



Appendix One

Dudley Safeguarding Adults Board Annual Report 2018-19

Page What is Safeguarding for Adults?

Page What is Dudley Safeguarding Adults Board?

Page Executive Summary

Page Message from the Independent Chair

Page Adult MASH

Page Further Partnership Working

Page Large Scale Enquiries

Page DSAB audit

Page Quality and Assurance

Page Multi-agency Learning and Development/Training

Page Deprivation of Liberty Safeguards

Page Safeguarding Adult Reviews

Page Case Studies

Page Performance Data

Message to the Outgoing Chair

The Board members would like to extend their sincere thanks to Liz Murphy who was appointed to the role of independent chair of both the Children's and Adults safeguarding Boards in 2016. During her tenure Liz has provided scrutiny, guidance and appropriate challenge. In doing so she has focused on excellent service delivery across the multiagency partnerships, ensuring that the wishes and feelings of our residents are not only heard but acted on.

What is Safeguarding for Adults?

People's wellbeing is at the heart of the Care Act 2014, and the prevention of abuse and neglect is one of the elements identified as going to make up a person's wellbeing. In the context of section 42 of the Care Act 2014, specific adult safeguarding duties apply to any adult who:

- has care and support needs; and
- is experiencing, or is at risk of, abuse or neglect; and
- are unable to protect themselves because of their care and support needs.

In addition local authorities have safeguarding responsibilities for carers.

Safeguarding duties apply regardless of whether a person's care and support needs are being met or not. These duties also apply to people who pay for their own care and support services. Adult safeguarding duties apply in whatever setting people live, with the exception of prisons and approved premises such as bail hostels. They apply regardless of whether or not someone has the ability to make specific decisions for themselves at specific times.

If an adult at risk of being abused or neglected cannot keep themselves safe from abuse or neglect because of their care and support needs, then the local authority's safeguarding duty applies. If they are able to protect themselves, despite having care and support needs, then a safeguarding response may not be appropriate.

What is Dudley Safeguarding Adults Board (DSAB)?

Overarching purpose

The overarching purpose of an SAB is to help and safeguard adults with care and support needs. It does this by:

- assuring itself that local safeguarding arrangements are in place as defined by the Care Act 2014 and statutory guidance
- assuring itself that safeguarding practice is person-centred and outcome-focused working collaboratively to prevent abuse and neglect where possible ensuring agencies and individuals give timely and proportionate responses when abuse or neglect have occurred
- assuring itself that safeguarding practice is continuously improving and enhancing the quality of life of adults in its area.

The SAB must lead adult safeguarding arrangements across its locality and oversee and coordinate the effectiveness of the safeguarding work of its member and partner agencies. This requires the SAB to develop and actively promote a culture with its members, partners and the local community that recognises the values and principles contained in 'Making Safeguarding Personal'.

It should also concern itself with a range of issues which can contribute to the wellbeing of the local community and the prevention of abuse and neglect, such as:

- the safety of people who use services in local health settings, including mental health
- the safety of adults with care and support needs living in social housing
- effective interventions with adults who self-neglect, for whatever reason
- the quality of local care and support services
- the effectiveness of prisons in safeguarding offenders
- making connections between adult safeguarding and domestic abuse.

Core duties

SABs have three core duties. They must:

- develop and publish a strategic plan setting out how they will meet their objectives and how their member and partner agencies will contribute
- publish an annual report detailing how effective their work has been
- commission safeguarding adults reviews (SARs) for any cases which meet the criteria for these.

Section 43 of the Care Act 2014 requires the Local Authority to establish a Safeguarding Adults Board (SAB) whose main objective is to protect adults from experiencing, or being at risk of abuse and neglect. Dudley Safeguarding Adults Board has been established since 2008 and works to ensure there is an appropriate response from a whole range of professionals to situations where there is actual or suspected abuse, harm or neglect. The Board considers how partners across Dudley Borough responsible for safeguarding work together and the quality of support provided to people who have been abused, neglected or harmed.

The Board is made up of senior representatives from Dudley Council, West Midlands Police, Dudley Clinical Commissioning Group (CCG), Dudley Group NHS Foundation Trust, Dudley Fire Service, Dudley and Walsall Mental Health Trust, Black Country Partnership Foundation Trust, Healthwatch Dudley and West Midlands Probation, as well as voluntary sector organisations. The Care Quality Commission attend and report on their activities at one Board meeting each year.

The Board works to a business plan and produces an annual report which is distributed to key stakeholders as well as council cabinet scrutiny. The Board also has a protocol with the Health and Wellbeing Board and the Community Safety Partnership to ensure partnership and accountability is robust. Since partnership with the Dudley Safeguarding Children Board was established in 2016 joint board meetings have continued each year looking at the shared priorities which include supporting people who are victims of domestic abuse, modern slavery and preventing violent extremism.

The Board is funded through financial contributions from Dudley CCG, West Midlands Police and the council. Other partners provide staff and resources for meetings and training courses.

Executive Summary

During 2018 to 2019 adult safeguarding has produced excellent outcomes for the residents of Dudley. Awareness has increased and is evidenced by a 64% increase in referrals since the inception of the Adult Multi Agency Safeguarding Hub (MASH) and the conversion rate to enquiry being lowered to 14%, furthermore 98.6% of people going through the safeguarding journey report their desired outcomes have been fully or partially achieved, this demonstrates that Making Safeguarding Personal is established!

The developing work of the Safeguarding Adults Review (SAR) panel has received regional recognition and referrals rates have significantly increased, 17 SAR referrals were received during this period with 1 SAR review commencing and a further 3 being commissioned by the Board. The findings of these independent reviews will be published and training commissioned to ensure any lessons learnt are appropriately embedded in practice.

Emerging themes and trends from safeguarding inform practice, this is evidenced by the development of policies such the multi-agency, self-neglect and hoarding policy which is delivered by a nationally recognised expert.

The Board highlighted the potential financial risk vulnerable adults often face. Intelligence was secured by the partnership from, West Midlands Police, Trading Standards and Adult Safeguarding, this identified a variety of methods to work with communities, organisations and practitioners. Additionally a stake holder event took place in November 2018, this was called (Shine A Light). Importantly the voice of a victim/s and families were heard. This has resulted media attention and in organisation becoming Scambassadors, along with individuals adopting the role of Scam champions. Essentially, this work is being undertaken to make Dudley a safer community.

<https://www.dudley.gov.uk/business/trading-standards/>

<https://www.nationaltradingstandards.uk/news/friends-against-scams/>

As a result of changes in legal requirements, the multi-agency partnership has embraced the opportunity to deliver holistic Safeguarding practice across the life course. The appointment of Professor Paul Kingston from Chester University as the Independent Safeguarding Chair will provide guidance and direction of the safeguarding arrangements across the borough, ensuring the partnership is both accountable to the each other and the public.

Message from the Independent Chair April 2016 – April 2019

Welcome to the Dudley Safeguarding Board Annual Report 2018-19

2018-2019 was my third and final year as Independent Chairperson for Dudley Safeguarding Adult Board. This report has been produced and agreed since my departure and I am very pleased to have the opportunity to contribute and offer my reflections on the work and impact of Dudley Safeguarding Adult Board.

The report details a range of work that has been carried out by partner agencies to safeguard adult with care and support needs including:

- Further development of the Adult Multi Agency Safeguarding Hub;
- Reducing the backlog of DOLS assessments;
- Embedding a Scams Unit;
- Using the Friends Against Scams campaign to raise awareness of financial abuse
- Developing self-neglect guidance
- Launching a Modern Slavery pathway to ensure a coordinated response to victims of human trafficking

Work has also involved local residents and I am particularly pleased that local citizens have had the opportunity to influence revisions to the safeguarding referral forms/processes. Service users from a local provider have developed a series of videos to raise awareness of online safety issues and those directly affected by financial abuse contributed to two Safeguarding Board events on financial abuse and so helped shape the local response

During my time as Independent Chair, I observed creativity, commitment and collaboration and an increasing culture of challenge; including scrutinising the service improvement plans of one Board partner where regulators had identified significant areas for improvement.

The report contains some really clear examples of impact and in particular I am struck by:

- The number of adults who say their outcomes have been fully or partially achieved as a result of safeguarding activity (96%)
- The increase in the number of safeguarding concerns made by members of the public (23.6%)

In terms of areas for further consideration and/or development, I would offer the following reflections:

- How does the significant increase in referrals compare to statistical neighbours and to what extent is there a shared understanding of the safeguarding adult concern criteria across the partnership? The new ADASS guidance on s42 enquiries could perhaps be used to support a more consistent application of the Care Act criteria
- As recognised by the Council's internal audit of the Safeguarding Board in 2017-18, there remains ongoing work to develop its multi-agency performance dataset; hopefully this work will have now been completed and the Board can have a greater oversight of how the safeguarding system is operating in the borough
- Similarly, to support continuous improvement, the Board recognised the need to implement a programme of regular multi-agency audits so that this report can also provide assurance on the quality of front line practice e.g. the number of repeat safeguarding concerns
- The high volume of SAR referrals can on the one hand be considered positive; however as can be seen from the data, a large proportion of these resulted in no further action. This suggests a need to increase understanding and confidence in the SAR criteria so that scarce resources can be focused on reviewing the cases that do meet the SAR criteria and more

importantly on implementing the learning that is identified by these statutory learning reviews. The acid test as to whether this has been achieved would be if next year's Safeguarding Adult Board annual report can describe what has changed as a result of the SARs that have/will be completed and how the Safeguarding Adult Board knows the changes have been embedded

My final comments are to those who, in whatever role they do, work day in and day out to make a difference to the lives of adults with care and support needs; thank you for the difference you make.

Liz Murphy

Independent Chairperson April 2019 – April 2019

DRAFT

Adult MASH

The MASH (multi-agency safeguarding hub) includes professionals from the following organisations: Health; Police; Local Authority, Housing; Trading Standards; Probation and Substance Misuse. It receives all adult safeguarding concerns for unallocated cases and assesses whether the safeguarding threshold is reached (as defined in Section 42 of the Care Act), and directs the concerns to the appropriate team or partner agency for a safeguarding enquiry, with an appropriate plan in place for enquiry. This provides consistency of responses to adult safeguarding within Dudley MBC. In exceptional circumstances, MASH social workers will undertake safeguarding enquiries when a very urgent response is required.

In the last year the number of referrals has increased significantly and we are now receiving in the region of 30% more contacts than twelve months ago. We have adjusted the structure of the team with the recruitment of researchers to assist with gathering of information from partners.

The strong relationship that we have developed with our partners continues to be beneficial to allow appropriate information sharing.

We continue to put the individual at the heart of our approach by following 'making safeguarding personal' guidance with in excess of 96% of those who expressed desired outcomes have had those either partially or entirely met.

Our links with police and trading standards have enable us to continue our focus on addressing financial abuse of vulnerable people and our strong links with Dudley MBC commissioning and CQC have enabled us to focus on issues of organisational abuse.

The Adult MASH continues to develop and our aim for the forthcoming year will be to increase interaction with the Children's MASH and ensure that that the adult MASH is located in an appropriate and secure environment.

Further Partnership Working

West Midlands Police

Making Safeguarding Personal principles are mirrored in our statutory obligations under the 'Victims Code'. Under these obligations the wishes and feeling of the Adult with Care and Support Needs, or any advocates acting on their behalf will be at the centre of the decision making processes.

To support this WMP provide information in a range of formats, and also support the use of advocates and intermediaries where applicable for Adults with Care and Support Needs investigations and interactions

In Dudley the Dudley Partnerships Team receive referrals from NPU officers and other Force Department officers via the DY referral portal. The referral portal is used to signpost individuals whom officers have come into contact with, who are in need of additional support from partner agencies within Dudley borough. This could be mental health/substance misuse/elderly care/fire safety/debt/home safety etc.

During April 2018 – March 2019 838 referrals were put through the DY portal. In December 2018 the referral app was added to handheld devices making it easier for officers to complete referrals whilst still in the company with the individual and the benefit of the electronic consent.

WMP have an Adult Care Abuse Investigation Unit, which investigates the more complex Care Act related investigations, and investigate the majority of cases where advocates are required. They also provide advice and guidance for WMP in relation to the involvement of advocates in investigations. The use of intermediaries for investigations is also included in the new WMP policy

Regional Emergency Services Group

The creation of the Emergency Services/SAB Managers Regional (Metropolitan) Group, which is the bringing together of Emergency Service reps and the Adult Safeguarding Board Managers, is significant in terms of what it can deliver in relation to the board's priorities. This enhances the West Midlands Police (WMP) approach to our Adult Safeguarding arrangements with each Local Authority as it allows us as a Partnership to develop consistent ways of working across the Safeguarding Adult Boards/Teams.

This approach has been/is being used to do the following:

- Streamline the Annual report, Assurance report, and Audit regimes to create a consistent approach across all Safeguarding Adult Boards. This approach has delivered efficiencies in reporting arrangements, and allowed us to share learning across the SABs to inform localised service delivery
- Reviewing the Safeguarding Adult training provision to ensure we train staff to the appropriate level, and are efficient in our training provision
- Development of a defined criteria for Emergency Services Performance Data, and
- Commence analysis in relation Adults with Care and Support Needs demand/incident types, and SARs to inform our service delivery and strategic priorities across the SAB areas and

Case Study One: - 77 year old female regular caller to all emergency services between 2016 - 2018, police calls totalled to 647 throughout this period. High demand on all services, this lady was bedridden with numerous medical conditions but was deemed to have capacity, she was a smoker and would regular set fire to tissues whilst in bed alerting Fire service to attend and deal with the fire.

Stourbridge Neighbourhood Team monitored this lady and regularly visited and built up a relationship with her. In addition DY Vulnerability Officer was in regular contact (most days) with Adult social care and the allocated social worker, also attending many safeguarding meetings highlighting officers concerns in relation to this lady's behaviour, risks to herself and the community and the impact on services.

This case was raised through Dudley Safer Estates as month by month she was identified as number 1 repeat caller for Dudley Police. The main issue within this case was mixed feedback by Social Services/NHS/Mental Health services was the clarification of her capacity.

Case Study Two: - Current ongoing case, 87 year old female diagnosed with dementia daily visiting Merry Hill Shopping centre making inappropriate comments to security guards/staff. Merry Hill

Police team and Merry Hill security team monitoring. There has been several safeguarding meetings held whereby numerous interventions have been introduced i.e. Dementia Gateways Day care and door monitor system installed etc. DY Vulnerability Officer in regular contact with allocated Social worker and Social care.

West Midlands Fire Service

WMFS sets out its priorities and objectives in 'The Plan' and this is our strategy for keeping the West Midlands safer, stronger and healthier. The Plan covers how we plan to reduce serious traffic accidents, help people to have safer, healthier lives and making sure we tackle emergencies assertively, effectively and safely. We identify and analyse risks across the West Midlands, and use the information to decide where we need our fire stations, firefighters and vehicles. It also helps us plan how we deliver our full range of services which we split into **prevention, protection and response**.

Our **prevention** work focuses on reducing people's vulnerability to the type of emergencies to which we respond. Our firefighters carry out thousands of 'Safe and Well' visits every year and our crews give advice on health and well-being where it will reduce the risk of a fire. A dedicated team of Complex Needs Officers will try to engage with, and provide extra support to, the absolute most vulnerable people in our communities where their risk of fire may be heightened. This means vulnerable people are safer in their own homes and we can get them extra help if they need it. Thanks to our strong relationship and collaborative partnerships with our colleagues in other sectors, we can identify and support people who are at higher risk from fires and other emergencies. But our prevention work extends well beyond the home. WMFS provides fire safety education in hundreds of schools and colleges and at our interactive 'Safeside' learning centres in Handsworth and Eastside, as well as at public events and through our popular Fire Cadets programme.

Our **protection** work focuses on helping businesses to thrive, making the West Midlands stronger. We assess high-risk buildings including residential high-rises to ensure public safety and provide reassurance about the risks of fire. We also advise companies how best to comply with fire safety legislation, to keep staff and customers safe. If fire does strike, we help them to get back up and running as soon as possible.

Our risk-based, five-minute **response** is one of the best in the country. We've worked with academics and medical experts on research that shows the time it takes to get to an incident is critical to someone surviving a fire or a road traffic collision.

Dudley CCG

Dudley clinical commissioning group (CCG) is committed to safeguarding the most vulnerable people in the borough. The CCG has a statutory duty under legislation and statutory guidance to ensure that adults are safeguarded and that all NHS bodies must make arrangements to safeguard and promote the welfare of adults. Our approach to safeguarding is underpinned by making safeguarding personal, close partnership and collaborative working. Furthermore having contracting system and process that aims to reduce the risk of harm and respond quickly to any concerns

In order to ensure that service development and design consider the statutory safeguarding element, the CCG safeguarding Team have developed a safeguarding Commissioning and Procurement framework aligned to a set of standards that are now included in all contracts.

The CCG Safeguarding Quality Review Meeting (SQRM) aims to safeguard Dudley residents by effective high quality formal communication and partnership working applying both Local Safeguarding Board's priorities (children's and adults) in order to achieve best local outcomes. Dudley CCG seek assurance from all providers regarding safeguarding arrangements. The SQRM is established within the Quality and Safety Committee structure in accordance with Dudley CCG statutory safeguarding responsibilities. Engagement from provider organisations has improved, but the processes for gaining assurance has been reviewed and revised in 2019.

Throughout 2018, the Safeguarding Team have facilitated a number of training sessions for GPs and other staff. Topics have included, learning from SAR's, Financial Abuse, Modern Slavery and Female Genital Mutilation. CCG staff were trained in safer recruitment processes in order to review policies and practice in recruitment with a view to creating a safer culture.

Following on from a published Domestic Homicide Review, the CCG invested in the introduction of the Identification and Referral to Improve Safety (IRIS) programme for Primary Care. This is a general practice-based domestic violence and abuse (DVA) training support and referral programme aimed at women who are experiencing DVA. GP practices have access to an Advocate Educator along with a Clinical Specialist from the CCG who can offer advice and support to both practitioners and victims.

The CCG Safeguarding Team continue to work to support and advocate for the most vulnerable people across the borough.

Dudley and Walsall Mental Health Partnership NHS Trust

Dudley and Walsall Mental Health Partnership NHS Trust is committed to safeguarding vulnerable people across the organisation. The welfare of those who come into contact with our services either directly or indirectly is paramount and all our staff have a responsibility to ensure that best practice and Local and National guidance is followed, including compliance with statutory requirements and effective engagement with our partner agencies.

We provide services within the Dudley borough and we are key members of the Safeguarding Board arrangements. We continue to progress a significant programme of safeguarding training for staff to ensure that all eligible staff have received the right level of training relevant to their roles and responsibilities.

Following our CQC inspection that took place in September and November 2018 we are pleased to announce our Trust has received an overall rating of 'Good' our first ever "Outstanding' under the domain of 'caring' in our CAMHS services.

We have launched the new Community Perinatal Mental Health Service which provides a Multi-disciplinary specialised care throughout the West Midlands, to treat mothers with mental health problems, both during pregnancy and in the first year post-partum.

We have continued to engage proactively with our partner agencies including multi-agency training and embedding multi-agency learning within our own organisation by implementing a face to face information sharing process throughout each of our service lines to enhance learning opportunities and implemented 7 minute briefings on key safeguarding themes from both local and national learning.

As part of the Trust's commitment to the safeguarding of adults and children we have a dedicated Safeguarding Team which includes the Vulnerable Adults and Children's Safeguarding Lead, two

Vulnerable Adult and Children's Specialist Practitioners, Safeguarding Report Writer, Compliance and Safety Co-Ordinator and Safeguarding Administrator. The team maintain an active and robust presence within the Safeguarding Adults Arena with key personnel identified to attend the Board and sub groups

DWMH engage within the SAR and DHR process and participate in multi-agency case audits as identified by the Board and ensure that multi-agency good practice and identified learning is used to inform practice within the Trust and this builds upon the information provided to staff, service users and carers on key themes and concerns around safeguarding. There is a plethora of information including our newsletters, bulletins and 7 minute briefings to raise awareness and provide practical advice in easily accessible formats.

We continue to maintain an active and robust presence within the Dudley Safeguarding Adults Arena with key personnel identified to attend the Board and subgroups.

DWMH undertakes all safeguarding enquiries in line with the Care Act for adults who use their services. This data is shared across the partnership via reporting to Dudley CCG to inform a borough wide approach. Processes are followed and information is shared with Dudley MBC via the section 75 agreement. DWMH engages with the Adult MASH through an agreed information sharing arrangement ensuring that safeguarding responsibilities are met for our service users and their families.

Dudley Group NHS Foundation Trust

The Dudley Group NHS Foundation Trust (DGFT) recognises that effective, timely and robust safeguarding is fundamental to protecting those at risk in our care and that this requires constant vigilance and a readiness to act where we suspect abuse, exploitation or neglect. The landscape of safeguarding is constantly evolving and as a Trust we endeavour to embrace and shape our key priorities in support of this. DGFT is an organisation with a vital role to fulfil in protecting the vulnerable whilst demonstrating a concerted obligation to respond with haste and flexibility to meet new demands as they arise. Above all, we are dedicated to ensuring that we listen to the voices of the vulnerable and act upon what we hear. Safeguarding is everyone's business.

The annual report covers the period of April 2018 to March 2019 and will provide assurance to the Board by detailing priorities and activity, highlighting areas requiring focus and development and to inform of the intervention and change that has been made to strengthen the safeguarding processes within The Dudley Group NHS Foundation Trust (DGFT). Safeguarding has a high emphasis on a competent well-established workforce; up to date policies and procedures, robust governance arrangements and collaborative practices. This report details how this has been achieved in 2018/19.

For 2018/19, the Trust has contributed to engagement and effective partnership working and recognises the significance of its utilisation to shaping and informing safeguarding systems, processes and practice. Representation has been provided for both safeguarding Boards (DSCB and DSAB) and corresponding subgroups, however representation has not been consistent and due to reduced capacity within the safeguarding team, attendance has not always been achieved.

The Trust is a virtual member of the Multi Agency Safeguarding Hub [MASH] for adults & children. This process is for the multi-agency sharing of information where a safeguarding concern arises and facilitates effective collaboration. The timescale to provide responses are time limited and place significant pressure to gather information from across the relevant division and respond. Going forward the safeguarding team is represented on each of the work streams as part of the Black Country Safeguarding STP.

Safeguarding Activity and Performance for 2018/19

Safeguarding activity across DGFT has continued to intensify in volume and complexity which is reflected both nationally and regionally. The Trust is committed to ensuring the provision of an integrated and highly robust safeguarding service for all ages.

Governance

The Internal Safeguarding Board is a subcommittee of the Clinical Quality, Safety and Patient Experience, gaining assurance on behalf of the Trust Board that its legal and statutory duties are met in regarding the safeguarding of adults, young people and children.

The Internal Safeguarding Board acts as a conduit for the following agendas and has representatives from the health economy, including, the Designated Nurse for Safeguarding:

- Safeguarding adults – including compliance with the Mental Capacity Act (2005), Deprivation of Liberty Safeguards (DOLS), and the Mental Health Act (MHA).
- Response to the Trusts duties as part of the PREVENT strategy, working with partner agencies across the health economy.
- Safeguarding Adults and children – including domestic abuse, child sexual exploitation and female genital mutilation
- Gaining assurance from the Divisions that responses to external or internal inspection reports are met and that risks are managed and mitigated accordingly
- The Trust upholds its reputation and meets its responsibilities in relation to the Dudley Safeguarding Children and Adult's Boards and associated sub-groups.

Safeguarding Training

At the time of this report, mandatory safeguarding training has been subject to an in-depth review with a focus upon training needs analysis and workforce requisites. It had been recognised that present training in place did not meet the expected statutory requirements. A paper will be presented at the July 2019 Internal Safeguarding Board recommending that all training will be through Skills for Health eLearning with some additional tutorial sessions for level 3 requirements. Staff will be required to keep a passport to demonstrate their training hours. All staff requiring level 3 training will require a final sign off by the Named Nurses within the Safeguarding team.

Safeguarding Adult Training

	Q4 2018	Q4 2019
Level 1 and 2	79.5%	90.2%
(3 yearly)	(3703/4656)	(4164/4615)

Trust standard is over 90% compliance

This table shows the training compliance for Safeguarding Adults level 1 and 2 year ending. The training at this time was a combined session completed 'face to face' session or by e-Learning. The table also shows the number of staff identified to complete the training and the total number of staff who have completed the training. There was an increase of 10.7% in Q4 2019 compared to the previous year.

Safeguarding training is currently being reviewed in line with the 'Adult Safeguarding: Roles and Competencies for Health Care Staff (Aug. 2018) Intercollegiate Document. The new Safeguarding Adults and Children's Strategy for Training will be presented at the Internal Safeguarding Board in July 2019.

Datix Reporting Trends

The most significant increase in the categories of abuse is the reporting of self-neglect. This may be attributed to the safeguarding training which has reinforced the content in regard to self-neglect as it is one of the Dudley Safeguarding Adult Board's key objectives. Both of the ongoing Safeguarding Adult Reviews (SARs) feature self-neglect as does one of the Domestic Homicide Reviews (DHRs).

The most reported type of abuse remains 'neglect' and figures are consistent with the previous year. Financial abuse has also seen a significant rise from 18 to 36. Again there has been a review of the training in respect of financial abuse which may account for the increase.

Cases of concern relating to domestic abuse have reduced in the reporting 12 months and do not represent the national picture. In Dudley there are 1:4 women and 1:6 men who are known to be victims of domestic abuse (Home office 18/19). (Note figures for domestic abuse with children in the household are captured in the Children's Safeguarding report and women within the Maternity section of this report).

Case Study Three: A safeguarding concern was instigated regarding a young woman's vulnerability and allegations of her being financially, psychologically and emotionally abused by an overseas organisation. It was alleged that she was the victim of alleged scamming. There were also concerns she may be a victim of 'mate crime' by her neighbours. She became a frequent attender to the Emergency Department (ED) when things became too much for her.

During the course of the safeguarding enquiry several case conferences were held to share any new information / concerns or risks and to plan a way forward to enable protection and lower the risks for the victim. This ensured a robust and co-ordinated response across the key partnership to plan the interventions required. A robust multi-agency risk assessment was completed.

The victim, with consent was rehoused. She was encouraged to block the scammer's number.

Trading Standards worked with her to explore the scam further.

Integrated Plus worked with her to try and decrease the number of visits to the ED and a flag was put on her records to contact her worker when she attended ED so she could support the victim.

Healthwatch Dudley and Communication and Engagement

Healthwatch Dudley sits at Dudley's Safeguarding Board to remind partners of the importance of listening to real life experiences of abuse and neglect, to help them to continually improve local services.

As an independent organisation with a passion for involving local people in decision making, Healthwatch was invited by the Board to engage partners in a Communications and Engagement subgroup.

Work of the group does not replace the communications and engagement activity of individual organisations, rather it complements by providing a space for networking, sharing resources and collaborative working on safeguarding campaigns, all adding value to the important work of Dudley Safeguarding Adults Board.

Objectives for the Communications and Engagement Subgroup include:

- Agreeing key shared safeguarding messages to be promoted across the partnership
- Identifying and champion ways to keep people safe
- Increasing awareness of safeguarding adults in Dudley borough and how to report
- Involving adults at risk, carers and advocates in our work
- Being innovative on our approach by involving a diverse range of local people
- Ensuring our messages are shared in appropriate meaningful language

During the last financial year Healthwatch Dudley has continued to chair a group of creative thinking communications and engagement professionals, from a wide range of local organisations. The main focus has been to simplify safeguarding reporting processes for members of the public and professionals alike who use the online reporting system.

The group has organised reference groups of local people to discuss safeguarding language and barriers to raising concerns. Some of this work took place in a neighbourhood learning centre, giving members of the public computer access to properly review and test existing reporting systems. Through this session the group made recommendations that they felt would reduce the likelihood of alerts being abandoned due to the unwieldiness of the process. Further sessions took place with Communications Sub Group members who used this public feedback to review and improve the system of raising safeguarding alerts.

Recommended changes are in the process of being programmed and following a period of testing, the revised system will be launched in the coming year. It is anticipated that as a direct result of this work, people will be less confused or concerned about raising alerts and that there will be a marked increase in appropriate safeguarding referrals.

Dudley Trading Standards

The Dudley scams unit of 2.8 FTE officers is based in trading standards, part of the health & wellbeing division, and has been working since January 2018 to assist and support victims of scams and to raise awareness of scams amongst professionals and the wider community. The team is funded until August 2020 from the Better Care Fund and works closely with Adult Safeguarding and MASH. A key aspect of the work is visiting persons in the borough who are known to have responded to scams to prevent further financial loss and engage with appropriate services. Referrals are received from the National Scams team with approximately 20 priority referrals being received each month, in addition to approximately 460 people listed as previously responding to scams. Priority cases are elderly or otherwise vulnerable persons who are currently responding to scam mail.

Case Study Four: A typical example of a person supported is a case involving an 84 year old female, referred by the National Scams Unit as a priority referral. When visited, she advised that she had recently lost £200 to a scam involving a beauty product, where the company had repeatedly called her, convinced her to enter into fictitious prize draws and lotteries that required minimum orders and on occasion added unwanted items to her order. Despite being told repeatedly by family that she was being scammed she wouldn't hear of it and admitted she did not appreciate relatives interfering with how she chose to spend her money. She was grateful for the information provided by the scams officer and mentioned the benefit of hearing it from someone other than her family. She eventually disclosed that her losses which spanned over 20 years amounted to £60,000. She agreed to sign up as a scam marshal in order to help herself and others by sending off her scam mail to be analysed and assisting further scams prevention work.

Black Country Partnership NHS Foundation Trust

BCPFT have:

- Maintained consistent representation at DSAB and identified key personnel to attend the Board and subgroup meetings
- Refreshed internal training to bring it up to date and inclusive of local lessons learnt
- Refreshed their Training Needs Analysis again in 2018/19 to best reflect the training requirements within the Trust in line with the revised Intercollegiate Guidance
- Participated in multi-agency reviews in the year as identified through DSAB
- Supported Trust practitioners via the development and implementation of support and development sessions relating to safeguarding
- Incorporated Prevent training into the refreshed Safeguarding Training within BCPFT - in 2019/20 this is being further reviewed
- Worked with own Governance Assurance Unit to assure greater oversight of SARs and DHRs including responsible lead and timely safeguarding *input into the cases*

Safe & Sound (Dudley's Community Safety Partnership)

Safe & Sound and Dudley MBC's Community Safety Team have contributed to the adult safeguarding agenda through the work of Safe & Sound sub-groups, through commissioning of services and other initiatives. Some examples of this include:

- The Safe & Sound website with a range of help hubs for specific topics to support members of the public and professionals. (This also has links to the Safeguarding website) <https://www.dudleysafeandsound.org/help-hub>
- Victims/survivors of domestic violence and abuse have been safeguarded through MARAC. Dudley's MARAC has good outcomes for those whose cases are heard there. Support is provided through Dudley's Domestic Abuse Support Service as well as CHADD, depending on the victim's/survivor's needs
- Hate crime week activities took place to increase awareness of hate crime and reporting mechanisms
- Regional and Black Country wide bids have been successfully submitted to increase service provision and strengthen response.
- A domestic and sexual violence and abuse conference took place to raise awareness and share learning among practitioners and promote local services, including the Single Point of Contact
- A Prevent conference took place to update partners around current threat and risk, share learning and promote reporting mechanisms.
- Safeguarding through the "Safer Estates" meeting – a multi-agency problem-solving meeting focusing on calls for services in respect of public safety, welfare and ASB. Partners respond to underlying issues by working together to ensure individuals receive the support they need
- Work continues around rogue landlords to safeguard vulnerable individuals and enforce relevant tools and powers

Online Safety Subgroup

- The updated use of images guidance and consent forms has now been agreed, this is a document for both children and adults workforce.
- The 'online relationships' conference took place on February 8th. It was well attended and received positive evaluations. The event was planned with support from adult service users, in addition to the Youth Council. Members of Queens Cross Network created 4 films that were shown throughout the day.
- The adults 'online survey' received a total of 322 responses (see file below). Several actions have already been added to the 19/20 action plan in response to the survey and raw data is being looked at for any further significant results for the group to focus on
- The training offer for adults workforce is now being delivered
- Frauds and scams sessions took place on 26th February for members of the public. The sessions consisted of input from the illegal money lending team in respect of loan sharks, Dudley Trading Standards in respect of fraud and bogus callers, and West Midlands Police in respect of cybercrime and how to reduce the chances of becoming a victim of this. The sessions were extremely well received
- The Safe and Sound website "help hub" continues to be updated as appropriate. A specific online safety page is included in the help hub, with information and links for adults and those who work with adults included. <https://www.dudleysafeandsound.org/onlinesafety>

Modern Slavery

- The DMBC Modern Slavery Statement and Policy have been signed off at DMBC's Cabinet meeting on 25th October 2018. This has been uploaded onto the DMBC website as per statutory requirements
- The Modern Slavery and Human Trafficking (MSHT) local referral pathway has been agreed and has been ratified by DSAB and DSCB. This is available on the safe and sound website
- Communications went out during October to raise public awareness of MSHT (to coincide with national anti-slavery day), in addition the community safety team worked with the PCC's Office and the NHS on a 'mobile van' campaign to promote awareness of modern slavery among communities. This was part of a west-midlands initiative funded by the PCC.
- Following DMBC staff attending a regional 'train the trainer' day, initial awareness training in regards to modern slavery has taken place for Local Authority staff. Over 1000 staff received an input between September 2018 and March 2019, awareness sessions for voluntary, community, faith and business sector have also taken place. A number of ½ day training sessions for LA staff have also taken place. An online training package and future training roll out is being explored.
- The help hub page on the safe and sound website is regularly updated to ensure relevant information is available and accessible. This includes a link to a free online training course created by the Salvation Army, which is also being promoted as a resource <https://www.dudleysafeandsound.org/modernslavery>

Forced Marriage and Honour Based Abuse

- Forced marriage is a standing agenda item at Dudley's Domestic and Sexual Violence and Abuse Strategic Group.
- Awareness raising takes place locally a minimum of twice a year, in July to coincide with the national day and as part of the '16 days of action' comms in November
- Briefings have been circulated to schools before holiday periods
- The help hub page on the safe and sound website is regularly updated to ensure relevant information is available and accessible. This includes a link to a free online training course <https://www.dudleysafeandsound.org/forcedmarriage>
- Work continues regionally to ensure a consistent approach across the west midlands

Large Scale Enquiries

A large scale enquiry (LSE) is normally triggered where there are significant concerns and/or a high level of safeguarding activity in relation to adults at risk or where there is a complex concern regarding a number of adults at risk. Dudley MBC has a responsibility to coordinate the enquiry but responses are based upon multi-agency decision making. The process does not negate the need for individual safeguarding concerns to be addressed via the individual safeguarding process, and it is not a replacement for the management of individual concerns.

Examples of triggers for a large scale enquiry include:

- A number of adults at risk being allegedly abused resulting in significant harm or there being potential for significant harm (including people within a particular provider service)
- Receipt of collective concerns in relation to one service setting
- Concerns in relation to a service area of a high volume

- An individual safeguarding enquiry resulting in concerns that indicate that other individuals in the service are at risk of harm
- Receipt of a whistle blowing concern suggesting large scale concerns which suggest more than one suspected perpetrator or relate to custom and practice or a culture in a service that could result in harm to vulnerable adults
- Information received from professionals, the public, the Care Quality Commission, Clinical Commissioning Group, Police or another agency which suggests that the practices of a service are placing adults at serious risk of harm
- Where there may be multiple victims and one alleged perpetrator

A large scale enquiry planning meeting will be convened to discuss:

- Risks to adults using the service and whether immediate actions are required
- Capacity and consent issues
- Whether reviews of the adults in using the service are needed and who should undertake these
- The plan for the enquiry; to consider the level of the enquiry required, the proportionality of the response and identify the lead agency
- How the LSE will interface with any individual safeguarding enquiries that are ongoing
- The commissioning status and inform Care Quality Commission and neighbouring local authorities
- A communication strategy

A further LSE meeting will take place to draw together the strands of the enquiry. This meeting should:

- Review information gathered since the last meeting and the outcomes of enquiries
- Confirm whether any criminal prosecutions will be progressed
- Confirm an improvement plan and designate responsibilities with time scales
- Consider how improvement plans should be monitored
- Confirm the status of placements
- Confirm the status of the provider and any potential suspension of purchasing alongside commissioning
- Consider the status of the provider in respect of their CQC inspection and rating
- Confirm communication strategy with families, partners, and neighbouring authorities
- Confirm the current level of concern and whether the LSE needs to continue

Further meetings may be required depending upon the improvement plan and recommendations made.

Internal Audit

Internal auditing is an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes.

As part of the Council's Internal Audit Plan for 2017/18 a review of the Adult Safeguarding Board was undertaken to provide an opinion in the form of a level of assurance as to the adequacy and

effectiveness of controls that are currently in place to manage the risks identified for the review. An overall assurance rating of 'Reasonable' was provided. The audit report contained 3 high priority findings.

- Board Members are not asked whether they have any interests to declare at the start of a DSAB meeting and do not make an annual disclosure to confirm whether they have any interests in the work undertaken by the Dudley Safeguarding Adult Board (DSAB). Furthermore, the Membership Agreement and Confidentiality Agreement which Board Members are required to sign and return (in accordance with the DSAB Constitution) are not available.
- DSAB and Sub-Group meeting agendas and minutes are not always being circulated in a timely manner.
- There is limited partner data reported in the DSAB dataset report and it does not include trend analysis for all data reported. Furthermore, the dataset is reported to the DSAB on a half yearly basis and not more frequently.

In accordance with procedures agreed with Audit and Standards Committee, all High priority actions are followed up 6 months after the issue of the final report. The follow up work undertaken has found that the High priority actions have been completed.

Quality and Assurance

The Quality and Assurance subgroup has continued to undertake multi-agency audits to assure residents and DSAB that safeguarding practice within Dudley is safe. The sub group have also formatted an audit calendar to ensure focus is maintained on key areas throughout the year. This work is supported by a robust quality and assurance framework. As always there remains a desire for improving data collection which the sub group will continue to address through its activities and robust challenge of key partners.

The subgroup has maintained the identification of themes and trends for further investigation such as Making Safeguarding Personal (MSP). Through its activity of analysing and reviewing performance data the sub group has been able to explore areas that may have not otherwise come to light, such as the need to fully understand why a small percentage of enquires do not deliver MSP. Having analysed this small number it was clear that there were several facets to this that needed to be considered and accepted such as the presence of an acute organic illness in some cases did not able the person to express their wishes and as such it was a best interest decision.

The key objective for the subgroup is to provide a detailed analysis of the quarterly data to the Board to enable informed decision making to take place. To this end the subgroup is continuing to focus on developing an active dashboard which will enable analysis of up to date data. This is a significant piece of work that once completed will enable improved performance and assurance. The sub group is further tasked with updating and monitoring the risk registers in the following areas: QPSG Work Plan, DSAB Risk Register and Strategic Risk Register

Multi-agency Learning & Development/Training

The safeguarding learning & development strategy with increased joint working between DSAB and the Dudley Children's Safeguarding Board (DSCB) continues to evolve. A joint e-learning safeguarding awareness has been developed and is currently being tested. The booking and audit system PHEW appears to be working well, increasing access and recording the multi-agency staff levels of training. During 2018/19 training and learning was commissioned and delivered around: mental capacity; safeguarding basic awareness, safeguarding level 3; making safeguarding enquires; chairing strategy meetings and case conferences; financial abuse; self-neglect and hoarding; SARs lessons learned and e-learning Loneliness and isolation.

Deprivation of Liberty Safeguards (DoLS) and Deprivation of Liberty in the Community (CDoL)

Deprivation of Liberty Safeguards and Deprivation of Liberty in the community are part of a legal framework based in the Mental Capacity Act 2005.

DoLS ensures that people (18+) who lack the mental capacity to consent to their care arrangements in a care home or hospital are safeguarded if those arrangements deprive them of their liberty and are in their best interests. The care home or hospital send a referral to the Local Authority who commission a Mental Health Assessment and Best Interest Assessment and if agreed an authorisation of the DoLS can be granted for up to 12 months.

Deprivation of Liberty in the Community (CDoL) was introduced in 2014 and is a protection for people over 16 who are in supported living, extra care housing or in their own homes. A designated worker from the funding organisation completes an application to the Court of Protection and the court decides if they will grant an authorisation for up to 12 months.

In 2014 the threshold for a deprivation was significantly lowered by the Cheshire West judgement and the Supreme Court developed the "acid test" to see whether a person is being deprived of their liberty, which consisted of two questions:

- Is the person subject to continuous supervision and control?

And

- Is the person free to leave?

This continues to result in a large increase in referrals both locally and nationally. For example in Dudley there were 142 DoLS referrals in 2013-14; this increased to over a 1000 in 2018-19 and 95 CDOL. Significant steps have been implemented to meet this increased demand through specialist staff training and targeted resources.

A target piece of work to address to reduce the individual waiting for a DOLS assessment was undertaken utilising non-recurring Government funding. This completely eradicated the waiting list for assessment from 2017-2018. However, the challenge of meeting this increased demand remains high as does the local authorities commitment to proactively manage this statutory duty.

Safeguarding Adult Reviews

Under the Care Act 2014, local safeguarding adults boards (LSAB) have a statutory duty to carry out a Safeguarding Adults Review (SAR) when an adult with care and support in its area dies; and the Board knows, or suspects the death was as a result of abuse or neglect and there is concern about how the SAB, its members or organisations worked together to safeguard the adult.

The SAR process is designed to establish whether there are any lessons to be learnt from the circumstances of a particular case, about the way in which local professionals and agencies worked together to safeguard the adult at risk. The SAR brings together and analyses findings from investigations carried out by individual agencies involved in the case, in order to make recommendations for improving future practice where this is necessary.

There have been an unprecedented number of cases discussed as part of the SAR process. In the period of 1st April 2018 to 31st March 2019 a total of 17 cases were referred and reviewed.

Within this reporting period there were 1 Safeguarding Adult reviews commenced and three further reviews to be commissioned. The increased activity has significantly impacted on the Safeguarding teams' across all partner agencies and resources will remain a challenge during the coming year. However, it has been recognised during a peer review that the documentation both developed and established in Dudley is deemed to be of an exemplar standard and has been recommended for adoption across the West Midlands region.

Priorities for the SAR group for 2019-2020 will be:

- Reviewing Terms of Reference
- Focusing on the dissemination of learning from local SAR referrals and from regional and national SAR themes for improving practice.
- Our Board is committed to ensuring there is a far broader partnership of agencies engaged in championing safeguarding principles and ways of working across the borough
- We will continue to rise to the challenge of leading the safeguarding adult's culture change in Dudley and to make sure that our collective vision, values and culture translate into our frontline practice.

Case Studies

Case Study Five - Mr A age 85 has diagnoses of dementia, he was first known to us following a safeguarding concern in the community, he was brought to the Crystal Gateway initially with view to improving his personal care by offering a shower, this was successful and well received. Following this acceptance, we offered Mr A days at the centre he agreed to this and this enabled us to monitor Mr A both physically and emotionally, it also enabled family member opportunity to share any concerns they had in a safe neutral environment. Mr A continues to use the service.

Case Study Six - Safeguarding raised as report from service user A that a support vehicle driver had made inappropriate sexual advances and had visited client's home address. Telephone call made by safeguarding team member to the manager at Ring and Ride to make them aware of the allegation against one of their drivers. Notified that they would carry out their own investigation as well.

Notification received that the driver concerned was suspended impending full investigation. Police also involved as A is a vulnerable adult, crime number was given. After investigation by police no further action was to be taken as driver was interviewed by police. A's account had some inaccuracies in their statement, so there was not enough evidence to suggest all accounts occurred as they may have. No further action was taken but procedures under Person in Position of Trust were followed. .

Case Study Seven – The Enabling Community Support Team began visiting Miss S following a request from Access to look at day opportunities. It was clear from the first few visits that there was an issue with self-neglect as client living and sleeping on the sofa, refusing prompts from family to change clothes and was not taking medication. There was also an issue with mice in the property that client refused to address and was also hoarding magazines and papers. A safeguarding alert was completed and sent to the Multi Agency Safeguarding Hub (MASH). Following this MASH reviewed the alert but made the decision not to progress this.

We continued to visit to try and encourage the client to engage with us. We referred to Fire service for Safe and Well Check and liaised with Council contractors and the Housing Manager as client had no access to bathing facilities as could not get upstairs or turn on hot water supply and council had been trying to gain access to do both gas and electrical checks. Occupational Therapy had been to visit but offer of equipment had been declined.

A further Safeguarding was then raised by a District Nurse who attended the property. This safeguarding was then progressed and we continued to visit this client whilst awaiting a social worker from the Living Independently Team to be allocated. I had to chase the allocation and again report my concerns after seeing a mouse at the property when visiting. Client was eventually allocated a Social worker and we completed a joint visit. Social worker offered client support but this was declined.

Following this client did agree to some more help with cleaning and housework from the family. As she did not wish to explore day opportunities and had declined other offers of help the case was then closed to our team.

Case Study Eight - Mr M was referred to The Enabling Community Support Team by his social worker as needed help with reading letters/ bills due to difficulties reading and recognising numbers

following a stroke. During this time we supported Mr M with a move to sheltered accommodation and organising appointments as well as helping to sort through his paperwork and reading his post.

I raised a safeguarding after Mr M showed me his bank statement which showed a number of large payments being withdrawn over a short period. Mr M relied on friends to get money from the bank for him as he was unable to use cash machine as he could not put in pin himself. Mr M was unable to remember what had happened to this money withdrawn so safeguarding was raised and sent to the allocated social worker.

Following further investigations Mr M clarified what had happened with his money, he relies on the support of friends and is not concerned regarding his finances but enjoys having independence in this matter. . Mr M did not wish for the safeguarding to be progressed and there was no evidence to suggest any abuse. The Enabling Community Support Team continued to support Mr M until panel approved long term support to help him manage his finances and support with shopping and bills.

Case Study Nine - The Enabling Community Support Team has been supporting Mrs S since last year. Since that time she has had a diagnosis of dementia and in recent weeks has started having carers come in. On a visit to her a number of weeks ago I arrived to see a van parked outside the address and someone who appeared to be doing work to the cleaning/doing work to the roof of the property. I went in and spoke to Mrs S and asked what the workman was doing. She mentioned he was cleaning some stuff of her roof and filling in some things. I asked Mrs S who much she was being charged for this and she said £800. She consented to me going to speak to the workman so I could ascertain exactly what work he was doing and to confirm how much he was charging for this. On speaking to the workman he stated that he had been doing work to the neighbour's roof and that Mrs S had asked him to come around and do her roof. He stated he had done some work for her before. I asked how much he was charging and he stated £900. I went back inside and said to Mrs S that I needed to phone someone just to check how much this type of work should cost. Whilst my colleague was speaking to Mrs S I phoned Trading Standards. Trading Standards asked me to clarify some details over the phone such as registration plate and signage on vehicle and also whether Mrs S had been provided any paperwork. I spoke to Mrs S who advised that no paperwork had been given. Trading Standards then asked if we could wait at the property and someone from Trading Standards would attend. I advised Mrs S of this prior to their arrival but Mrs S stated this workman was very helpful and friendly and did a good job. Trading Standards then arrived and spoke to Mrs S and asked her some details as to what work was being done and the cost. They then went and spoke to the workman. Following this Trading Standards then came back in and advised Mrs S that what the workman was doing in terms of jet washing her roof could actually cause damage to the roof and what she was being charged for the other work was far in excess of what the cost of that normally should be. Trading Standards asked Mrs S if she would allow them to deal with the workman and any bill for costs up to that point would be forwarded to them for approval first. Mrs Smith agreed to this and Trading Standards then advised that the workman was now clearing up and would be leaving. Mrs S became upset by this as she still felt she should be paying the workman money for the work he had done so far. Trading Standards advised that if she felt she needed any work doing to the roof it would be best to get quotes and contact someone out the fix a home book. We asked Mrs S if we could call her Grandson who is the relative who visits her in order to make him aware of what had gone on. Mrs S agreed to this. Following our visit, we telephoned the Grandson and left a message explaining briefly the situation with the roof. Grandson did not call back and following discussions at the beginning of the following week, I felt a Safeguarding needed to be raised. I completed the internal safeguarding form on AIS and indexed the safeguarding form then work flowed a safeguarding request to MASH. MASH reviewed the safeguarding alert and also

spoke to me about what had gone on in our involvement with this client. Following this MASH decided to progress the case and this has now been sent to Living Independently Team to await allocation though LIT unable to provide timescale as to when allocation will take place. I have further contacted LIT as following visit by Care Assessment Team and case notes added following their visit it appeared that Mrs S may try and contact this workman again.

Our involvement with this case is now closed.

Case Study Ten - Mr A, an 83 year old gentleman, lived alone after his wife died many years ago; he and his wife had three children 2 of whom died young. Mr A served in the Royal Air Force and after the World War 2 he then worked as a motor mechanic. His hobbies included home brewing, he owned a number of dogs and was a keen musician often performing in clubs around the Black Country.

Concerns were raised about 3 years ago when some requests for food parcels had been made by a family member. Following enquiries being made it came to light that Mr A had accrued various debts such as with utility providers. It was evident that Mr A was not coping well at home and that he was showing signs of a dementia type condition as his memory was poor and was seemingly becoming confused about many things in his life and he was unable to manage his finances. Mr A had agreed to some domiciliary support services.

Concerns continued about his finances as it was suspected that a family member was accessing his bank account. The concerns increased when information came to light that Mr A no longer owned his home and that he became a tenant within his own home. An application to the Court of Protection resulted in an interim order being granted authorising Dudley MBC to investigate the circumstances of the alleged sale of his home. Dudley MBC was also appointed by the Court of Protection to act as Deputy for his property and financial affairs. Because of the issues around how the transactions were made Dudley MBC Trading Standards colleagues were also involved in the case.

Court Orders were also obtained to impose injunctions on a family member and the person who was the new owner of Mr A's house preventing them of having contact with Mr A. This Court Order was breached and DMBC pressed ahead in seeking redress about the injunction being breached and the person was sentenced to 4 months imprisonment.

Mr A was continuing to struggle to manage in his own home despite care services being arranged and he was steadily less inclined to have meals and his ongoing medication. Because of the increasing concerns and risks of dehydration and malnutrition a best interest decision was made with the GP and a residential care placement was arranged and Mr A agreed to accept the GP's advice.

In early 2019, further Court Hearings took place and the Court declared that the transactions involving the alleged sale of his house, making gifts to other people and him being made a tenant within his own home as being null and void. The reason for this decision was because it was accepted that Mr A lacked the mental capacity to make such major decisions. This meant that Mr A would have his house returned to his name. The Judge in the case was made aware, through social work reports, that Mr A used to have a number of dogs and the Judge further Ordered that Mr A should have a dog.

Since being at the care home, Mr A's general health improved well with him gaining weight and there was a big uplift in his mood and he has been thriving with regular company and stimulating activities. Regarding a dog, arrangements were made for a Pets as Therapy dog to resume visits to the home. Harry the whippet proved to be very popular with all of the residents within the care home.

Further Court Hearings took place and an application to the Court for a welfare Order, for Dudley MBC to be involved in determining where and how Mr A would receive his ongoing care and support, was successful.

As Mr A expressed a wish to see his relative, a request was made to Court for the injunction to be varied so that Mr A could have supervised contact with his relative thereby upholding his individual rights to have a right to family life.

Generally, Mr A has been thriving within the care home with regular care and support and socialising with other residents. Compared to when he was at his own home, he has been more relaxed and at ease and the visits from Harry the whippet have also contributed to his improved wellbeing.

Throughout the process, Mr A was supported by an Advocate from Dudley Advocacy so that his views could be taken account of. More recently, Mr A has been assigned a solicitor via the Court of Protection who can represent Mr A in any future legal proceedings.

The success of this case also demonstrated the joint working between colleagues across the Council especially such as our Legal Services, Money Management Team and Trading Standards.

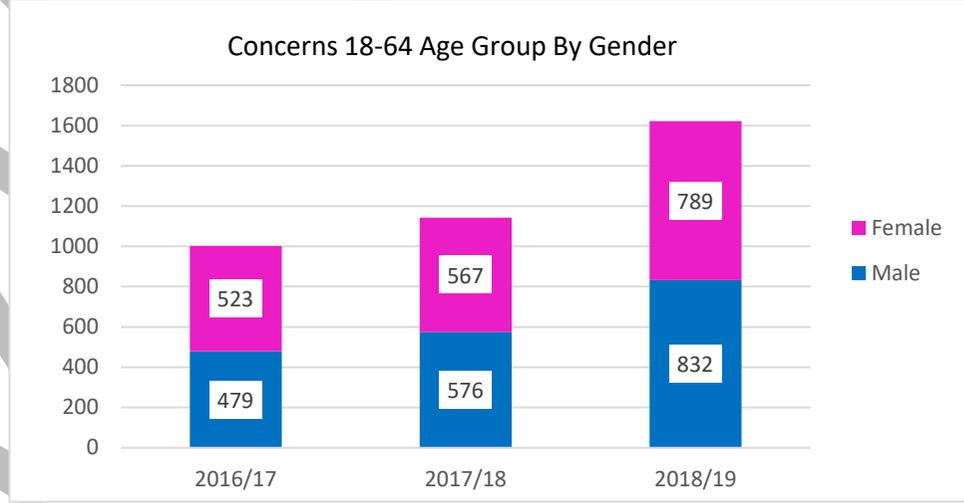
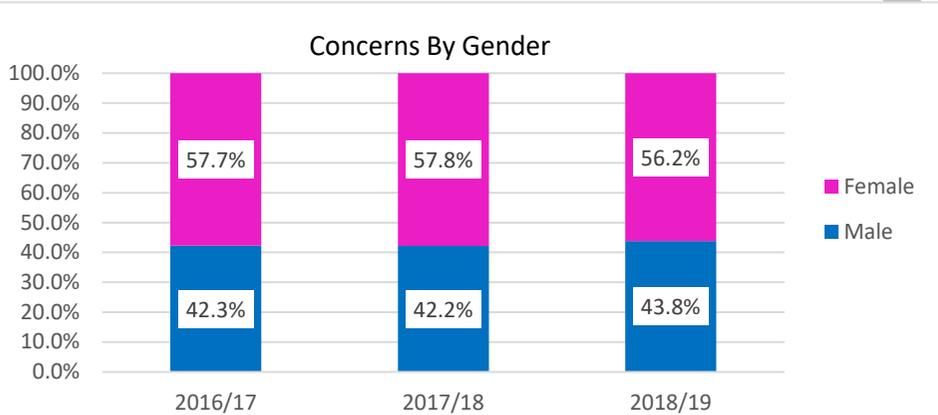
DRAFT

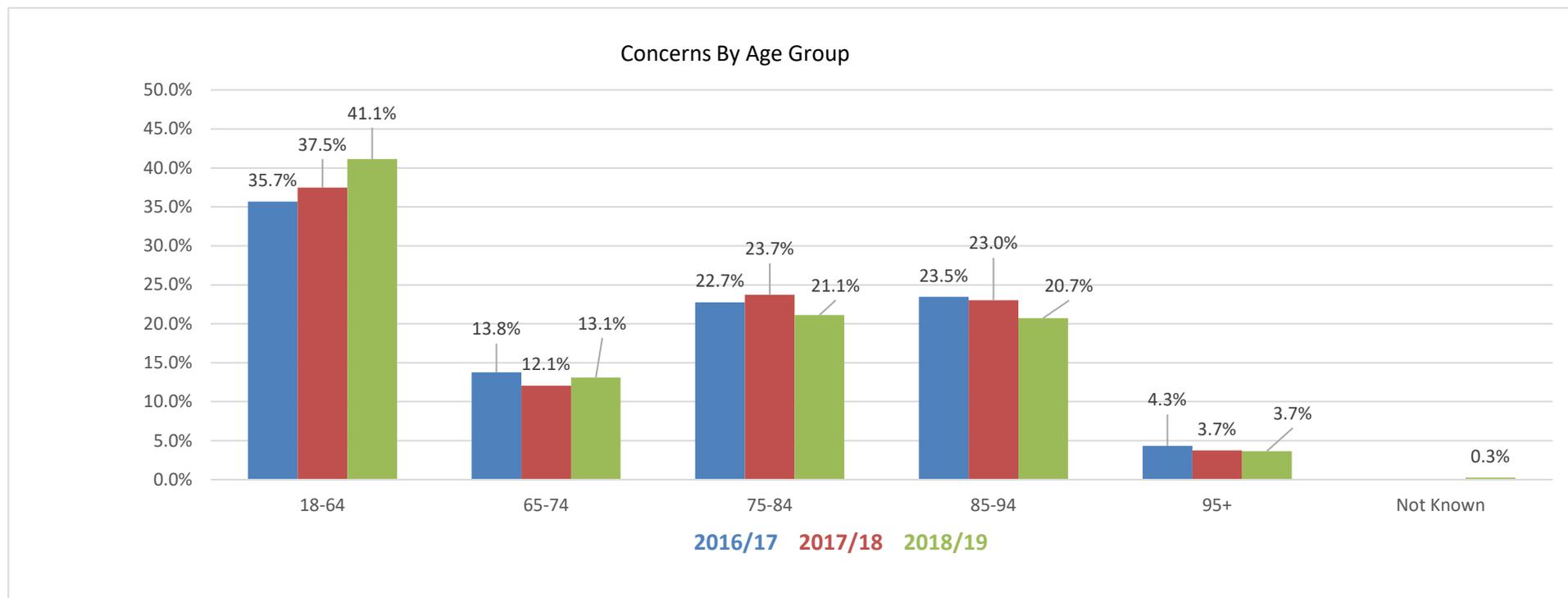
Performance data

Section 1 - Concerns and Enquiries

43 concerns were not recorded correctly/fully therefore were excluded from the submission. The most significant increase in concerns has been within the 18-64 age group. Which, when aggregated for each year by gender, males become the highest proportion during 2017/18 and increasingly so during 2018-19 where males formed 51.3% of all concerns which fell into the 18-64 age group. However, overall and consistently over the past 3 years, females continue to form the highest proportion of all concerns.

Year	Concerns	% Increase From Previous Year	Enquiries	Conversion
2014/15	1713		726	42.4%
2015/16	2091	22.1%	743	35.5%
2016/17	2809	34.3%	831	29.6%
2017/18	3051	8.6%	727	23.8%
2018/19	3941	29.2%	752	19.1%





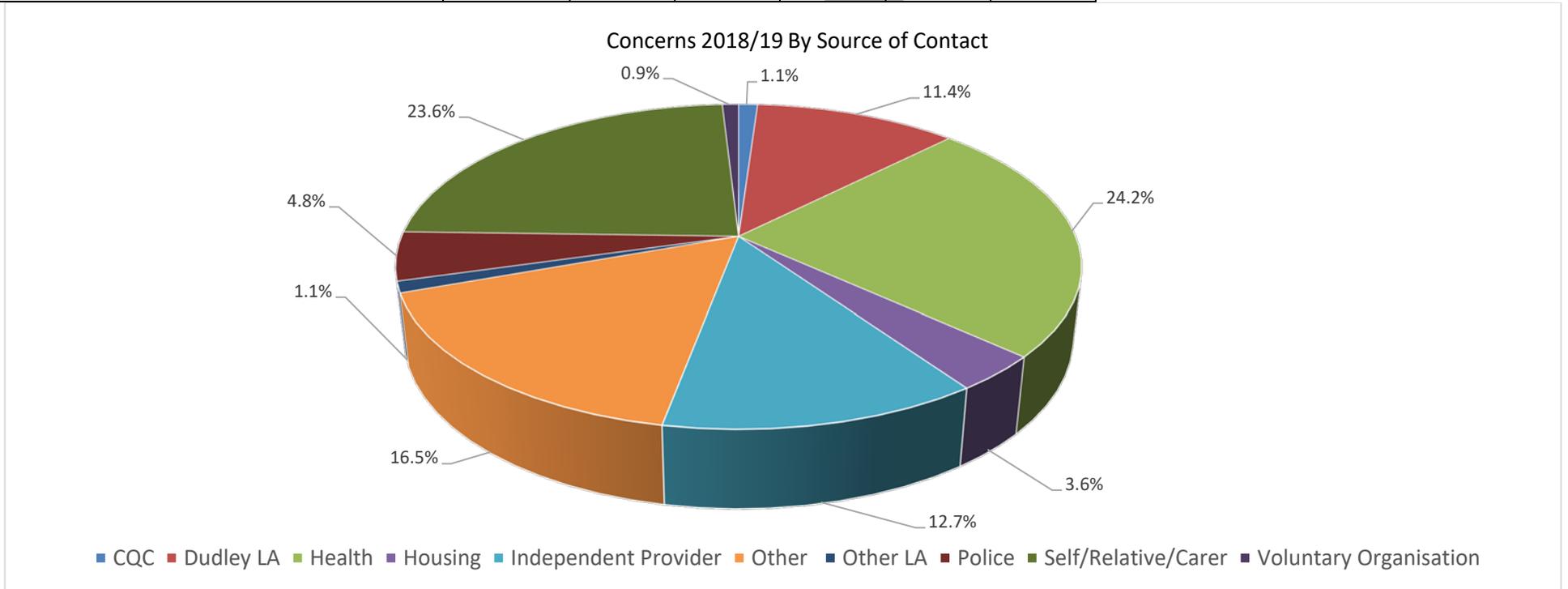
Concerns By Source

Concern Source	2016/17		2017/18		2018/19	
	No	%	No	%	No	%
Court	0	0.0%	1	0.0%	1	0.0%
CQC	63	2.2%	40	1.3%	42	1.1%
Dudley LA	512	18.2%	498	16.3%	450	11.4%
Education	2	0.1%	0	0.0%	0	0.0%
Health	619	22.0%	636	20.8%	955	24.2%
Housing	74	2.6%	87	2.9%	140	3.6%
Independent Provider	469	16.7%	465	15.2%	500	12.7%
Other	493	17.6%	484	15.9%	651	16.5%
Other LA	24	0.9%	24	0.8%	44	1.1%

The proportion of concerns received from Self/Relative/Carer source has consistently increased over the past 3 years with concerns from Dudley LA reducing and most other source types remaining constant.

DSAB Draft Annual Report 2018-19 V8

Police	96	3.4%	157	5.1%	191	4.8%
Self/Relative/Carer	425	15.1%	617	20.2%	931	23.6%
Voluntary Organisation	32	1.1%	41	1.3%	36	0.9%
Not Recorded	0	0.0%	1	0.0%	0	0.0%
Total	2809	100.0%	3051	100.0%	3941	100.0%

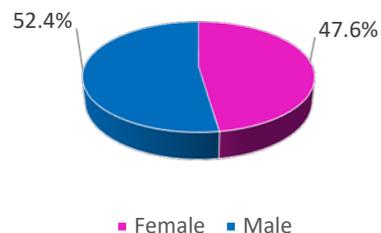


2018/19 Enquiries

The detail of what the enquiry consists of, e.g. abuse category, location of abuse etc., is not submitted in the SAC. Therefore the following is an analysis of 2018/19 data only. 9 incidents were not recorded fully/correctly although as no detailed data is required these could be submitted.

Enquiry Type	No	%
S42	638	84.8%
Other	114	15.2%
Total	752	100.0%

Enquiries By Gender

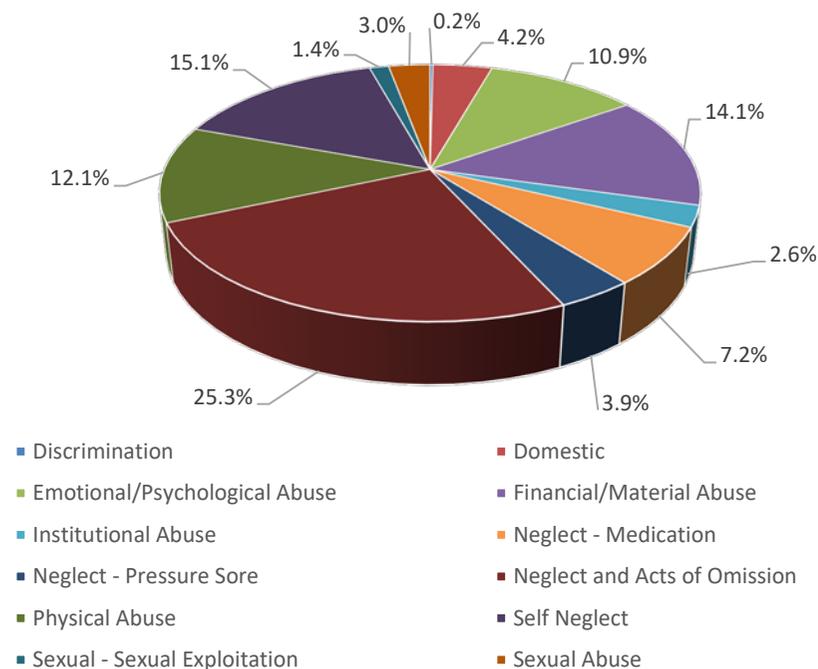


In direct contrast with concerns, where females formed the highest proportion at 56.2%, for enquiries this is reversed and males form the highest proportion at 52.4%

Gender	18-64	65-74	75-84	85-94	95+	Total
Female	118	50	90	81	19	358
Male	214	46	68	58	8	394
Total	332	96	158	139	27	752

Males form the highest proportion within the younger 18-64 age group (64.5%) and females within the older age groups, however, this could have a direct correlation with the general population overall in Dudley, where females form the highest proportion of older adults.

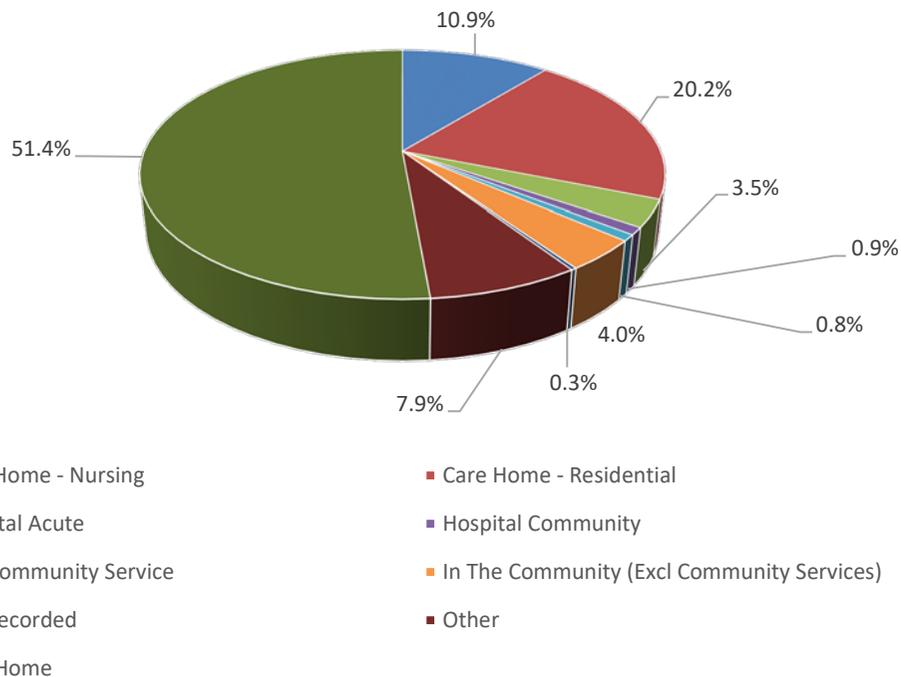
Enquiries By Category of Abuse



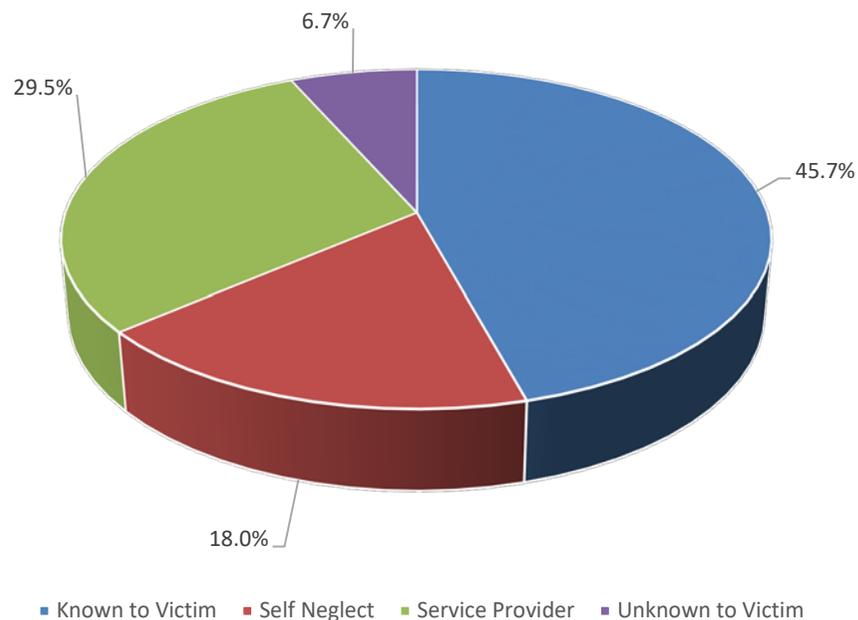
Abuse Category	Female	Male
Discrimination	0	2
Domestic	26	14
Emotional/Psychological Abuse	59	44
Financial/Material Abuse	58	76
Institutional Abuse	16	9
Neglect - Medication	32	36
Neglect - Pressure Sore	18	19
Neglect and Acts of Omission	115	125
Physical Abuse	53	62
Self Neglect	47	96
Sexual - Sexual Exploitation	10	3
Sexual Abuse	20	8
Total	454	494

As in previous reporting the combined categories of Neglect & Acts of Omission (which we have chosen to sub categorise) forms the highest proportion of all enquiries at 36.4%

Enquiries By Location of Incident



Enquiries By Alleged Perpetrator



As in previous reporting, the highest proportion of incidents occurred at the victims own home 51.4%. 52.9% of these incidents were for males. And 52.8% were recorded with an alleged perpetrator known to the victim. Overall, 45.7% of incidents were recorded with an alleged perpetrator known to the victim with 29.5% recorded with Service Provider as the alleged perpetrator. Of the records with a Service Provider recorded as the alleged perpetrator the majority were within a residential setting 37.6%, with 28.5% within the victims own home and 23.1% within a nursing setting.

Section 2 - Concluded Enquiries

Year	Concerns	% Increase/Decrease
------	----------	---------------------

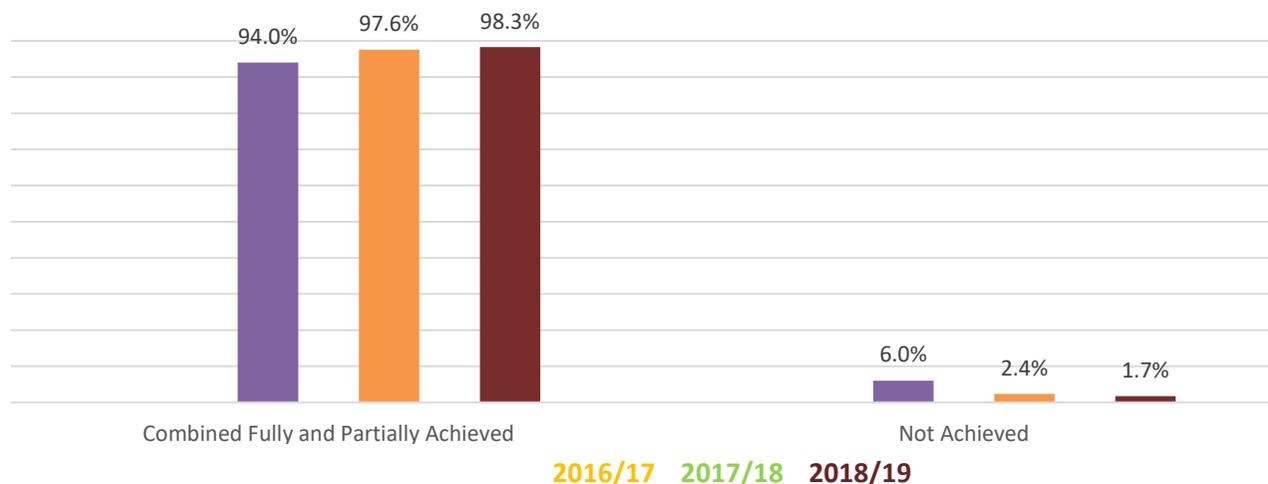
V7 Last amended 09.10.19

77 concluded enquiries had missing/incomplete data and therefore were not included in the submission which has resulted in a decrease of concluded enquiries compared with last year of 8%.

DSAB Draft Annual Report 2018-19 V8

		From Previous Year						
2014/15	567							
2015/16	529	-6.7%						
2016/17	625	18.1%						
2017/18	589	-5.8%						
2018/19	542	-8.0%						
MSP			2016/17	%	2017/18	%	2018/19	%
Outcomes expressed and fully achieved			374	80.4%	330	78.6%	341	84.6%
Outcomes expressed and partially achieved			63	13.5%	80	19.0%	55	13.6%
Outcome expressed and not achieved			28	6.0%	10	2.4%	7	1.7%
Outcome not expressed			34		50		35	
Not Asked			74		86		54	
Unknown if asked			52		33		50	
Total			625	465	589	420	542	403

Concluded Enquiries Where Outcomes Were Expressed



Performance for concluded enquiries where an outcome was expressed and fully achieved improved compared with the past 2 years submissions at 84.6% for 2018/19. Combining fully and partially achieved outcomes results in an overall performance of 98.3% continuing an upward improvement trend.

An element of risk was identified for 348 concluded enquiries. The risk was removed for 171 (49.1%) of these with 135 (38.8%) resulting in the risk being reduced. Of the remaining concluded enquiries, 28 ceased at the

DSAB Draft Annual Report 2018-19 V8

Risk Remained	53	13.3%	53	13.3%	42	12.1%
Risk Reduced	181	45.3%	190	47.6%	135	38.8%
Risk Removed	166	41.5%	156	39.1%	171	49.1%
Total	400	100.0%	399	100.0%	348	100.0%

