were all discussed it was felt that as Donna was engaging and making progress for agencies to flag their files and if they became aware of an issue such as a relapse in engagement with CGL, resuming relationship that they would liaise with the IDVA.*

## **Progress Housing Group (PHG)**

PHG are a large provider of social housing in Lancashire and are one of the largest providers of supported housing accommodation in the country, helping people with a learning disabilities and /or long term mental health conditions and autism who live independently in their own home with support. PHG is a Landlord, and as such has a significant role to play in the lives of people who live in our properties.

PHG has a key safeguarding role to play in keeping people safe, alongside colleagues in social care, health and the police appropriately placed to identify people with care and support needs, share information and work in partnership to co-ordinate responses. PHG also delivers Lifeline, telecare and emergency responder services across Lancashire keeping people safe and enabling them to live independently in their own homes. PHG is a representative on the board for all housing providers and as such communicate out key messages from the Board.

### **Key Achievements in 2019–2020**

- Full review of Unmet Need and Child Safeguarding Policy
- Full review of Safeguarding Adults Policy
- Training offered to all staff (see below) resulting in 99 referrals from April-March 2020
- Completion of annual Care Act Compliance Audit Tool helping to identify areas for improvement
- Training – staff completed 443 safeguarding adults and children mandatory training sessions during the year.
- The Group achieved 96% compliance (above target) in mandatory safeguarding training in April 2020
- Intranet articles and posts – 3 posts and 8 blogs during the year raising awareness of safeguarding
- Review of the safeguarding adults and unmet need and child safety policies
- Follow raised awareness at property services Tool Box Talks to ensure that all operatives understand in-house processes.

## **5. BOARD PRIORITIES 2020–2021**

- Covid-19 – Restoration and Recovery (Short term)
- Mental Health
- Domestic Abuse
- Self-neglect
- 'Voice' Making Safeguarding Personal (MSP)