

Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting:	Tuesday 18 October 2022
Subject:	Safeguarding Update		
Report of:	Executive Director of Adult Social Care and Health	Wards Affected:	All wards
Portfolio:	Adult Social Care		
Is this a Key Decision:	N	Included in Forward Plan:	No
Exempt / Confidential Report:	N		

Summary:

This report seeks to provide an update to Overview and Scrutiny Committee on current safeguarding activity across the Sefton Borough and to provide assurance on the actions being taken to mitigate risk and investigate safeguarding concerns. It provides a particular focus on safeguarding across the care home market.

Recommendation(s):

(1) The contents of the report are received and noted.

Reasons for the Recommendation(s):

The report is for the Committee's information only.

Alternative Options Considered and Rejected: (including any Risk Implications)

Not applicable

What will it cost and how will it be financed?

(A) Revenue Costs

The contents of this report have no direct revenue costs.

(B) Capital Costs

The contents of this report have no direct capital costs.

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets):	
Legal Implications:	
Care Act 2014	
Equality Implications:	
There are no equality implications.	
Climate Emergency Implications:	
The recommendations within this report will:	
Have a positive impact	N
Have a neutral impact	Y
Have a negative impact	N
The Author has undertaken the Climate Emergency training for report authors	Y
The contents of this report have a neutral impact on the Climate Emergency.	

Contribution to the Council's Core Purpose:

Protect the most vulnerable: safeguarding is a critical function to this purpose.
Facilitate confident and resilient communities: safeguarding contributes to supporting this core purpose.
Commission, broker and provide core services: safeguarding is a complimentary function to this core purpose.
Place – leadership and influencer: upholding robust safeguarding response is key to this core purpose.
Drivers of change and reform: lessons learnt through safeguarding is a key contributor to this core purpose.
Facilitate sustainable economic prosperity: N/A
Greater income for social investment: N/A
Cleaner Greener N/A

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD.6973/22) and the Chief Legal and Democratic Officer (LD.5173/22) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

Not applicable

Implementation Date for the Decision

Immediately following the Committee meeting.

Contact Officer:	Joan Coupe
Telephone Number:	
Email Address:	joan.coupe@sefton.gov.uk

Appendices:

There are no appendices to this report.

Background Papers:

There are no background papers available for inspection.

1. Introduction

This report provides an overview of current concerns relating to care settings across Sefton for adults with care support needs. Safeguarding vulnerable people is a statutory responsibility of the Local Authority under the Care Act 2014. There are over 130 care homes in Sefton that serve more than 3,000 people. There is a mixture of Council funded, health funded, privately funded and other Local Authority funded placements in all settings.

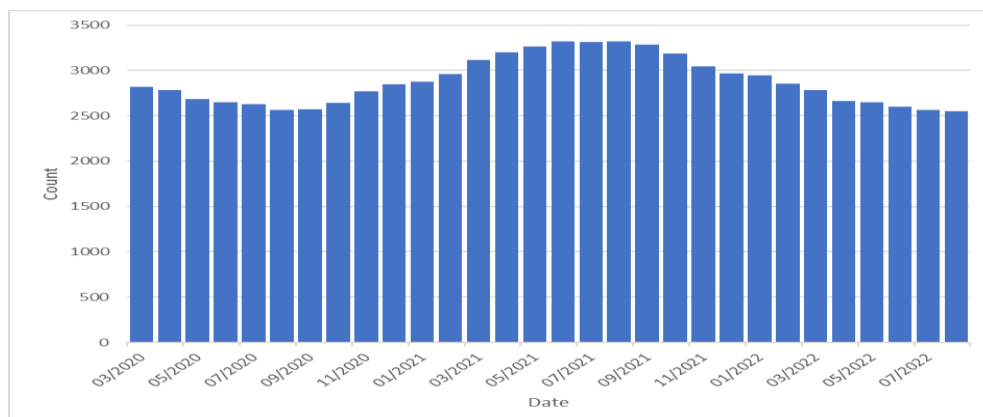
The Care Act requires Local Authorities to:

- Make enquiries (under Section 42) if it believes that an adult with care and support needs is experiencing neglect or abuse to determine all necessary actions to reduce / remove on-going risks and abusive practices.
- Establish a Safeguarding Adults Board to receive assurance from all organisations and partners that measures are in place and steps are taken to promptly address abuse or neglect as it is identified.
- Arrange independent advocacy to support adults with care and support needs subject to safeguarding adult enquiry.

2. Safeguarding Activity during the last 12months

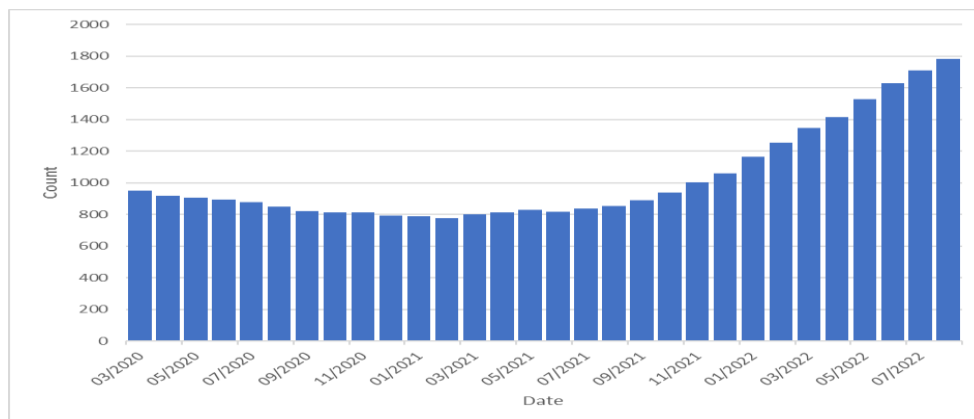
2.1 In the last 12 months Sefton has received just over 2,500 contacts relating to safeguarding. This equates to around 212 contacts per month. During the initial stages of the COVID pandemic the number of safeguarding contacts saw a slight decline of around 9% on pre-COVID number. From around October 2021 numbers however started to increase and by June 2021 had hit a high of around 277 safeguarding contacts per month. Since this peak however numbers have been steadily returning to pre-COVID levels and in August 2022 are slightly below the same 12-month period prior to the pandemic. This activity is detailed in figure 1.

Figure 1. SGA Contacts Received in rolling 12 months – March 2020 to August 2022



Whilst the number of safeguarding contacts has largely returned to pre-pandemic levels, the number of safeguarding contacts being converted into safeguarding referrals has increased significantly (Fig 2)

Figure 2. SGA Referrals Received in rolling 12 months – March 2020 to August 2022



This is largely down to changes in working practices as the safeguarding team had identified an issue with practitioner work being conducted within the LAS reporting system on the contact level rather than at the referral stage. Previously, an analysis of safeguarding statutory returns for 202/21 indicated that Sefton had a low conversion rate of contacts to referrals, however we are now performing comparably with regional partners.

Furthermore, Sefton’s rate of safeguarding concerns is similar to the rate seen across the North West. Per 100,000 people in Sefton, 869 are the subject of a safeguarding concern, this compares to 908 in the North West. In respect safeguarding Section 42 enquiries (investigations), the rate in Sefton is 209 people per 100,000. This is slightly lower than the North West’s rate of 285 people but is around 16% higher than the bottom quartile rate for North West councils.

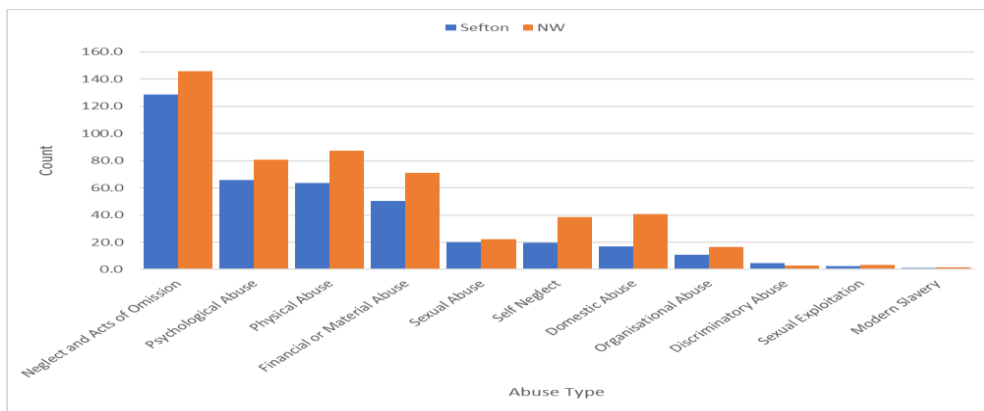
2.2. Timeliness and Making Safeguarding Personal

During the past 12-24 months Adult Social Care has seen improvement in its timelessness of responding and resolving safeguarding contacts, with over 93% being resolved with 7 days during August 2022. This has improved from 90% in August 2021 and 85% in August 2020. The service has also continued to perform well in terms of ensuring a personalised approach to safeguarding and that an individuals outcomes remain central to the process. In Sefton just under 80% of those expressing a preferred outcome have this preference fully met, this compares to 67.5% in the North West. 97.7% of people have their preferred outcome fully or partially met in Sefton compared to 95.4% across the North West.

2.3. Types of abuse and location.

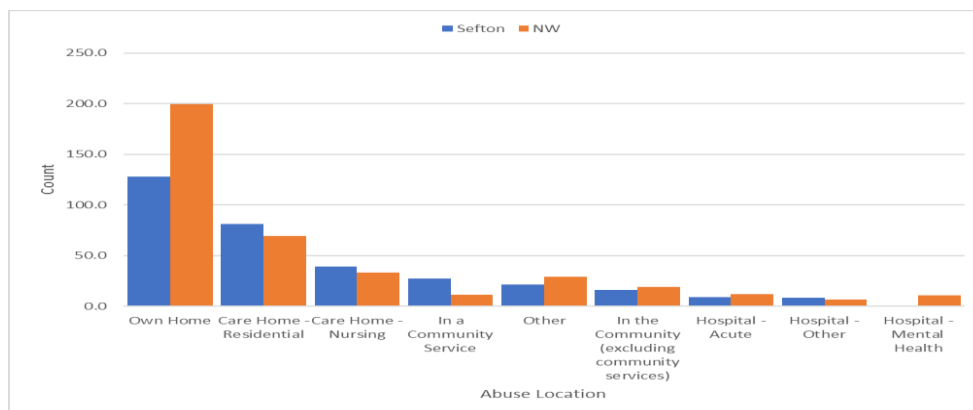
The most common abuse types seen in Sefton safeguarding episodes are similar to those seen across the North West, with neglect and acts of admission being highest (Fig3.).

Figure 3. Abuse Types rate per 100,000 (Sefton and North West Outturn) – 2021/22



In Sefton, as in the North West, the majority of abuse occurs within a victim’s own home. This is followed by abuse taking place in residential and nursing care homes. The rate of abuse occurring in own homes in Sefton is lower than that seen in the North West. However, the rate of abuse seen in care homes is slightly higher. This may well be a result of the high number of care homes within Sefton compared to other North West authorities. This is shown in Fig 4.

Figure 4 Abuse Locations rate per 100,000 (Sefton and North West Outturn) – 2021/22



3 Care Homes and Safeguarding

3.1 Work with care providers represents a significant part of the safeguarding duties

undertaken by Adult Social Care. In situations where there are concerns relating care providers (where there maybe multiply concerns), these are managed under organisational safeguarding processes.

Organisational abuse, as defined in the Care Act (2014) Statutory Guidance is '*neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from a one-off incident or to on-going mistreatment. It can be through neglect or poor professional practice as a result of the structure, policies, process, and practices within an organisation*'.

3.2 There is a duty on care providers to report all safeguarding concerns to the Local Authority (LA) and Care Quality Commission (CQC) and to work with the LA and others in resolving the issues.

3.3 Sefton is currently undertaking a number of Safeguarding Enquiries for individuals living in care settings where the impact of the service delivered to the person has resulted in harm and/or neglect.

3.4 Care homes and care agencies are supported to improve quality through intensive engagement of staff from Adult Social Care, safeguarding teams, community teams, occupational therapy, medication management teams and Community health services. Progress and oversight of investigations is in place through a dedicated weekly meeting which has representation from senior operational and contract managers. Close working relationships are also in place with health colleagues to ensure a system approach is maintained. Organisation strategy meetings are chaired by senior officers within Adult Social Care and regular briefings are provided to the Executive Director and Cabinet Member.

3.5 There is recognised increased complexity and gravity in the organisational safeguarding concerns that are being raised. It is yet to be fully understood what the impact of working in care settings throughout the pandemic has had on both individuals working in care and those living in services. There are workforce challenges across all settings and as such recruitment is proving difficult, which can lead to a need to rely on agency staff. This can raise potential risks in relation to continuity and familiarity of care arrangements. Sefton continues to support care providers by ensuring access to workforce grants and involvement in regional recruitment initiatives. CQC will also monitor the use of agency within care homes as part of their oversight and regulation.

3.6 We have identified some common themes through safeguarding investigations such as:

- Staff found to have no background clinical or social care experience and are heavily reliant on appointed management staff to deliver services and uphold quality standards.
- Owners do not always directly engage in the day-to-day observations of service delivery and therefore have no awareness of events as we embark on enquiries.

To support the mitigation of these issues the quality assurance team within Adult Social Care work closely with colleagues from CQC to highlight the important of clear oversight and escalation arrangements within care homes between the registered manager and owner.

4. Role of the Quality Assurance Team

4.1 The Quality Assurance Team are part of the commissioning and contracts team within Adult Social Care. The remit of the team is to gain assurance regarding the quality of care commissioned by the Council from care providers across Sefton. They work closely with the safeguarding team, social work teams and the Care Quality Commission, as well as other organisations, to monitor the provider market.

4.2 Part of the role of the officers involves carry out visits to providers, this can be care homes, day care providers and domiciliary care providers to undertake a holistic review of the service provision. They will look at care records being kept, how services are being provided to residents of Sefton, establish if any themes are being demonstrated for example, increased number of falls, staffing levels, training of staff, etc. Within the care home market this will also include looking at the environment as a whole, sharing any concerns regarding the delivery of care.

4.3 A crucial aspect of the work undertaken by the Quality Assurance Team is to work in partnership with care providers to raise standards and help them to improve. Key to this is early identification of potential issues to enable appropriate support to be put in place and enable collaborative working with the provider organisation to address any concerns.

4.4 Within Adult Social Care, work is in progress to continue to enhance the role of the Quality Assurance Team, strengthen relationships with health partners and maximise collaborative working. This will include working with the care market to develop additional early intervention strategies and reporting mechanisms.

5. Additional support to care providers.

5.1 It is recognised that there are pressures on care delivery services at this time, including the impact of covid, ongoing workforce challenges and financial pressures which have recently been exacerbated due to cost of living increases.

5.2 Adult Social Care has continued to work closely with care providers with additional support across a number of initiatives including.

- Capital funding to make improvements to Care Homes
- Pilot programmes for use of Technology to improve service delivery
- Supporting Care Providers with their recruitment and retention issues
- New commissioning arrangements which give Providers more flexibility to deliver services, deal with changes in demand and new contracting models which seek to guarantee income/business for them based on anticipated levels of demand for their services

6. Safeguarding Adult Board

6.1 Adult Social Care continue to review the delivery of their adult safeguarding response, working alongside Sefton Safeguarding Board partners to make sure that the offer of intervention is accessible to all and that there is strong emphasis of early intervention and prevention. This includes ensuring all agencies work together to identify and respond to concerns in a robust and cohesive manner.

6.2 Further work is planned to strengthen the partnership working across all organisations as it is recognised that the delivery of quality services across Sefton can only be achieved with close working of all partners. This work includes a new Sefton Safeguarding Adults Board website, a refresh of the priorities for each subgroup and the development of a systemwide dashboard so wider safeguarding activity across Sefton can be tracked and any areas for action identified.

7. Recommendations

Overview and Scrutiny Committee are asked to note the report and provide comment.

The Committee is also asked to.

- Consider whether a further focused report on safeguarding people with care and support needs is presented to the next Committee.
- Consider whether it would like to receive more detailed update on the work of the Sefton Safeguarding Adults Board and specifically the role of the subgroups.