

Blackburn with Darwen



Blackburn with Darwen
Local Safeguarding Adults Board
Annual Report (2018-19)

Safeguarding and protecting adults from abuse is everyone's business

To report a safeguarding concern or seek advice:

- **Contact the Adult Safeguarding Team: 01254 585949**
- **Out of hours: Tel.-1254 587547**

To report a crime:

- **In an emergency, contact the police: Tel. 999**
- **If the adult is not in danger, contact the police: Tel 101**

Modern Slavery Helpline

- **08000 121 700**

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Introduction by the (Interim) Chair

Welcome to the Blackburn with Darwen Local Safeguarding Adults Board (LSAB) Annual Report 2018/2019. Adult safeguarding continues as a major focus of activity for the statutory agencies and their partners in Blackburn with Darwen.

I have had the pleasure of stepping up from Vice Chair to Interim Chair of the LSAB following the resignation of Nancy Palmer in February 2019. The Board and Committees wished her well for the future during the Boards' Development Day in February.

During the last year through its agreed priorities, the Board has focused on 'user voice' influencing safeguarding arrangements and supporting strategies on the prevention of abuse and neglect. There has been considerable activity, focusing on those adults who have the most complex lives and needs in Blackburn with Darwen. This report highlights that work and the progress that has been made towards the development of the Vulnerable People Strategy for the borough.

Our Learning and Development Programme continues to be well received with 91% attendance rates for the last 5 years and a fantastic number of online courses being completed (over 20 thousand) in 3 years.

Finally, I would like to thank all the agencies and individuals who contribute to keeping adults in Blackburn with Darwen safe.

Vicky Shepherd.



Vicky Shepherd
Chief Executive
Age UK Blackburn with Darwen

1. Blackburn with Darwen Local Safeguarding Adults Board

The Blackburn with Darwen Safeguarding Boards strive to create an environment where children, young people and adults across the borough feel safe and protected¹

Executive Summary

Blackburn with Darwen's Local Safeguarding Adult Board (LSAB) Annual Report is compiled from the work undertaken by members of the board and its committees. There are excellent links with the Local Safeguarding Children Board (changed to Children's Safeguarding Assurance Partnership in September 2019), Community Safety Partnership, several Pan Lancashire Committees groups and the Domestic Abuse Strategic Board.

The LSAB meets quarterly and focuses on key adult safeguarding themes both locally and nationally. The progress towards the priorities for this year is outlined in Appendix C of this report and below:

- Review and oversight of systems reforms
- Improve systems for Making Safeguarding Personal across all stakeholders
- Prevention and the multi-agency safeguarding role

There was a Making Safeguarding Personal (MSP) self-assessment audit in early 2018 (reported in the last Annual Report) and this was reviewed one year on. This provided MSP standards and gave partners a framework in which to provide an overview of their progress towards those standards. Partners have made good progress towards improving their service user voice arrangements.

In October 2018, the Board agreed to undertake a case audit following a number of partners highlighting the increasing complexities of some adults who have found themselves homeless. The audit report highlighted the need for additional research, Dr Teresa Young was commissioned to undertake a Vulnerable People Review across all partners, and including reflecting service users voice. The Board Manager presented an overview of those findings at the North West ADASS Conference in May 2019 with many other North West Authorities identifying similar problems. This has culminated in the development of the Blackburn with Darwen Vulnerable People Strategy, and the Board will monitor progress over the next year.

We have refreshed the Adults Safeguarding Continuum and Concerns Document and, in collaboration with Lancashire and Blackpool Boards, launched the self-neglect framework. The Board was integral to the development of the Lancashire Domestic Abuse protocol.

¹ BwD Safeguarding Strategy

The relationship between the Safeguarding Boards (Local Safeguarding Children Board (LSCB) and Local Safeguarding Adults Board), Health and Wellbeing Board, Community Safety Partnership remains as set out in the 'Memorandum of Understanding'², which is contained on the LSAB website.

The Board has Terms of Reference and an Information Sharing Protocol, which member agencies have agreed to, and these can be found on the Board website:

www.lsab.org.uk

Committees which support Board work

There are three committees that have supported the work of the Board: The Communication and Engagement Committee and Workforce Development Committee were merged this year to form the Workforce Development and Communications Committee. In addition, there is also the Quality Assurance Committee and Safeguarding Adults Review Consideration Panel (this group meets when required and has not met in the last year). The Workforce Development and Communications Committee has been a joint meeting with Local Safeguarding Children Board representatives.

We have also worked on a pan-Lancashire footprint through the Pan Lancashire Adults Policy and Procedures, the Chairs and Managers group and the Communication and Engagement Group. In addition, the Safeguarding Development Manager has also attended the Pan Lancashire Anti-Slavery Partnership (PLASP) meetings.

Examples of work undertaken by partners are contained within this report

Relationship of the LSAB with other partnership Boards

The LSAB, through the Chair and officers within the Safeguarding Unit, attend and contribute to the working of a number of partnership meetings where adult safeguarding is a significant area of business. The key partnerships outlined in the national *Care and Support* guidance are listed below with a brief description of bi-lateral reporting arrangements.

Health and Wellbeing Board – The Independent Chair of the LSAB attends the Health and Wellbeing Board to present the LSAB's Annual Report. The Director of Adults Services (DASS) and Executive Member for Adults Services are both members of the Health and Wellbeing Board. Officers from the Public Health team (who manage the business of the Health and Wellbeing Board), are members of the LSAB.

² www.lsab.org.uk

Community Safety Partnership (CSP) – The Head of Safeguarding, Community Protection & Specialist Services attends the Community Safety Partnership and the following links are made with groups within the partnership:

- The Head of Safeguarding, Community Protection & Specialist Services chairs the Channel Panel (referral panel to identify preventative work for children and young people at risk of radicalisation)
- The Head of Safeguarding, Community Protection & Specialist Services attends the Strategic Domestic Abuse Group and the Safeguarding Development Managers attend operational and task groups, advise on the domestic homicide review process and provide advice on the radicalisation agenda
- The CSP Service Lead attends the LSAB & LSCB Quality Assurance Committees.

The CSP has continued to fund in 2018-19 a number of projects to train practitioners on safeguarding issues (radicalisation), raise awareness in the community (including for children) on a range of safeguarding issues (domestic abuse, modern slavery, criminal exploitation and radicalisation).

Prevent Governance – The Head of Safeguarding, Community Protection & Specialist Services chairs the Lancashire Channel Panel. The Head of Safeguarding, Community Protection & Specialist Services attends the Prevent Delivery Group and the Contest Board reporting regularly to the LSAB.

The budgets, resources, governance and accountability structures of the Board and Committees are in Appendix A and B.

Table of Board and Committee Attendance 2016/17:

Agency	Board 4 meetings	Quality Assurance 3 meetings	Workforce Development & Communicaitons 3 meetings
Adult Services, BwDBC	100%	100%	100%
Lancashire Constabulary	75%	100%	N/A
BwD Clinical Commissioning Group	100%	100%	N/A
Children’s Services & Education, BwDBC	75%	N/A	100%
Public Health, BwDBC	100%	N/A	N/A
NHS England	25%	N/A	N/A
Lancashire Care NHS Foundation Trust	100%	33.3%	66.6%
East Lancashire Hospitals NHS Trust	75%	66.6%	66.6%
National Probation Service	75%	100%	33.3%
Community Rehabilitation Company	100%	N/A	N/A
Blackburn College	0%	N/A	100%
BwD Voluntary Community Faith (VCF) Sector	100%	100%	100%
Average Attendance for the meeting (inclusive of those partners listed and not listed in the table)	91%	86%	72%

2. What we have accomplished

The work of the Board is underpinned by the six safeguarding principles³

- **Empowerment** - Presumption of person led decisions and informed consent;
- **Prevention** - It is better to take action before harm occurs;
- **Proportionality** - Proportionate and least intrusive response appropriate to the risk presented;
- **Protection** - Support and representation for those in greatest need;
- **Partnership** - Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse; and
- **Accountability** - Accountability and transparency in delivering safeguarding.



'I am asked what I want as my outcome to keep me safe.'

Advocacy

There is a legal duty under the Care Act for an independent advocate to be provided when an adult has difficulty taking part in decision making and has no family or friends to help.

Independent Mental Capacity Advocates (IMCAs) are a form of advocacy introduced by the Mental Capacity Act (MCA) 2005 . Their role is to represent those without mental capacity to ensure the wishes, feelings and needs of the adult are taken into consideration and any decisions are made in the best interests of the incapacitated adult. This is particularly important in safeguarding cases.

Blackburn with Darwen Safeguarding Adults Team will assess whether an adult requires an advocate. In all the cases during the last year where the referred person lacked capacity, the person had support from an advocate, friend or family member. We are pleased to report that 100% of those adults requiring an advocate received support in the last year.

³ Care and Support Statutory Guidance 2019

All case studies in this report have had certain elements altered to ensure compliance with GDPR

Zena - A Case Study from the Safeguarding Adults Team about persons who caused harm

Zena has physical disabilities and relies on staff to meet her needs within her residential home environment. She raised concerns to the Safeguarding Adults Team that she had requested specific support but she was told she had to wait for other staff who could use specialist equipment. This resulted in Zena becoming very distressed, as she felt no longer supported by the service provider and felt she should move into a nursing home.

An urgent strategy meeting was organised and the Safeguarding Adults Team met with the provider along with a representative from the Quality Assurance Team. An immediate Adult Protection Plan was implemented and Zena was reassured enough that she remained in her home. Zena was also given full control over her staff team with the persons who may have caused harm were removed from duty and dealt with through the People in A Position of Trust Policy and Procedure.

The Quality Assurance Team ensured that all staff were able to fulfil their roles. The whistleblowing policies and confidentiality policies have been reviewed with the provider and section 42 enquiries were made.

Outcome: The Outcome Meeting determined that the allegations were substantiated and Zena attended the meeting to express her views. Whilst this was very traumatic at the time of the incident for her, she now feels that the supported living environment is better for everybody that lives there. Zena feels that she was listened to and taken seriously; she now has key staff that she can trust and will confide in.

The Quality Assurance Team continue to monitor the provision to ensure an incident of this nature does not happen again. Zena feels empowered to make complaints if she has any concerns and knows that they will be acted on.

This case study evidences that the safeguarding policies and procedures were used effectively. In addition, Zena received an outcome based on the Making Safeguarding Personal framework and continues to be supported fully.

Prevention

Review and oversight of systems reforms: In September 2019 the Local Safeguarding Children Board ceased to be a statutory function under Working Together to Safeguard Children (2018) although the LSAB continues to be a statutory board under the Care Act 2014. Over the year Blackburn with Darwen (BwD), Blackpool and Lancashire Local Authority Chief Executives, and Directors have met with Safeguarding Leads and strategic partners (CCG and Lancashire Constabulary) to discuss how a Pan Lancashire approach can work to continue to safeguard members across the communities. At the time of writing the proposal for how children's safeguarding had been published and the priority to ensure LSAB inclusion in those changes is under consideration. How this will look in the longer term will be reported on in the 2019/20 LSAB annual report.

Vulnerable People Review: The LSAB Homelessness and Complexity Audit identified that service users with complex needs present across the spectrum of mental ill health as well as co-presentation of substance misuse which was seen as a barrier to accessing services effectively or unpick whether they are in a state of crisis or chaos. BwD has one of the highest rates of death amongst the homeless across English authorities and for those with complex needs there are few long-term solutions. Added to this, those vulnerable people do not always meet the criteria for safeguarding but are involved in the revolving door of service engagement/non-engagement. The LSAB audit only touched on a small number of the most complex adults in BwD. Consequently, the LSAB commissioned Dr Teresa Young to undertake a Vulnerable People Review. The aim of this Review was to contribute to Blackburn with Darwen Safeguarding Adults Board's understanding of the relationship between demand and agency responses to the needs of vulnerable adults. Agency response in this context included appropriate public, private and third sector partners, who all work to support vulnerable adults.

The review was commissioned to support this understanding by developing a detailed picture of:

- The Cohort
- Service Delivery and engagement
- Barriers to effective engagement

Some of the key findings included:

- There is a clear commitment locally from across services to addressing the needs of this group more effectively and recognition of the benefits to the community as a whole and service provision for doing so;

- There is a shared recognition that at the present the service landscape is complex, fragmented and fluid which makes it difficult for service providers to maintain a clear view of what is available. This adversely affects their capacity to support clients through it, and it is simply overwhelming and confusing for service users;
- In terms of addressing this via service redesign, by their very nature vulnerable people are a complex group and a 'one size fits all' is unlikely to be effective;
- Initial findings suggested that a multi-layered approach would be most appropriate. This would allow a system of support that has step up and step down integrated within it;
- A number of different approaches and examples of good practice have been shared ranging from a central co-located multi-disciplinary team to enhanced Neighbourhood Teams to a multi-agency style information share/action planning meeting for the small cohort who are extremely difficult to engage;
- Within these structures, the review examined ways of working and of supporting clients e.g. via Team Around the Person approaches to ensure co-ordination and accountability in delivery;
- Extensive interview data was analysed to build up a picture of the various strengths of these different approaches, where they may fit together in themselves, and then in wider existing service provision. This included the service users themselves as well as operational and strategic staff;
- In terms of strategic factors the findings largely coalesced around structures and systems. Learning from another service evaluation suggested that this is only one part of the story and the approach (in that case a trauma informed relationship based approach) was key to achieving positive outcomes and engaging clients that might otherwise be regarded as non-engagers, non-compliant etc. These findings came from speaking to clients and had a significant impact on the recommendations regarding how delivery was structured and organised.

The finding of the review has now moved forward to influence the Vulnerable People Strategy and its progress will be reported in the next Annual report.

Mental Capacity Act (MCA) Workshop: this was offered in response to workers who are not specifically social care trained or trained to undertake MCA/Best Interest assessments but, wanting better understanding of the MCA and the opportunity to ask questions of the experts delivering the session. There was a good mix of local authority, health, police and voluntary sector practitioners. Overall, it was evaluated as being an excellent refresher session that was informative and thought provoking which was easy to follow and understand particularly around capacity, use of the two stage assessment, MCA principles and Best Interests.

Financial Abuse Workshop: It was decided given the scale of financial abuse in adult safeguarding that we should gain an improved perspective of the impact of this on practice. Financial abuse training is included in the generic safeguarding training, along with informal support from managers, but, given the large number of different aspects to financial abuse there was a lack of awareness of the definitions of financial abuse, thresholds, and the legal framework.

The workshop gave the opportunity to discuss what services are available to support an adult who would not fall under safeguarding procedures as well as those who would, the use of MCA and Best Interests. There were concerns raised firstly about the difficulty of dealing with situations where family members are present and secondly, a lack of confidence from some practitioners (therefore a risk that the voice of the service users is not fully heard). Feedback also enabled the LSAB to amend its current financial abuse guidance contained within its policies and procedures.

Adult Safeguarding Continuum: Concerns Document Refresh/People in a Position of Trust Policy (PiPoT) launch: Nearly 200 staff attended the relaunch of the Continuum and PiPoT launch in November 2018.

All categories of abuse in the concerns document were updated with 'actions to consider' guidance. There were also additional appendices including:

- Risk Assessment Guidance
- Service User to Service User Incident Guidance
- Medication Errors Guidance
- Falls Guidance Statutory function within Care and Support Guidance 2018

The document layout was improved for easier reading and to ensure a consistent approach across Lancashire.

The PiPoT Policy was introduced as it replaced Adult LADO procedures across Lancashire.

Self-Neglect and Hoarding Framework Launch: In March 2019, these frameworks were launched across Blackburn with Darwen, Blackpool and Lancashire with over 150 staff attending the BwD event. Both documents set out the framework for collaborative multi agency working using a person centred approach to achieving the best outcomes for individuals who self-neglect and/or hoard possessions. The frameworks have already been utilised in BwD with good ongoing support towards outcomes for those adults involved.

Learning and Development Programme: The joint LSAB and Local Safeguarding Children Board (LSCB) Learning and Development Programme continued to be well received by front line practitioners, the voluntary workforce and managers with improvements in terms of understanding, practical application and confidence in dealing with safeguarding issues on a day to day basis.

Final Course Uptake 2018/19 (data to July 2019)

Course	Nos. of Places Offered	Attended	DNA	% overall of attendance (on day)
Dealing with Disclosure (Domestic Abuse)	50	21	0	100
Safer Online Behaviours	25	12	0	100
Roles and Responsibilities	100	77	2	97
Sexual behaviours Traffic Light Tool	50	30	1	97
Neglect	100	83	4	95
Forced Marriage, Honour Based Violence & FGM	50	45	3	94
Safeguarding Adults-What you need to know	125	105	7	94
Safeguarding & Safer Recruitment	50	29	3	91
Parental mental health & Impact	25	21	2	91
Learning form SCRs	40	37	4	90
Child Sexual Exploitation	50	42	5	89
What Happens When a Child Dies Unexpectedly	25	17	2	89
Domestic Abuse Awareness and Impact	75	51	6	89
Hidden Harm	25	21	3	88
Managing Allegations	50	32	5	86
Boys & Child Sexual exploitation	50	35	6	85
Modern Slavery (Joint)	50	36	9	80
Support Around sexual Harmful Behaviour	25	12	3	80
Grand Totals	965	706	65	91% Attendance

There was a 73% uptake of places made available for courses this year, which was a reduction of 9% on last year. It is likely this was due to the change in booking 'face to face' courses as course numbers increased as the year progressed. However, the attendance rate of those places remains at 91%, which is very good. There was also a 9% non-attendance rate overall, which remains steady based on previous years.

Online Training

In total there have been 21,708 courses completed online since its inception in January 2016. Of those, the specific courses for adults include the following (with completed numbers).

- Safeguarding Adults Level 1; total completed 1,325
- Mental Capacity Act; total completed 716
- Domestic Abuse; total completed 1,124
- Safeguarding Adults Level 2; total completed 714
- Safeguarding Children and Adults Awareness; total completed 610
- Honour Based Abuse and Forced Marriage; total completed 563
- Safeguarding Against Radicalisation; total completed 2,661
- Deprivation of Liberty Safeguards; total completed 413

Safeguarding Adult Reviews

There have been no reviews undertaken in Blackburn with Darwen but learning from reviews in Lancashire have been shared through briefing papers and thematic learning events.



'I know there are services available if I need them.'

The 2019/20 Blackburn with Darwen Multi-Agency Safeguarding Learning and Development Programme is available to access on the LSAB website

www.lsab.org.uk/training

Proportionality



'I know people are working with my best interest and I will receive as little or as much help as I need.'

Yvonne - A Case Study from the WISH Centre about domestic abuse

Yvonne was a victim of long-term emotional abuse and psychological abuse. When she came to us she was still in a relationship with her partner and did not have the confidence to leave. Yvonne requested help and support with her relationship, and was interested in what options were available. We provided her with those options and encouraged her to attend one of our group programmes.

Yvonne went on to complete two of our therapeutic programmes - her awareness and understanding of domestic abuse gave her the confidence to look at her relationship and think about her future.

Outcome: After four weeks on the second programme, Yvonne had the confidence to leave her abusive partner and went to stay with a family member whilst we supported her to obtain her own tenancy. She is now in her own house and she has really benefited from the support of the other clients in the therapeutic group who have supported and understood her situation. The peer support element of a group is extremely important to validate a victim's experience.

Protection and Partnership

Partnership is about identifying local solutions through services working with their communities, and communities having a part to play in preventing, detecting and reporting neglect and abuse.

Pan Lancashire Anti-Slavery Partnership (PLASP) & Modern Slavery

The Pan Lancashire Anti-Slavery Partnership was formed in early 2018 as a collaboration of many agencies including enforcement, statutory and voluntary sectors to develop a consistent approach to tackling this often complex area across Lancashire. The PLASP Toolkit explains what Modern Slavery and Human Trafficking are and how everyone (including the workforce and public) can help tackle this. The toolkit provides a visual pathway for when victims are identified and how to support/safeguard them as well as information on victim support services. This area of work continues to develop but our partners report excellent results for victims.

The PLASP Toolkit can be accessed on:

www.lsab.org.uk/policies

Modern Slavery Roadshow: On September 22nd 2018, the Board Manager along with colleagues from the Office of the Police and Crime Commissioner, Lancashire Constabulary (including police cadets), Caritas, Blackburn Diocese, Victim Support, Soroptomists and other volunteers handed out nearly 2,000 leaflets in and around Blackburn with Darwen to spread the message of Modern Slavery. This highlighted how the public can help report and support victims. There was also a walk through exhibition, which brought to life how victims were treated and felt during their time as a slave.

The 'big screen' outside the Old Town Hall displaying the Modern Slavery message:



The below double decker bus emblazoned with the Modern Slavery helpline continues to be in use across Lancashire since and has been seen quite often in BwD:



Elena – A Case Study from East Lancashire Hospitals Trust about Modern Slavery

Elena was born in Romania where she lived with her family in a small flat. Her upbringing was very sad with her suffering physical and sexual abuse from a very young age. To help numb the pain of the abuse she would go into the local hospital and drink what was the equivalent of alcohol gel, she soon became dependent on this and by the age of 10 she was already dependant on alcohol.

Elena spent her teenage years on the streets in Romania but with some support she managed to attend school intermittently. At 17, she was trafficked around different countries including Poland, Spain and Greece where she was 'sexually exploited' and continued to be alcohol dependant.

In 2017, a man offered her the opportunity of a new life in England. Soon after arrival in the United Kingdom, she was brought to Lancashire. The man provided her with a flat but he continued to 'sexually exploit' Elena and controlled her by ensuring she was not only paid with some money but alcohol as well.

After a particularly heavy drinking session, she injured herself and was admitted to our Emergency Department. Once recovered she reported that she had been drinking 20-30 units per day but at that time she did not disclose any issues or abuse and was advised to reduce her alcohol intake and she was given information to access alcohol services.

As she was leaving aided by a Health Care Assistant (HCA) Elena disclosed she was a victim of sexual exploitation and that she was scared of her 'pimp'. She disclosed that he would buy her alcohol every day and then send males round to the flat to have sex with her against her will. She was scared to tell the police in case they did not do anything and then she would be killed.

The HCA supported her back to the hospital Emergency Department and staff persuaded her to let them ring the police. The hospital Safeguarding Team were called and went to support Elena. The police attended and involved their colleagues from the Human Trafficking Team and the National Crime Agency. As Elena had only been in the UK for 12 months she had no recourse to public funds therefore whilst other support was found for her it was agreed to keep her safe within the confines of the hospital. Elena was terrified her 'pimp' would turn up but the hospital staff did everything they could to enable her to feel safe.

Elena was able to detox over the next few days and she said it was the first time since she was 9 that she was sober. Whilst this was positive, during her detox she experienced horrific flashbacks and hallucinations and without the care and support from staff she wouldn't have been able to deal with this. As she safely withdrew from the alcohol she would offer to clean the hospital to show her gratitude.

Outcome: Elena was eventually taken to a place of safety where she would be offered the help and support to make her life more bearable.

On the day Elena disclosed she was a victim of Modern Slavery, we, as an acute hospital trust, had a small window of opportunity to save a woman from lifelong abuse. For obvious reasons agencies do not provide us with detailed updates however, we are reliably informed that Elena remains safe and well.

Multi agency safeguarding policy and procedures

The Pan Lancashire Multi Agency Safeguarding Adults Policy and Procedures are reviewed by Business Managers and partners and these are hosted by Blackburn with Darwen and available on:

www.lsab.org.uk/policies

Abdul – a Case Study from the Safeguarding Adults Team about Neglect

Abdul is 93 years old. He was discharged from hospital to a residential setting where the Oxygen Nurse who raised a concern of neglect and poor care visited him. When the Safeguarding Social Worker visited Abdul she asked him what his wishes and feeling were about his care and experience in the residential setting.

We ascertained from Abdul and professionals that there was very differing opinions as to how best to work with him. Abdul was said to be ‘unreasonably challenging’ but he himself said he didn’t want to be there and he wanted to go home. He was very unhappy and as a result of his refusal to let staff attend to him he was being neglected which in turn was having a detrimental effect on his wellbeing. The residential setting felt Abdul would not be able to cope at home but they agreed he could move to another residential setting of his choice.

Outcome: Through working with Abdul, his family and the residential settings, within days of being in the new residential setting, Abdul was mobilising with assistance. He was accepting of all personal care and was keen to work towards returning home. Abdul enjoyed mixing with other residents and his quality of life and his health improved dramatically. His family were happy with the change in him and visited frequently for afternoon tea. Abdul has now returned to his own home with carer support.

The Safeguarding Team had concerns about how his original residential setting was assessing the needs of the service users and all residents had safeguarding enquires commenced and positive changes have now been made within that original care home making a difference to all residents.

Accountability



'I understand the role of everyone involved to keep me safe.'

Victoria – A case Study from the Safeguarding Adults Team on domestic abuse.

Victoria was a young adult with care and support needs who was living in an abusive home environment suffering physical, emotional and financial abuse from her mother and mother's partner.

Neighbours called police following a domestic abuse incident. Victoria and her sibling were supported to leave the home due to the extremely poor conditions. They were accommodated in our local respite facility whilst accommodation was sought.

The Safeguarding Social Worker worked with Housing Needs to secure temporary accommodation for Victoria and her sibling with a care package being commissioned to meet Victoria's needs.

Outcome: Although circumstances did change, Victoria is now settled in her new placement and is building relationships with her carers. This was a joint effort from the whole department including a staff member taking home her pet cat when she had to move out of her shared accommodation with her sibling.

Victoria is now attending college, shopping with friends and has people supporting her that she can trust. Victoria's wishes and outcomes were evident throughout this case as we supported her to be in control of her situation, listened to her concerns and acted upon them whilst minimising the risk of further harm.

3. Work of Board Members

The Board would not achieve its priorities without the joint work of its member organisations. Organisations contribute to the strategic development of safeguarding adults as well as promoting safeguarding within their own services.

The following are examples taken from those contributions and includes how they have improved outcomes for those at most risk.

Adult Social Care

The number of individual adults reported with safeguarding concerns has risen by 13% in the last year, but, through a systems audit 24% of 'inappropriate' concerns were removed which then gave us a reduction of 35% in the number of concerns that proceed to section 42 enquiries. In comparison to national data this is now similar to the rest of the North West and is, for the first time in a number of years, slightly less than the national average for England.

This could indicate that the Adult Safeguarding Continuum/Concerns Framework has started to embed fully to ensure that a concern raised is assessed and directed to the right team for enquiries to be undertaken appropriately when adult protection procedures are not required.

Nationally the age in which a section 42 enquiries is commenced tends to be in the older age group (over age 85) but in Blackburn with Darwen, there was a higher percentage in the 18-64 group. The Safeguarding Adults Collection data for this year indicates that whilst there are still a significant number of concerns raised in the 18-64 group, this has fallen slightly to 36% (from 38%) with an increase of 3% in the 75-84 group. Nearly half of all concerns that are section 42 or other safeguarding enquiries are in relation to adults with long-term physical health conditions. Neglect and Acts of Omission is the highest type of risk identified (38% of all concluded enquires), physical abuse is identified in 26% and financial abuse in 20% of concluded enquires.

Since 2016/17 the number of concluded enquires for neglect and acts of omission has increased by 10% whereas physical abuse risk has dropped by 2% and financial abuse by 5%. However, both risks of neglect and financial abuse are 6% higher than the national average. This year has also seen our first cases of Modern Slavery with five cases in total (four individuals required safeguarding procedures to be implemented). There has been an increase in the number of self-neglect cases identified and supported through other safeguarding process (non-section 42 procedures) possibly as a result of the implementation of the pan-Lancashire Self Neglect Framework which has been used operationally to good effect.

The gender split remains approximately a 60:40 split female to male which is consistent nationally and regionally. There has been little change to the ethnic make-up of the concerns

with 86% of all concerns identified as white and 10% as Asian. This figure is higher than the national average but reflect the demographics locally.

The percentage of Section 42 enquires for adults who live in their own home is now in line with the national average of 44% but remains higher than the rest of the North West (41%). Although abuse is less likely to occur in a residential setting (30%) this figure has doubled since last year. This is likely to be due to the work undertaken by the Safeguarding Team alongside the Quality Team for those settings who have received an 'inadequate' rating on CQC inspection. The proportion of enquires in the acute hospital setting is also notably higher than the national average (15% compared to 6%).

In terms of risk assessment outcomes, Adult Services are particularly decisive, with 86% of all enquires having either a risk identified and action taken or there being no risk, this compares to 82% nationally. The proportion of enquiries where risk was removed, reduced or remained are broadly in line with national patterns.

The recording of an adult's mental capacity as 'don't know' increased to 30% from 27% last year and remains above the national average of 18%. Of those, where capacity is recorded, only 7% of adults undergoing section 42 enquiries lack capacity. This is quite a significant drop from last year (14%) and a quarter of the national average (31%). Why this is the case is currently being investigated.

Ensuring Making Safeguarding Personal outcomes are recorded in the correct area of the case record system requires improvement and we are striving to address this. However, we have improved greatly since last year with a drop from 70% to 43% of the number of 'don't know/not recorded' for concluded section 42 enquiries. This compares with a North West average of just 15%. Recording therefore clearly needs to further improve and it is expected this will at least reach national averages next year.

Deprivation of Liberty Safeguards (DoLS)

The department has a robust system for responding to cases requiring DoLS involvement, although the system is severely stretched due to the numbers of DoLS cases received. The Health and Social Care Information Centre capture data in respect of DoLS activity annually. DoLS will be replaced by Liberty Protection Safeguards in 2020 and progress of this will be reported in the next LSAB Annual Report.

Residential Establishments

The Care Quality Commission monitors the quality of care in residential settings and there are currently 33 homes in Blackburn with Darwen. In the year 2018/19 two were graded as 'outstanding', 24 as 'good', seven required improvement' and none were judged 'inadequate'. The Quality Team, Safeguarding Team and CCG either have action plans in place or completed for those that require improvement.

Safeguarding Training

Safeguarding training is provided to a wide range of adult social care staff. The impact on practice of courses attended is monitored by managers and noted in supervision.

A range of courses are offered including e-learning and face to face training / briefings.

Attendance is high on the following:

- Online learning for Care Act - Care and Support Planning
- Safeguarding Adults - Level 1 and Safeguarding Adults - Level 2
- Revised BwD Adult Safeguarding Continuum and new People in a Position of Trust Briefings

Legal skills training to equip social workers with the skills to manage increasingly complex issues (including Court of protection, evidence in statement and report writing) has been provided. Also provided has been training in Safeguarding Adult Enquiries and ordinary residence (section 117) training.

Public Health

Within the new directorate of Public Health and Wellbeing, which was formed in October 2018, the Public Health Team has a remit to work strategically to deliver health as an added value outcome of all strategy, policy, programmes and projects. It has adopted a life course approach which includes programmes and commissioned services for children and adults.

Those services that may impact on adult safeguarding and wellbeing included: sexual health services, smoking cessation services; alcohol and drug misuse services; interventions to promote physical activity, healthy eating, healthy weight and public mental health; initiatives to tackle social exclusion and public health aspects of the promotion of community safety and violence prevention.

The Commissioning and Procurement Service have highlighted to all providers the safeguarding requirements of Public Health contracts as well as ensuring providers have registered for safeguarding updates and attendance at relevant safeguarding training. This was established in October 2016 and as operational processes are developed and confirmed safeguarding information has been captured using a standardised method.

Health Organisations

Blackburn with Darwen Clinical Commissioning Group (CCG)

Blackburn with Darwen CCG is a commissioning organisation, so by the nature of its functionality there is minimal direct activity in respect of attending operational safeguarding meetings or making referrals in respect of safeguarding adults, but is focussed more on the assurance and accountability that health commissioned care is effective in safeguarding adults with care and support needs. However, over the last 12 months the CCG has been much more actively involved in supporting safeguarding processes with much closer links between the Local Authority and Primary Care services.

The CCG has maintained strong working relationship with the Board and has a role within its sub groups.

The CCG has a safeguarding commissioning policy with expected training standards and standards for service delivery. This was last updated in May 2018 to reflect the updated assurance systems for the CCG. The policy can be accessed via the CCG website:

<http://www.blackburnwithdarwenccg.nhs.uk/download/policies/safeguarding/Pennine-Lancs-CCG-safeguarding-policy-15th-May-2018.pdf>

Safeguarding training compliance rates for CCG staff has continued to be a local priority and has been maintained above 90% throughout the year.

Competency	Compliance
NHS CSTF Safeguarding Adults - Level 1 - 3 Years	96.08%
NHS CSTF Safeguarding Adults - Level 2 - 3 Years	100.00%
NHS CSTF Safeguarding Children - Level 1 - 3 Years	92.16%
NHS CSTF Safeguarding Children - Level 2 - 3 Years	100.00%

The CCG safeguarding team continues to operate across the Pennine footprint, trying to reduce unwarranted variation and bringing best practice from the two areas together (East Lancashire and Blackburn with Darwen). This has included significant investment and support around the care home agenda and support to services which are failing to deliver safe and effective care.

The merging of the safeguarding teams resulted in Lancashire Care NHS Foundation Trust (LCFT) Specialist Safeguarding Service specification being reviewed and updated which is now in place to ensure services received through LCFT are consistent for both Blackburn with Darwen and East Lancashire footprints. Key within this is that the CCG continue to commission

an equal advice and support service across the health economy for both children and adults safeguarding.

The CCG have provided details through their quality assurance/performance monitoring declaration where they are involved in multi-agency auditing. Action plans resulting from audits are fed back through various local safeguarding systems as required (e.g. representation at LSAB, the performance of providers and their continued review, Designated Professional oversight of GP, CQC inspection findings) and for practitioners (training compliance, safeguarding specialist services through LCFT and safeguarding commissioning policy etc.) is also provided.

Making Safeguarding Personal remains a high priority for the CCG and there is work occurring with both Blackburn with Darwen and Lancashire County Council in supporting our health services in embedding the principles of MSP.

The CCG has delivered multiple local training events to a wide range of partners, including Care Homes, Social Care Staff and Police. The CCG has invested significant support around medication administration and safeguarding, particularly around the complex challenge of covert medication.

The CCG has worked closely with the local authority safeguarding team to strengthen local safeguarding arrangements and this has resulted in much tighter working and stronger communication.

GP Practices: Blackburn with Darwen has 26 GP practices which have been inspected by the Care Quality Commission (CQC), of these 20 were rated as 'good' in the area of safeguarding practice, which includes safeguarding compliance and staff being up to date with training, and one service was rated as Outstanding. Four services were rated as requires improvement and one was rated as inadequate. Where a practice is not rated as Good or Outstanding, the CCG actively work with the practice to support them to raise the skills, knowledge and systems to ensure they are effective in managing safeguarding. For the inadequate service the CCG has the highest level of surveillance and support in place including close working with the local community and patients.

GPs receive a weekly newsletter and key safeguarding information is included within this. Also, the CCG now has a safeguarding section on its intranet site that GP practices can access.

The CCG has always run a GP Champions event, this year the CCG moved this to a Pennine model (East Lancashire and Blackburn with Darwen) and the venue moved to Oswaldtwistle Mill in order to facilitate better cross working in primary care.

The CCG has put on a large safeguarding training event for all GP's across Blackburn with Darwen to ensure all practices have the right skills to identify and respond appropriately to

abuse. This training was across adults and children themes and was really well received and the CCG will look to making this a regular offer.

The CCG has recently updated its GP assurance model to give a more hands on approach rather than relying on data returns alone. This has been greatly appreciated by practices and has helped explore more practical challenges in setting up safeguarding arrangements and systems.

Lancashire Care NHS Foundation Trust

LCFT is a statutory safeguarding partner and a major provider of local health services within the county. LCFT's Safeguarding Team provide effective clinical, professional and strategic leadership for safeguarding, including the quality assurance of safeguarding through contractual arrangements.

Safeguarding activity across the organisation is increasing, demonstrated by a significant increase in the information being shared, referrals, concerns and daily contact to LCFT Safeguarding Team, this year. The total number of contacts to the Team over the year was 3003.

LCFTs key safeguarding priority areas have been aligned with the Trusts vision and organisational priorities including the following:

- Strengthen safeguarding practice & systems to sustain compliance with revised statutory Prevent Guidance and responsibilities;
- Ensure delivery of Pan Lancs Domestic Abuse Strategy embedding this within clinical practice to enhance routine enquiry;
- Develop competency of the workforce across the Trust to achieve core and essential compliance targets;
- Making Safeguarding Personal – to review and assess adult safeguarding practice in relation to making it personal against the ADASS MSP audit frameworks.

Progress has been made across all areas including the following:

- Delivery and revision of safeguarding and MCA training for staff in line with roles and responsibilities, strengthening training compliance;
- We have strengthened awareness of domestic abuse and violence, contributing to the multi-agency systems thinking review in terms of Multi-agency Risk Assessment Conferences (MARAC);
- Strengthened information sharing to support mental health service and GP engagement in the MARAC;

- We sustained our engagement in the Mental Capacity Act (MCA) Sub-Committee of the Safeguarding Adults Boards and remain a key participant in the MCA Best Practice Group.

The LCFT Safeguarding Team continue to actively contribute to Section 42 safeguarding enquiries across designated Local Authority areas in line with the requirements of the Care Act (2014) by providing relevant information, a clinical perspective and wider contribution to assessment, care planning, risk management and mitigation strategies.

Adult Safeguarding: Roles and Competencies for Health Care Staff was published in August 2018. This document sets out minimum training requirements relating to adult safeguarding and reflects the importance of the subject matter and also the key message that all healthcare organisations and staff must work within a common framework to ensure that adults at risk are adequately protected. Our safeguarding training requirements and matrix were updated accordingly to ensure appropriate training levels within the workforce.

The training guidelines contribute to compliance with the Care Act, and also support compliance with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, and the Fundamental Standards that CEC inspects. Regulation 13 (Safeguarding Service Users from Abuse and Improper Treatment) of the Regulations, requires healthcare providers to have systems and processes in place to prevent the abuse of service users. Compliance with these standards are enforced by the Care Quality Commission (CQC).

Training: The Safeguarding Team are committed to ensure that staff has access to appropriate training and learning opportunities to support their safeguarding knowledge and competencies. Safeguarding Adults and MCA Level 2 learning are also now both available via online learning. Plans supported the achievement of a compliance rate above 80% although MCA level 2 and WRAP 3 training targets fell short of the 80% compliance, recovery plans are in place to achieve targets.

A review of Level 2 MCA training has also been undertaken with specific reference to the national competency framework for MCA developed in association with the MCA Forum. Alongside this, the Safeguarding Adults training has been updated to consider the implications of the Department of Health Making Safeguarding Personal agenda.

Safeguarding Boards and Committees: The Safeguarding Team have continued to meet demand for training and have maintained consistent attendance at BwD Safeguarding Boards' Workforce Development and Communication Committee. LCFT has integrated the Local Safeguarding Adults Board (LSAB) priorities and plans in determining its own strategic plans to protect adults from abuse and neglect with the networks, also incorporating plans into their business, reporting progress to LCFT Safeguarding Group. Adult Safeguarding and MCA leads continue to actively contribute to the various sub groups of LSABs and have been

actively involved in the developing the Self- Neglect protocol, Domestic Abuse (Adults) training, Safer Care Planning Guidance, Sexuality and Personal Relationships Policy.

MASH: 2018-2019 has seen continued requests for support and clinical expertise to support Local Authority Safeguarding Adults and MASH enquiries which is associated with an increased awareness of the statutory requirements of the Care Act (2014) and the implications of the MCA and Deprivation of Liberty Safeguards (DoLS).

Making Safeguarding Personal (MSP): MSP moved from a process driven system to being a person-led and outcome focused approach to safeguarding and wider service user engagement. The principles of MSP are integrated into LCFT quality plans and vision, robust risk management arrangements are in place and the patient's voice is captured and acted upon by our Experience Team.

LCFT completed a MSP Audit to support Quality Assurance activity and a presentation on the MSP agenda was presented through Safeguarding Champions Forums (April 2019). Information on the MSP agenda has also been sent to the Quality Improvement team so that key messages can be embedded within organisational thinking and service user engagement forums. A Service User Experience Operational group is now in place to look at areas of practice that require strengthening including recording outcomes and understanding of how improvements to safeguarding practice are made

East Lancashire Hospitals NHS Trust (ELHT)

Over the past few years, the Safeguarding Team at East Lancashire Hospitals NHS Trust has gone from strength to strength, having achieved all of their required safeguarding standards and meeting actions to implement their 3-year safeguarding strategy. The current strategy ends in March 2020 and the strategic direction will be led by their on-going improvement plans for safeguarding in line with the national agenda and recommendations.

The hospital safeguarding team is accessible to all staff across 5 hospital sites and community services. As well as the higher risk safeguarding matters, the team takes referrals for advice, support and supervision from staff in relation adults at low / medium risk. Some of these referrals may then lead to a formal safeguarding concern being raised.

There is high-level work being undertaken across the organisation to strengthen existing policies, procedures and care pathways in relation to a number of themes, for example:

- Awareness of the reasons for poor discharges have been raised across the Trust at a number of forums, and this has led to a reduction in the number of unsafe discharges over the last 2 years (from 75 to 42). The numbers have remained static this year, and we are still seeing some examples of poor practice within our concerns, however in 2018, 13 of these concerns were not substantiated. Work to address these issues is being driven through the Model Ward Programme, and the Head of Safeguarding is leading this work alongside the Quality Improvement Teams within the Trust. We are

at the stage of implementing discharge bundles that reflect the actions needed to prevent the issues that lead to safeguarding concerns being raised. It is anticipated that the number of concerns will decrease significantly in 2020 as the discharge bundles are rolled out across the Trust and make an impact.

- Together with Executive Leads, the Head of Safeguarding is leading work to strengthen the support for adults with additional needs to support their mental health and well-being. This work is being fed in to a wider piece of work across the Integrated Care System with partners developing their services in line with national recommendations.
- East Lancashire Hospitals Trust has also strengthened our approach to people who access our services who are at risk of self-harm and suicide, and this includes a training programme which is accessible for all staff to improve awareness, understanding and confidence when caring for those people who are unwell. These developments are linked to multi-agency partnership working to improve a holistic approach to supporting people with physical and mental health and well-being needs.
- Strengthening the processes for staff to apply for Deprivation of Liberty Safeguards, including preparation for the transition to Liberty Protection Safeguards from 2020. The number of DoLS applications was 340 at the end of March 2019, and we are seeing a year on year increase as expected.

The Safeguarding Team within the Trust is made up of Registered Nurses (Adult, Children and Learning Disability), Midwives, a Social Worker who is the MCA Lead, and Independent Domestic Violence Advisor, Health Sexual Violence Advisor and experienced safeguarding officers and administration staff.

All of the safeguarding activity supports the direction of travel for the Trust to continue to meet the requirements within the national safeguarding agenda going forward, within a realistic and achievable strategy.

As a Trust we are actively engaged in many national and local developments, including:

- Multi-agency partnership working arrangements have been strengthened to enable the Trust to contribute and participate in the National and Local developments across the Integrated Care System. These include Preparing for Adulthood (transition), supporting people with Mental Health needs, and the MARAC review.
- We have been successful in appointing a Sexual Violence Liaison Officer for a 3-year pilot study across a number of Acute Trusts. This is led by Lime Culture with Blackpool Acute Trust as the host, and is already proving very successful.
- We have appointed a Hospital Independent Domestic Violence Advisor and we have secured funding until March 2021. This is having a major impact on our ability to respond to disclosures of domestic abuse, and we continue to be supported by The Wish Centre for supervision and guidance.
- The LeDeR Programme - all deaths of people with a learning disability are reviewed. Governance systems and structures enable lessons to be learned and if initial mortality

reviews cause concern then they are escalated through the national LeDeR process for independent review.

- For the second year running the Trust is engaged in the National Learning Disability Standards survey, which includes a self-assessment with evidence provision, a survey of 80 patients with a learning disability and 20 staff who have looked after people with a learning disability. The Trust is looking forward to benchmarking against similar Trusts, and gaining new ideas as we constantly strive to improve and personalise each patient's experience
- Continuous progress with many aspects of the safeguarding agenda such as Making Safeguarding Personal, Prevent, Mental Capacity Act, Self-Neglect etc

Training: At the end of March 2019, with a workforce of 8000 staff, the training compliance rate was above target as follows:

- Safeguarding Adults training compliance is 97.9%
- Prevent Training compliance is 95.8%

In addition to mandatory training we offer experiential training, and see every contact with clinicians and patients as a learning opportunity. This has helped embed safeguarding in to the Trust and developed safeguarding knowledge and confidence in practitioners. We also provide bespoke training sessions across the Trust – we will go to individual wards and teams, and encourage individuals to shadow our team.

In addition to the above we also have information on the Trust Intranet in Safeguarding Files which acts as a resource for staff. We continuously review, revise and update our policies, ensuring the information is available to inform staff of procedures and processes 24 hours a day.

As part of our multi-agency statutory arrangements, we attend the LSABs and the relevant committees. We are actively engaged in developments across the pan-Lancashire footprint which are intended to shape the models of multi-agency safeguarding across the region

We have continued to recruit Safeguarding Champions and we have continued to strengthen the Safeguarding Champion meeting which is now a very positive and well attended opportunity for CPD. Champions are in receipt of level 3 training through these meetings and between 30 and 40 members of staff attend each meeting.

ELHT contributes to the LSAB sub-group for Safeguarding Adult Reviews where cases across Lancashire are considered to see if they meet the criteria for SARs. In addition, the Head of Safeguarding and the Named Nurse for Safeguarding Adults have attended a 2-day training programme on the Welsh Model for carrying out SARs. The process is much more streamlined with a focus on learning and improving, and strengthening the involvement of front-line staff

and families. Actions from these reviews are cascaded in a number of ways, including through quarterly reporting at the Internal Safeguarding Board.

Our Executive Lead chairs the internal Safeguarding Board, and it enables safeguarding practices to be scrutinised and challenged, as well as taking assurance that all statutory duties are being fulfilled to the highest attainable standards.

NHS England and NHS Improvement

Direct safeguarding referrals are generally made through primary care, CCGs and health care providers but NHS England & NHS Improvement (NHSE&I) also generates its own safeguarding referrals especially in relation to issues and/or concerns arising from complaints. There were no referrals made to adult safeguarding in the latter two quarters of the year but a referral was made to the adult People in a Position of Trust lead. Although NHSE&I staff are not front line practitioners per se all are required to undertake safeguarding training commensurate to their roles and responsibilities.

Lancashire and South Cumbria Safeguarding Integrated Care System (ICS) network has been identified nationally as an area to support the development of a transformational model of safeguarding across the ICS. A working group has been formed to develop the proposal for change and a subsequent implementation plan. There is a clear commitment to a combined adult and children system wide approach to safeguarding across the ICS.

NHSE&I must provide protection for patients from any primary care performer who is not suitable, or whose efficiency to perform those services may be impaired. NHSE&I's central role is to ensure that the NHS delivers better outcomes for patients within its available resources. The performers list system supports NHSE&I in the delivery of this central role to ensure a consistency of primary care service delivery, to ensure that services are safe and effective and to ensure continuous improvement of quality. A requirement on safeguarding is included in all contracts issued to health care providers by NHSE&I ensuring that all contracted providers have completed safeguarding training appropriate to their role and are aware of requirements to identify safeguarding issues and reporting procedures.

Criminal Justice Sector

Community Safety Partnership (CSP)

The community safety team develops strategy and provides/commissions services in support of vulnerable people with a focus on those persons that are a victim of crime or abuse.

Prevent: The Prevent Board continues to be updated and provided with assurances that robust Channel arrangements are in place. The BwDBC Prevent Team supports internal departments and external stakeholders in the provision of WRAP and other bespoke Prevent training. In 2018/19 the Prevent team have delivered 97 training sessions to 3,078

participants. These include WRAP (Workshop to raise awareness of Prevent), other bespoke Prevent briefings, Channel Champions Training and Griffin training (in conjunction with the Civil Contingencies Team).

The Iprevent website continues to have a considerable amount of traffic, most of which is generated by the Educate Against Hate website. A steady stream of requests for teacher access is received and processed.

<http://iprevent.org.uk/>

The Prevent Support Officer worked with Foundation for Peace to deliver the 'Women for Peace' programme in Blackburn. The course has now concluded with eight of the women going on to successfully achieve accreditation and their certificates will be presented to them at an award ceremony for their family and friends. The women involved in the programme spoke very highly of their experience and the inclusive nature of the project (such as the provision of a nursery for the women to leave their children whilst they took part in the sessions and a translator present in all sessions).

Work is ongoing with local Health Prevent leads to develop a 'seven-minute briefing' for NHS members of staff regarding Channel. They have been working on the content and storyboarding the training. Similarly work is ongoing to create a digital training package based on the alternative, far and extreme right wing in the UK. A Prevent Champion's Network has been established - this is a network of professionals in the local area who are championing Prevent in their own environment. The Network currently consists of 18 people. An introductory meeting to set the scene for the network will be held in April 2020: members will be encouraged to suggest future items for the agenda.

Safeguarding vulnerable individuals who are at risk from radicalisation and extremism is mainstream safeguarding work. The way in which Prevent and Channel will be delivered may overlap with the implementation of the wider safeguarding duty the Local Authority has for both children and adults at risk so there is a need to work closely with local safeguarding boards which is something the BwDBC Prevent Team do robustly.

Domestic Abuse (DA): Over the last 5 years there has been a great deal learnt about domestic abuse and the effectiveness of partner approaches, the case for identifying vulnerable people and intervening early to reduce harm is a strong one, and a commitment that is intended to be maintained. There are however significant financial challenges posed to the public sector and local government in particular. Therefore, the approach must make best use of existing resources, with the emphasis on efficiency and evolution.

It is recognised that we seek to further improve our support for those with multiple difficulties with an approach that is both outcome focused and better integrated, bringing core services

together to achieve sustainable change no matter the circumstance for those that really need it.

To achieve this the Domestic Abuse Strategic Plan 2018-2023 was agreed by the Domestic Abuse Strategic Board with the work to be undertaken over the next five years under the following priorities:

- Prevention and Early Intervention
- Protecting Those at Greatest Risk of Harm
- Partnership Working
- Pursuing Perpetrators

Several changes have been implemented within the last year in this arena, which has included the LSAB Board Manager now overseeing the DA agenda. Whilst the 2018/19 contracts continued until April 1st 2019 there was a change in the commissioned provider of key services following a tender process in November 2018.

Overall, success will be measured against the following outcome requirements:

- Reducing demand on front line services where domestic abuse is a feature.
- Reduce the repeated victimisation of our most vulnerable people.
- Reduce the likelihood of offending by those posing harm to others.
- Early identification of those likely to be at risk of coming to, or causing harm.
- Communities that have no tolerance for abuse.
- Young people know and understand their right to a healthy relationship.

There will be an overview of the progress against the strategy in the next LSAB Annual Report.

Alongside the above there has been an ongoing Multi Agency Risk Assessment Conference (MARAC) review in the last 12 months. This has been an in depth analysis of how a case navigates the system of getting to MARAC and the MARAC process itself. The next phase has started for service redesign, and this will have multiagency input

Lancashire Constabulary

Protecting vulnerable people is one of Lancashire Constabulary's key priorities. This is supported by a long-term plan to reduce vulnerability through a preventative approach, based on the ethos of early intervention, by delivering services with our partners in the places they are needed.

The vision is to continue to develop our approach, through investing in our people, to provide a service that meets the needs of those individuals and communities that we serve.

Our approach to vulnerability is underpinned by our commitment to focusing on safeguarding, investigation and prevention and it is supported by the Police and Crime Commissioner's Crime and Policing plan to support victims and reduce vulnerability.

As the focus nationally continues to steer the police service towards a vulnerability focused service the Constabulary is committed to working with partners to improve outcomes for vulnerable people and to help keep them safe. The National Vulnerability Action Plan sets out the requirements to aid forces in benchmarking their abilities to provide a service to protect vulnerable people. In support of this plan, the force has invested resources in areas of vulnerability across the force.

Future plans will require the Constabulary to continue to work with partners to establish a shared vision, and to integrate service provision to meet the complex needs of individuals and families within our communities. In 2019, a new set of Multi-agency safeguarding arrangements came into force, placing equal responsibility on the Police Service, the Health Service and Local Authorities to safeguard children. This is a significant change in legislative accountability and brings with it additional responsibilities for policing.

We will restructure our HQ Public Protection department to underpin our approach and help drive improvements in protecting vulnerable people. This will include providing connectivity across the organization as well as across the partnership landscape to deliver the best possible service to our communities. This business management model will work alongside the Futures department to continue to develop the Constabulary's understanding and approach to protecting vulnerable people. It will also work closely with Neighbourhood Policing Teams and local policing resources to ensure that opportunities to intervene earlier, and reduce vulnerability are not missed.

As part of our approach the Constabulary is committed to making protecting vulnerable people everybody's business. This is key to the continuing development of the workforce and the culture of the organization.

2018-2019 has seen a focus on equipping officers with mobile technology to support frontline response. The Force Digital Strategy outlines the way in which Lancashire Constabulary will transform its policing service in a digitally enabled world.

Volunteers (125) from current officer roles have chosen to become "Vulnerability Coaches". These are colleagues in Initial Response, Neighbourhood Policing, Investigation Hubs, and Specialist teams such as Exploitation, CSE and Community Safety as well as many front-line supervisors. These staff have received training on Spotting the signs of vulnerability, particularly where it is not obvious through using 'Professional Curiosity' to identify vulnerable people at the earliest possible stage, intervene using the principles of "SIP" (Safeguarding-Investigation-Prevention) and through sharing information with our partners. The coaches will continue to receive additional training, inputs and material and we will be

asking them to share this with colleagues. This will cover many vulnerability themes such as Domestic Abuse, Exploitation (Child Sexual, Child Criminal, Adult and Modern Slavery), Missing Persons and Neglect but will be encompassed by the principles of 'SIP', and understanding that families can present many of the above vulnerabilities in combination. The coaches will develop and become the 'go-to' people on teams for advice and guidance on how to deal with vulnerable people and will be able to help or signpost colleagues to the help and support they need.

Investigating missing persons is another priority currently implementing findings from a Systems Thinking review to improve our response to preventing people from going missing. The demand that comes into Lancashire Constabulary from Mental Health (MH) related incidents has been analysed recently in a study by Dr Nathan Birdsall and this found that in 2018 there was between 9-10% of all Police demand where MH could have been a factor. What this study did not look at is the amount of time that those incidents took to resolve as it is thought by the MH SPOC that this 9-10% of incidents, would account for much more in focused Police time. With all other competing demands on Policing, the level of demand from MH related incidents is a significant pressure with officers often tied up for prolonged periods of time in A&E departments or dealing with MH related incidents. The MH Advisors can be seen as good practice as these officers now have an enhanced knowledge around legislation and protocols and this is being put into practice, assisting colleagues and supervisors when dealing with MH related incidents. The Chief Officer team is working with the Chief Executive responsible for MH services.

MCA online learning is currently being promoted within the locality, so that officers can self develop their skills in identification and support needs. CQC have offered locally based face to-face training on MCA and various sessions are currently being organised. The quarterly Pan Lancashire Vulnerable Adults meeting takes place at Police HQ, bringing together three Local Authorities together with the Vulnerable Adults Inspectors from each Basic Command Units (BCU's), the Fraud point of contact, who holds responsibility for all financial exploitation investigations, as well as the Mental Health SPOC, who can update from a National perspective. Due to the composition of this meeting group, it provides a forum that allows for debate and sharing of good practise on a Lancashire 'footprint'.

A multi-agency pan Lancashire MARAC review is currently underway, underpinned by a systems thinking methodology. The team are piloting a new process, using a few cases, to test whether this new process addresses the issues so far identified in the review and leads to improved outcomes. This work is being looked at with interest nationally to see if a new design could benefit other areas. The new design will focus on achieving better outcomes for both victims and families.

In conjunction with the Office of the Police and Crime Commissioner's support and engagement, a 12 month 'Rape and Sexual assault within a Relationship' campaign commenced in February 2019. It is anticipated that this will, through a variety of forms,

including the 'voice of the victim', bring this subject matter to the fore and increase confidence to report incidents. Full engagement from core partners will provide holistic support for victims, providing them with a bespoke service throughout the journey of the investigation and possible Court appearance. Consideration is also being given as to how engagement can be established with 'harder to reach' areas of our community and this will be an on-going piece of work throughout 2019. Lancashire Victim Services are in full support of the Campaign and will be monitoring the increased demand on their services throughout the campaign period. A roll out of the Independent Sexual Violence Advisor (ISVA) services, within each of the major hospitals will strengthen the campaign.

National Probation Service (NPS)

NPS provides, essentially, three levels of service to individuals convicted in adult courts of a sentence that is managed by one of the Probation Service Providers. This includes: -

- Court based services supporting Sentencers in making their sentencing decisions in relation only to adults;
- Management of individuals sentenced to offences of a serious violent and/or sexual nature largely covered by MAPPA (Multi-Agency Public Protection Arrangements) processes and other high risk of harm offenders. The Management of individuals can be within the community, serving prison sentences or subject to hospital orders.
- A victim liaison Service offered to victims of serious violent and/or sexual offences for which the perpetrator has been sentenced to more than 12 months custody.

NPS are committed to sending the most appropriate person to multi agency meetings such as MARAC, MAPPA, domestic abuse strategic meetings and case conferences and NPS has a representative on the Local Safeguarding Adults Board.

Mandatory training is in place for all staff – this includes Adult Safeguarding. Additionally, staff are trained on child safeguarding, domestic abuse, disability awareness, equality and diversity, mental health awareness, race awareness, LGBTQ awareness

NPS in the North West are completing an audit of all mandatory safeguarding training (adult, children and domestic abuse) in October 2019. This will determine compliance with online learning and classroom based training.

Following national consultation on the current probation model the decision has been made that there will be a reunification of probation providers under the umbrella of the National Probation Service with an implementation date of spring 2021. A new organisational structure with 12 regions across England and Wales will replace the current seven divisions in operation. All offender management will be brought into a remodelled national probation service.

Accredited programmes (excluding sexual offending) and unpaid work will be repackaged and tendered to new suppliers.

Voluntary, Community & Faith Sector

Change, Grow, Live (CGL)

CGL provide support services for those who misuse substances. Over the last year the number of safeguarding concerns (children, young people and adults) has increased from 12.2% in September 2018 to 14.8% in March 2019 which would be expected with a rise in the client caseload over that period (688 increasing to 743). The adults at risk on active caseloads has decreased from 48 to 34 due to the implementation of electronic care plans and safeguarding being embedded as part of these therefore any risk indicators are removed once risk is reduced.

The level of complexities of service users (e.g. autistic spectrum, adverse childhood experiences) has increased over the last couple of years but the current number of adults considered at risk remains manageable for the service.

The Designated Safeguarding Leads (2) within CGL will have risk management discussions on a daily basis, group safeguarding supervision sessions and individual case discussion whereby adult safeguarding concerns have been identified. One of the Outreach and Engagement Workers from CGL sits on the Complex Case Hub panel, where support for substance misuse has been identified, they also manage a small caseload again when substance misuse support has been identified and there is required a multi-agency care planning approach, for example with social care and domestic abuse services.

CGL have recently developed its own Multi-Agency Complex Case Panel (not associated with the complex case hub mentioned previously). It is another layer of risk management for service users with significant complexities, where our Lead Consultant Psychiatrist will meet with a manager from the service, any other relevant professionals, and the case coordinator to plan a more detailed multi-agency risk management plan with tracked actions that are closely monitored. Other services can refer a service user into the panel as needed through the CGL designated managers. A terms of reference has been completed, and the meetings are held on a fortnightly basis.

Towards the end of 2018, sadly there was a noticeable increase in service user deaths in Blackburn with Darwen, three times more than would have normally been expected in a quarter period (12). Due to the volume and need to explore patterns and themes, it was agreed to review all of these deaths in a cluster. A number of staff were involved with a CGL medic also present. Each service user had a GP summary obtained where possible and a review of their last 12 months in treatment. The team then checked against certain areas for

patterns and themes, with some common themes found and a robust action plan set out to address the themes as needed. Other CGL services have now started to replicate the work as best practice across England.

WISH/BDWWA Centre

The WISH Centre is the commissioned domestic abuse service in the borough and provides an accessible centre that offers support at crisis point, a helpline, IDVA support, a range of therapeutic programmes for the whole family, a legal surgery, counselling service, volunteering opportunities as well placements for university students.

We work in collaboration with a wide range of voluntary and statutory services in Blackburn with Darwen including the Women's Centre, Inspire, housing and health services.

Our statistics for the last 12 months have highlighted that nearly half of our referrals come from partner agencies or are self-referrals with the other half coming directly from the police. 96% of the referrals are new with only 4% being repeat referrals. 48% of the referrals into service are from service users aged 25-40 with 21% being for under 17-year olds. 37% of our service users have presented with mental health issues and 18% with substance misuse. In the last 12 months we have received 233 referrals for refuge and have accommodated 58 women and 92 children. The demand for refuge accommodation nationally exceeds the space that is available.

Our outcomes are positive with 95% of service users saying that they felt safer and confident in accessing support and 88% felt that they had an improved quality of life.

We have delivered 12 AIM programmes and 4 Recovery toolkits in the last 12 months, four AIM programmes have been delivered in Darwen. Our perpetrator interventions include a group programme or a 1:1 programme depending on need and assessment as well as holistic support that includes help with accessing debt advice, housing, mental health support and support to access substance misuse services.

All referrals into the service are risk assessed and are also assessed in terms of potential safeguarding issues by trained practitioners within the service. All the staff are required to complete a comprehensive induction where safeguarding policies and procedures are covered. Staff are also required to complete LSCB online safeguarding training. Training & development is an agenda item on supervision and any gaps in training or learning are identified at this point. Supervision also identifies any safeguarding concerns so that a line manager can have oversight of such cases.

Staff represent service users at MARAC (Multi Agency Risk Assessment Conference) on a monthly basis, at Child Protection and Child In Need conferences, strategy discussions and

MAPPA meetings. The CEO represents the organisation at Domestic abuse meetings in Blackburn with Darwen and Pan Lancashire. The CEO also represents the VCF sector on PCN meetings, LSAB and the Children's QA committee. We support the LSAB by delivering training on domestic abuse to frontline practitioners and regularly attend team meetings to give an input on domestic abuse and the support available.

In order to determine whether we are meeting the needs of service users the trustees hold annual focus groups that include service users from the refuge, service users attending the programmes and feedback from these groups is used to identify gaps in service provision and helps and assists to improve our service and practice. Evaluations and exit questionnaires are also completed to highlight the outcomes achieved by the interventions that are provided.

The services provided by The Wish Centre are flexible to meet the needs of the service users and we have developed and delivered additional programmes, delivered smaller groups to meet the needs of service users and are developing new ways of working to meet the needs of our clients.

The Wish Centre holds the IIP standard and Investors In Children.

Age UK Blackburn with Darwen

Age UK Blackburn with Darwen utilises a mixed staff and volunteer workforce across its service provision and 98% of all staff and volunteers received relevant safeguarding training over the last year. The number of referrals to adult safeguarding remains consistent with previous years but there has been an increase in those from the Asian population with financial abuse being the highest number. During the year staff have worked jointly with adult social care staff to support service users at risk of abuse, particularly in relation to financial issues. Currently no service user feedback specifically on safeguarding cases and alerts made is collected, but user surveys across all services are collected and Age UK currently have a satisfaction rating of 95%. The organisation takes a preventative approach, offering holistic assessment and support across the service offer, with the aim of maintaining independence and reducing crisis.

Staff raise safeguarding issues directly with the Safeguarding Lead that are discussed and actioned immediately utilising the Adult Safeguarding Continuum guidance; and all cases are reviewed regularly at the relevant staff one to one meetings. Service Managers operate an open door policy for volunteers to raise and discuss any potential safeguarding concerns, and volunteers are briefed in safeguarding training that they are able to report immediately any safeguarding concerns to any member of the Management Team in the absence of their line manager.

The Board of Trustees reviews safeguarding reports twice a year, in May and October, quarterly by the senior management team and the Chief Executive receives a monthly update

from the Safeguarding Lead. The Chief Executive also represents the voluntary sector on the LSAB and Health and Wellbeing Board.

Appendix A: LSAB Budget & Resources

A range of agencies fund the Safeguarding Unit to deliver the functions of the boards across both the children and adult safeguarding agendas. Agreed contributions by partner agencies for 2018-19, including ad-hoc contributions were as follows:

Children's Services & Education	£75,300
Adult Social Care	£50,000
BwD Clinical Commissioning Group (CCG)	£50,000
Schools, Colleges & Training Providers	£39,900
Lancashire Constabulary	£35,995
Cumbria & Lancashire Community Rehabilitation Company (CRC)	£1,900
National Probation Service	£1,243
CAFCASS	£550
Fees from other Boards	£500
Total Contributions	£255,388

Salaries	£174,224
Fees: Independent Chair, CDOP, TRI-X, website, training costs, meetings and travel costs	£55,837
Total Expenditure	£230,061

Appendix B: LSAB Governance and Accountability

The objectives of each of the groups that make up the LSAB are provided below:

LSAB

- Strategic oversight of the board's fulfilment of its statutory functions
- Strategic partnership reporting on their fulfilment of their safeguarding responsibilities – Health & Wellbeing Board, Children's Partnership Board, Community Safety Partnership, Youth Justice Service, Engage, Multi Agency Public Protection Arrangements (MAPPA), Domestic Violence partnerships, Age Well Partnership etc.
- Examination and scrutiny of key safeguarding and adult protection themes to identify how multi-agency arrangements can be improved and ensure the effectiveness of safeguarding arrangements and services

Joint Workforce Development and Communications Committee

- ensure the development of the multi-agency Workforce Development Strategy and to ensure effective workforce planning, commissioning and delivery of learning and development programmes which reflect current and future priorities within the context of local and national policies, research and practices and;
- Ensure lessons and themes from Serious Case Reviews/Safeguarding Adult Reviews are fully embedded within training programmes/workshops and are in line with local regional and national recommendations;
- Employ rigorous processes to evaluate inter-agency learning and development programmes and provide quantitative and qualitative data. This includes impact measurement data from both practitioners and managers;
- Identify and implement effective methods of engagement with partners; service users and members of the public;
- Collaborate with Pan Lancashire partners to deliver the Pan Lancashire Communication and Engagement Strategy
- Develop and lead awareness raising campaigns and projects on behalf of the Boards; and support national campaigns relevant to our agenda and priorities;
- Be responsible for content development of the Boards' websites, ensuring they are accessible, accurate and up to date

Adults Quality Assurance Committee

- Commission and analyse multi-agency safeguarding practice audits
- Monitor action plans from the learning and improvement framework
- Undertake multi-agency reviews
- Collate findings from case reviews and audits to inform the learning and improvement framework
- Collate findings from case reviews, audits and Safeguarding Workshops to inform the Learning & Improvement Framework

Pan-Lancashire Policies & Procedures Meetings

- Develop and launch multi-agency policies and procedures on how different organisations will work together on safeguarding and promoting the welfare of children and young people
- Revise multi-agency policies and procedures informed by learning and improvement work findings, communication/participation findings, national guidance, research and best practice
- Develop policies and procedures across a wider footprint (sub-regional and regional) that ensures consistency for service users and service providers whilst retaining local determination of practice and management oversight.

APPENDIX C: LSAB Priorities 2018/19 Update

Priority Area	Actions	Lead Committee/Partnership Group	Timescale
Review and oversight of systems reforms	<ul style="list-style-type: none"> • Ensuring that LSAB development goes hand in hand with LSCB changes. • Co-alignment of priorities across the systems e.g. NHS England, ADASS plan and other boards especially the integration agenda. • Having assurance processes that are fit for purpose (e.g. standards, competencies and risk management) 	Board	September 2019
Improve systems for Making Safeguarding Personal across all stakeholders	<ul style="list-style-type: none"> • Identify the needs of all stakeholders for hearing and learning from 'user voice' • Influencing safeguarding priorities/arrangements • Influence quality assurance and communication and engagement 	Quality Assurance	June 2019-although MSP remains ongoing

Priority Area	Actions	Lead Committee/Partnership Group	Timescale
Prevention and the multi-agency safeguarding role	<ul style="list-style-type: none"> • Understanding of causes of crisis • Focus on statutory abuse and neglect categories and role of LSAB • Identification of the role partners have in prevention strategies – possible themes of financial abuse, neglect/self-neglect. • Board commitment to multi agency training 	Quality Assurance, Training & Communications Committees	June 2019

Please note that the Business Plan for 2019/20 will be published separately.