

## NORTH YORKSHIRE COUNTY COUNCIL

### CARE AND INDEPENDENCE OVERVIEW AND SCRUTINY COMMITTEE

2 FEBRUARY 2012

### NORTH YORKSHIRE SAFEGUARDING ADULTS BOARD ANNUAL REPORT 2010/11

#### **1.0 Purpose of Report**

- 1.1 To receive the Annual Report of the North Yorkshire Safeguarding Adults Board.

#### **2.0 Introduction**

- 2.1 North Yorkshire County Council has a duty to safeguard adults, to ensure that all vulnerable people can live their lives free from violence and abuse. Under the 'No Secrets' guidance (2000), NYCC has the lead responsibility to co-ordinate a multi-agency response to safeguarding and this is achieved through the North Yorkshire Safeguarding Adults Board.
- 2.2 Following its approval by the Board on 28 October 2011, the Annual Report was published on the safeguarding adults board page of the NYCC website [www.northyorks.gov.uk/pova](http://www.northyorks.gov.uk/pova). The report has also been considered by each of the Local Safeguarding Adults Groups and widely publicised through the distribution of key messages from the Board.
- 2.3 In 2010/11 the Board continued a very strong multi-agency approach to holding individual agencies to account and this is reflected in the Statement of Assurance from each statutory agency, published for the first time. These statements show how each agency is fulfilling key requirements with regard to safeguarding adults at risk of harm or abuse.
- 2.4 Each agency states that the Safeguarding Adults Board Annual Report is formally presented to their Executive Management Board or equivalent

#### **3.0 Role of Councillors in Safeguarding Adults**

- 3.1 All Councillors share a responsibility in relation to safeguarding those adults whose circumstances make them vulnerable and the best practice guidance on the role of the Director of Adult Social Services states:

*“Local authorities are advised to ensure that the lead member has a focus on safeguarding vulnerable adults and promoting a high standard of services for adults with support needs across all agencies”*

- 3.2 In addition to the key role of the lead member for adult social care, overview and scrutiny committee members are critical to ensuring that vulnerable adults are safeguarded.
- 3.3 The Chairman, supported by Group Spokespersons, has agreed that Members will be briefed on the report’s contents, but there will also be an opportunity to discuss and consider the wider Safeguarding agenda.

#### **4.0 Recommendations**

- a) Note the Annual Report of the Safeguarding Adults Board;
- b) Agree to receive further ongoing reports of progress;
- c) Remain aware of national developments and best practice.

**BRYON HUNTER  
SCRUTINY TEAM LEADER**

**County Hall  
NORTHALLERTON**

**25 January 2012**

**Background Documents: Nil**



## FOREWORD

Although I am sad to be saying goodbye to North Yorkshire, I am very proud to have chaired the Safeguarding Adults Board for the last three years and to see it develop in maturity and influence. My thanks go to all the representatives for their high level of commitment on behalf of their organisations and their contribution to the quality of safeguarding across North Yorkshire.

This year, the Board has continued a very strong multi-agency approach to holding individual agencies to account and this is reflected in the Statements of Assurance from each statutory agency, provided for the first time in this report.

I was pleased to see partnership arrangements strengthened this year when senior NHS representatives joined the Board, thereby reinforcing the key role that the NHS plays in adult safeguarding. During the coming year, the Board will aim to make those relationships even more meaningful by engaging with the shadow Health and Well Being Board and shadow GP Clinical Commissioning Groups for North Yorkshire.

Good safeguarding isn't possible without confident and experienced practitioners and local managers in each organisation. For this reason, training and awareness remains a key priority and has contributed to a significant increase in the number of safeguarding concerns reported. Since last year, reports have nearly doubled from 1062 in 2009/10 to 2085 in 2010/11, with over 500 from partner agencies: health, police, housing and the Care Quality Commission. The Board has agreed core competencies and set some very challenging targets for training delivery. This will remain a key focus for 2011/12.

At a local level, the Board has focussed on ensuring that each Local Safeguarding Adults Group is well attended, effective and accountable to the Board. Successful multi-agency practitioner workshops have been held throughout the year, offering opportunities for sharing learning and have brought practice issues to the Board's attention such as pressure care and information sharing.

Working together with care providers to promote dignity and safeguarding has been a critical theme throughout the year and it was satisfying to see this reinforced at the recent seminar for independent providers, organised with the Independent Care Group, with over 100 organisations represented. Focussing on safeguarding adults' processes from a provider's perspective, the interface with quality assurance and contracting and the new guidelines for investigating concerns in collective care settings, there were very mature discussions about current strengths and proposals for further improvements. There was a clear emphasis on acting proportionately and on involving the person who is at risk of harm and promoting their choice and independence. There was clear agreement that safeguarding was everybody's business.

For the year ahead, the Board is in a strong position to respond to recent government policy and guidance; continuing attention to leadership, protection, prevention proportionality, partnership and accountability and focussing even more closely on ensuring that we empower people and that they drive safeguarding processes and are increasingly able to keep safe and find effective resolutions to harmful or abusive circumstances.

Derek Law, MBE, Corporate Director – Health and Adult Services  
Chair – North Yorkshire Safeguarding Adults Board (2008 to 2011)



**NORTH YORKSHIRE  
SAFEGUARDING ADULTS BOARD**

**ANNUAL REPORT 2010/11**

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Appendix 1: Safeguarding Adults Board Membership

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**FOREWORD BY CHAIR OF SAFEGUARDING ADULTS BOARD**

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For the year ahead, the Board is in a strong position to respond to recent government policy and guidance; continuing attention to leadership, protection, prevention, proportionality, partnership and accountability and focussing even more closely on ensuring that we empower people and that they drive safeguarding processes and are increasingly able to keep safe and find effective resolutions to harmful or abusive circumstances.

**Derek Law, MBE, Corporate Director – Health and Adult Services  
Chair – North Yorkshire Safeguarding Adults Board (2008 – 2011)**

## 2.0 National Developments in 2010 – 11

Safeguarding adults remains a high priority nationally and this annual report should be viewed in the context of a number of national developments.

**Government policy statement on Adult Safeguarding** (May 2011) articulates six principles to benchmark local safeguarding adults' arrangements, the outcomes associated with their application and to consider progress. These principles were also used in draft police safeguarding adults' guidance and in best practice guidance for the NHS. They are:

**Empowerment:** presumption of person led decisions and informed consent.

**Protection:** support and representation for those in greatest need.

**Prevention:** it is better to take action before harm occurs.

**Proportionality:** proportional and least intrusive response appropriate to the risk presented.

**Partnership:** local solutions through services working with their communities.

Communities have a part to play in preventing, detecting and reporting abuse and neglect.

**Accountability:** accountability and transparency in delivering safeguarding.

The government also announced that the current statutory guidance, **No Secrets**, will remain in effect until 2013.

**Advice Note for Directors on Safeguarding Adults** (ADASS April 2011) reaffirms that a basic task for Directors is safety from harm and exploitation and that safeguarding people's rights is seen as fundamental. This is intrinsic to personalisation just as personalised approaches are intrinsic to effective safeguarding.

**Best practice guidance for NHS** (March 2011) In response to the "No Secrets" review, the Department of Health issued guidance for senior managers and their boards, commissioners and practitioners, outlining responsibilities of each group. The guidance is framed in the context of the six safeguarding principles [See above] and confirms:

- The commitment to patient choice, control and accountability includes support and protection for those in the most vulnerable situations.
- Safeguarding adults is a core responsibility to delivery of effective health care.
- Safeguarding is integral to patient care.
- Health services have a duty to ensure the safety of all patients but must provide additional means for patients who are less able to protect themselves from harm or abuse.
- Prevention from harm and abuse can be promoted through the provision of high quality care.
- Effective responses to allegations of harm and abuse and that are in line with organisational, clinical and multi-agency procedures are expected and essential.
- Using learning to improve service to patients.

**Law Commission Review** - recommended the most far-reaching reforms of adult social care law seen for over 60 years, in a report published in May 2011. The Commission's recommendation for a single, clear, modern statute and code of practice would pave the

way for a coherent social care system. For the first time older people, disabled people, those with mental health problems and carers will be clear about their legal rights to care and support services. Local councils across England and Wales will have clear and concise rules to govern when they must provide services.

The new statute would include an overarching well-being principle, which includes safeguarding adults wherever practicable. It would provide clearly that local social services authorities have the lead co-ordinating responsibility for safeguarding. As part of that responsibility, the statute would place a duty on local authorities to investigate adult protection cases or cause an investigation to be made by other agencies, in individual cases. The duty to investigate would apply to an adult at risk rather than a vulnerable adult.

An adult at risk must appear

- To have health or social care needs
- To be at risk of harm
- To be unable to safeguard themselves from harm

Additionally the local authority must believe it is necessary to make enquiries.

**Governance of Safeguarding Adult Boards** - The new statute (see above) would also give local authorities a duty to establish and maintain adult safeguarding boards which would be placed on a statutory footing for the first time and must comprise representatives from Social Services, NHS and the Police.

The statutory functions for these boards would be to:

- Review safeguarding practice and procedures
- Provide information and advice
- Improve skills and knowledge
- Commission serious case reviews

In May 2011, the Care Services Minister announced that the government would move to put Safeguarding Adults Boards on a statutory footing. It is expected that the Boards will be shaped by the recommendations of the Law Commission review and the findings of Department of Health commissioned research on governance arrangements and self neglect (SCIE reports 45 and 46, published 2011)

**There are a range of key national and regional initiatives that the Board will keep under review in taking forward its work programme in 2011/12. they include**

- **NHS changes** covered in the Health and Social Care Bill, including the establishment of Clinical Commissioning Groups and Health and Wellbeing Boards.
- **Munro Report** on the reform of the child protection system.
- **Review of Winterbourne View** commissioned by Department of Health following the shocking revelations of abusive practice exposed by BBC Panorama.
- **Protecting adults at risk: London multi-agency policy and procedures to safeguard adults from abuse** - published by SCIE in January 2011 (Report 39), this sets out London's multi-agency policy and procedure to safeguarding adults and is viewed



as good practice guidance for safeguarding adults' boards across the country.

- **Vetting and Barring Scheme** – government review published February 2011. The government has made it clear that until all the appropriate legislation has been introduced and the new arrangements are established, the existing responsibilities of employers and the ISA remain. (The Protection of Freedoms Bill will restrict the scope of the 'vetting and barring' scheme for protecting vulnerable groups and make changes to the system of criminal records checks)
- **Domestic Homicide Reviews** - Section 9 of The Domestic Violence, Crime & Victims Act 2004, came into force in April 2011 and states that Domestic homicide reviews should be carried out to make sure lessons are learned when a person has been killed as a result of domestic violence (domestic homicide).

### 3.0 Local Developments in 2010/11 and Planned Priorities for 2011/12

#### 3.1 Safeguarding Adults Board

##### Summary of achievements during 2010/11

###### Practice Leadership:

- Continued high level commitment by partners on Board and on sub groups; additional sign-up from NHS providers.
- Sustained increased reporting of safeguarding across all agencies, target well exceeded.
- Improvements in strategic and practice leadership driven by strengthened performance framework.
- Protocol for collective care settings adopted by Board.
- Operational guidance in place in all statutory agencies.
- Strengthened practice leadership with establishment of Health Partnership Group (Safeguarding) and practice sub group. Established shared protocol on reporting pressure ulcers under safeguarding.

###### Strategic Leadership:

- Improved level of attendance at Local Safeguarding Adults Groups.
- Training plans in place in majority of statutory agencies.
- Successful rollout of multi-agency Local Safeguarding Adults Workshops across the county by the Safeguarding Team. 15 events in total (from February 2010 to April 2011)
- Adoption of safeguarding training competencies
- Training for safeguarding minute takers and adoption of minute takers guidance.
- Routine arrangements in place for capturing/sharing practice learning through practitioner briefings and sharing issues by Safeguarding Team.
- Adoption of strategy for Community Engagement and Communication.
- Established framework for User Influence (service user feedback/networks and consultation)
- Increased number of referrals for Independent Mental Capacity Advocates
- Established clear requirements for individual agency responsibilities for safeguarding, including commissioners – through Statements of Assurance.

- Improved connections with the community safety agenda through the Safer Communities Partnership, Hate Crime Task group and Domestic Abuse Joint Action Group.

### **Performance summary**

In this first full year of the performance framework, it has been a very powerful tool for managing the Board Development and Improvement Plan and resulted in significant progress in practice and strategic leadership. The framework was established by the Board and used to maintain a clear focus on core priorities. Monitoring was carried out by the Board Implementation Group, with a lead from a Board champion.

Overall the Board reached all the targets set for practice leadership and is in a good position to sustain a high level of practitioner confidence in the coming year. Evidence shows that the Board has made good progress with the priorities set and practice is now of a good standard. Assurances have been given by the statutory partners that operational procedures and processes and training plans are in place, with clear organisational structures and responsibilities for safeguarding. The Board will put in place regular reports on key performance areas as part of ongoing quality assurance processes; ensuring that lessons from cases are used to assist in informing good practice.

For strategic leadership, measures put in place to improve governance have been successful, with clear accountabilities and effective reporting arrangements. Local Safeguarding Adults Groups have sustained good levels of attendance and are bringing issues forward to be resolved and lessons learned. This will be strengthened during 2011/12.

There was significant progress on training targets with the majority of agencies having a training plan in place (86%). Targets for training delivery were more challenging and will form a three year plan up to March 2013. At March 2011, three agencies had fully achieved the target of 95% relevant staff trained to Level 1 Alerter. Another 12 organisations reached a level of 30% or more relevant staff trained to Level 1 Alerter and others have basic awareness training in place.

With regard to user influence in safeguarding, the Board set the groundwork by developing strategies for involving service users at an operational and strategic level and for communication and community engagement and there was some useful progress in some areas. However, the Board recognised that there was more to do to make user influence a reality. Consideration of this priority was a key theme of the Board Development Day in July 2011 and will be carried forward into 2011/12.

## Development Plan for 2011 - 13

The Development Plan was developed by the Board at a workshop in July 2011, facilitated by the Board's independent advisor (Sue Fiennes). Based on consideration of key themes nationally and regionally and a review of progress of the Board to date, the priority outcomes for the Board are;

### Practice Leadership

- Practitioner competence in safeguarding processes remains at a high level
- Lessons from cases are used to assist in informing good practice.

### Strategic Leadership

- Good sound governance
  - Independent Chair in place
  - Governance arrangements
    - Management of change/risk management/transition assurance
    - Contribution of members clarified
    - Connections and links in place to maximise the multi-agency impact of safeguarding
  - Scope and delivery of Local Safeguarding Adults Groups remain critical to ensuring accountabilities and practitioner/integration arrangements at a local level.
- User voice informing development of safeguarding adults work
- People in the local community know what to do if they are concerned about adult abuse or neglect in the community

## 3.2 Individual Partner Agencies

### 3.2.1 Statutory Agencies: (Refer to Appendix 2)

### 3.2.2 Independent and Voluntary Sector

#### Independent Care Group (ICG)

##### Achievements 2010/2011

ICG has fed back to the Board and North Yorkshire County Council the concerns of providers on safeguarding investigations in North Yorkshire. As a result of this the Council held a large Safeguarding Seminar allowing providers' concerns to be raised and all matters relating to safeguarding alerts and investigations to be discussed and ICG commended the Council on this approach.

During the year ICG

- Has promoted the free safeguarding training run by the County Council and free e-learning training available on-line, and is a member of the North Yorkshire and York

Safeguarding Training Group.

- Worked with the Safeguarding Adults Board to monitor activity and encourages providers to make sure their staff are trained to the appropriate level - for example, each organisation should have at least one responder trained to level 2.
- Keeps members up to date with changes to CRB checks and information on the role of the Independent Safeguarding Authority.
- Makes sure that people know about the North Yorkshire Multi Agency Policy and Procedures.
- Sends out Trading Standards alerts which concern vulnerable people.

### **Planned Priorities for 2011/2012**

ICG looks forward to reviewing with the Council the outcomes of the Safeguarding Seminar and will continue to work with the Council to ensure that safeguarding procedures are proportionate, consistent and fair. We will keep providers up to date on the progress of the Protection of Freedoms Bill which will affect the portability of CRB checks.

### **North Yorkshire and York Forum (NYYF)**

#### **Achievements during 2010/11**

Joint work to promote awareness of safeguarding issues within the voluntary, community and social enterprise sector has continued during 2010/11. In the period to March 2011, 1186 people from the voluntary sector accessed training (Level 1 - 343, Level 2 - 121, Alerter Champions - 53, Cascade training from champions - 669). At present it is not possible to extract information on how many different organizations have accessed training.

Safeguarding training has been promoted through North Yorkshire and York Forum's email networks, Forum Focus magazine and training programme information, backed up by website information on safeguarding which has been accessed over 1,000 visitors during the year. This includes the opportunity to download the model safeguarding policy and procedures for voluntary and community sector organisations.

North Yorkshire and York Forum also provides monthly training sessions on use of its Disclosure Service, which includes discussion of safeguarding issues and is a requirement for new organizations accessing the Disclosure Service. Those who register with the service have access to training and information to ensure that they keep up to date with developments and good practice. 10 training courses were delivered to 56 new authorised signatories. During the year the Service provided up to date information regarding legislative requirements, the role of the Independent Safeguarding Authority, the review and re-model of the Vetting and Barring Scheme and interim arrangements.

### **Planned Priorities for 2011/2012**

- Continue to increase awareness and access to training for voluntary sector staff and volunteers
- Target for increasing uptake of training by voluntary sector organizations to be set.
- Baseline to be set for number of alerts from voluntary sector organizations as an indicator for level of awareness of safeguarding issues in the voluntary sector

(once this information has been included in alert process).

- Provision of further workshop to support organizations to adopt model policy and procedures
- Programme of information sessions at existing voluntary sector network meetings to take place Autumn/Winter 2011/12 - to include consultation on further information and training needs.
- Review of voluntary sector representation on Local Safeguarding Adults Groups to be completed alongside this.

## 4.0 SAFEGUARDING ACTIVITY IN 2010/2011

### 4.1 Introduction

There has been a significant increase in safeguarding alerts. For the year 2010/11 this is 2065, compared to 1062 for 2009/10, which is an increase of 94 %. This demonstrates continued progress in the awareness of reporting processes amongst partners and the community. Alerts from MAPP partners have increased by 104%. This clearly demonstrates the success of the ongoing awareness programme promoted by the Safeguarding Adults Board.

#### Performance targets

Target for 2010/11	Outcome
Increase in number of alerts of 50%	This target was well exceeded with an increase of 94%
Increase in number of alerts from MAPP partners (Health, Care Quality Commission, Criminal Justice and Housing) of 30%	This target was well exceeded with an increase of 104%
Thresholds – 45% - 55% of alerts progress to referral (that is action taken under the safeguarding procedures) (range taken from Benchmarking done against comparator authorities in the AVA national data collection (09/10))	49% alerts progress to referral (this is within the range)

### 4.2 Data Collection

Data on safeguarding adults (SA) work is collected through two forms, introduced in March 2009: SA\_A, the multi-agency alert/referral form and SA\_E, the form through which outcomes are monitored. These were reviewed and re-issued in April 2010.

From October 2009, new national requirements in data collection were introduced to ensure that the process is consistent with the expectations set out in *Information and Guidance on the Abuse of Vulnerable Adults Collection (AVA)* (The Health and Social Care Information Centre March 2009). This guidance was introduced to improve the quality and consistency of data nationally.

Once the data results for 2010/11 are analysed on a national basis, the Board will carry out analysis to determine patterns and trends for North Yorkshire.

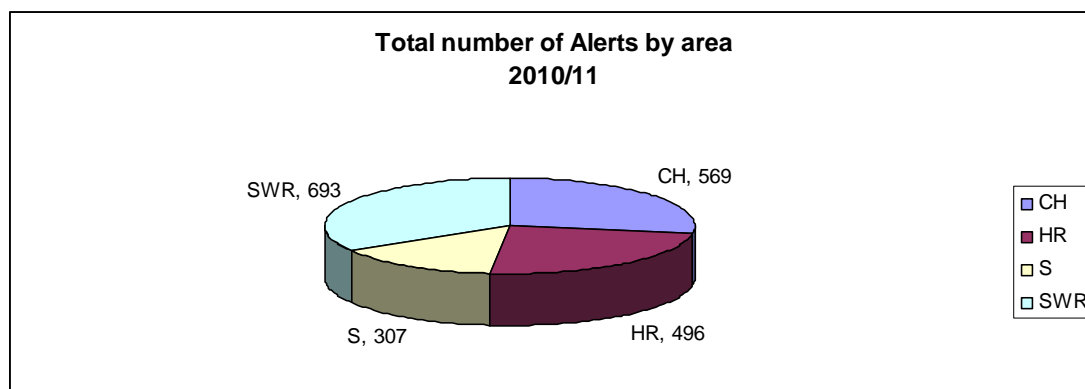
**ALERTS****4.3 Number of alerts by area**

There has been a significant increase in the level of alleged abuse that has been reported across North Yorkshire, with 2065 alerts reported during 2010/11 compared with 1062 alerts reported during 2010/11, 383 in 2008/9 and 298 in 2007/8.

Of the 2065 alerts made, just under half (1011), that is 48% progressed to a safeguarding referral when there was a strategy discussion or meeting.

The number of alerts varies across the county, from 307 in Selby (S), to 496 in Hambleton/Richmondshire (HR), 569 in Craven/Harrogate (CH) and 693 in Scarborough/Whitby/Ryedale (SWR).

**Fig 1: Total number of alerts by Area**

**4.4 Alerts by Service User Group**

The majority of alerts involve people who have dementia (30%) who are frail or have temporary illness (19%) learning disability (18%) or physical disability (14%).

The majority are older people aged 65 and over (70%) with a large proportion of people aged 75 and over (59%) and 85 and over (35%).

For younger adults (aged 18 to 64) the majority of alerts concern people with learning disability) 17%) with very few relating to people with physical or sensory impairment (5%) or Adult Mental Health (6%).

Fig 2: Alerts by Service User Group

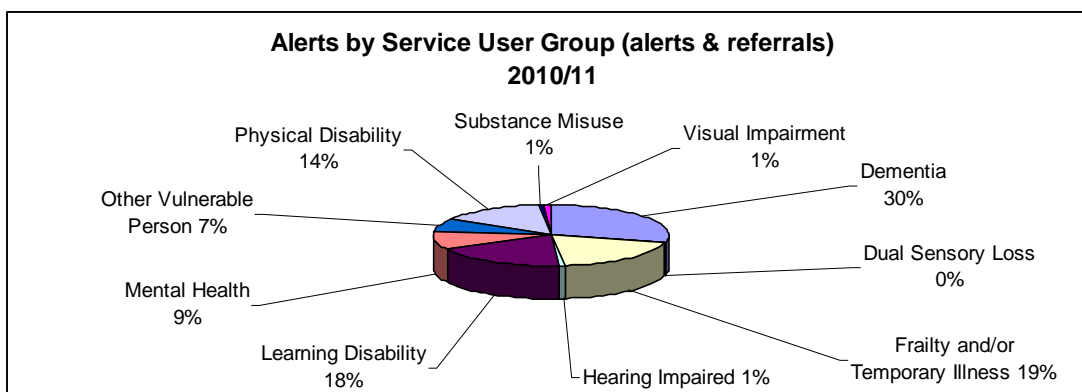


Table 1: Alerts by Service User Group

	Percentage
Older people (aged 65 to 74 )	11%
Older people (aged 75 to 84 )	24%
Older people (aged 85 and over )	35%
Learning disabilities (aged 18-64)	17%
Physical/sensory disability (aged 18-64)	5%
Adult mental health (aged 18-64)	6%
Other (aged 18-64)	2%

4.5 Gender and Ethnicity

Consistent with the national picture, there are many more referrals for women than for men, with 64% of referrals concerning women.

The figures show that 98.7% referrals relate to people with White British and other white backgrounds, with the remaining 0.4% relating to other ethnic origin. This is a similar pattern to general referrals to Health and Adult Services (NYCC).

Table 4: Ethnic origin of vulnerable adult.

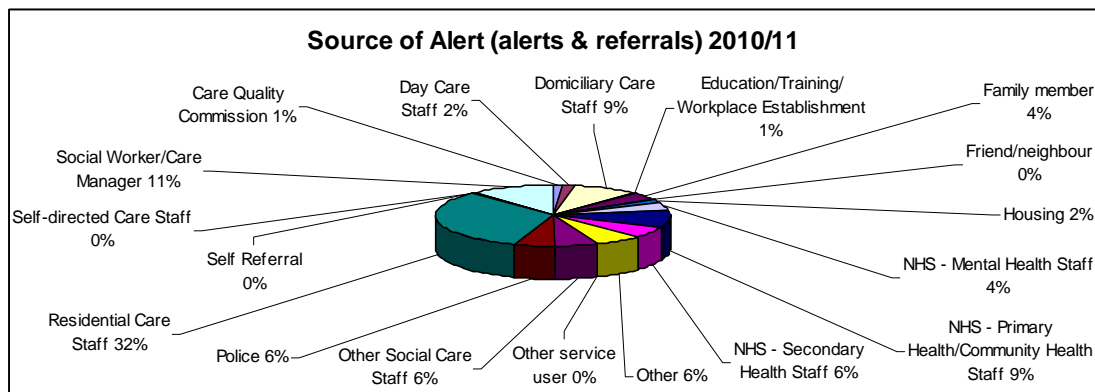
Ethnic origin	
White	98.7%
Asian	0.1%
Black	0.1%
Other	0.2%
Not stated etc	0.8%

4.6 Source of Alerts

The data shows that the majority of alerts are made by residential, domiciliary, day care or social care staff.

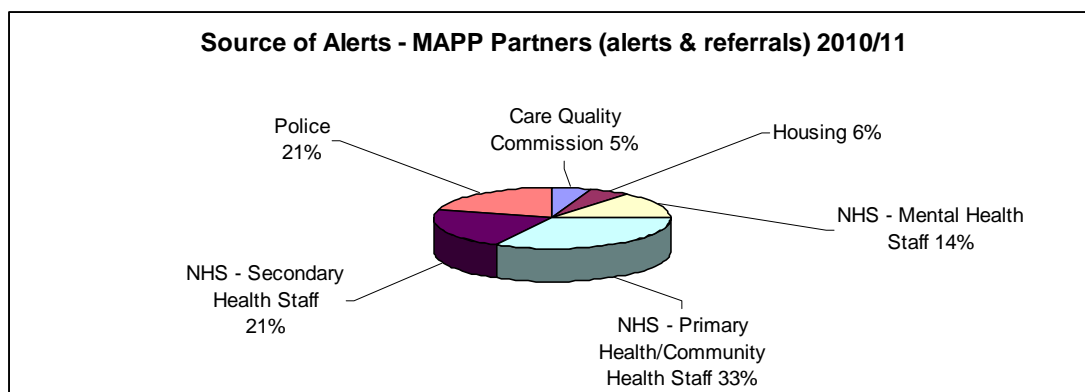
- Residential, domiciliary and day care staff (43%)
- Social care staff (17%).
- Safeguarding partners (MAPP) (28%),
- Family, neighbours and friends (4%)

Fig 3: Source of Alert (alerts & referrals)



Alerts from MAPP partners have increased by 104% since 09/10 – from 278 to 563 and represent 28% of all alerts.

Fig 4: Source of Alerts – MAPP Partners (alerts & referrals)

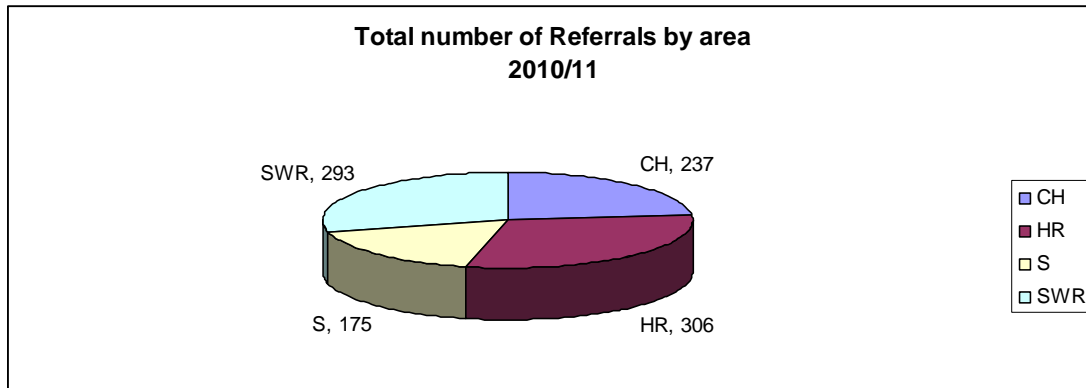




REFERRALS

4.7 Number of referrals

Fig 5: Total number of Referrals by Area



The number of referrals varies across the county, from 175 in Selby (S), to 237 in Craven/Harrogate (CH), 293 in Scarborough/Whitby/Ryedale (SWR) and 306 in Hambleton/Richmondshire (HR).

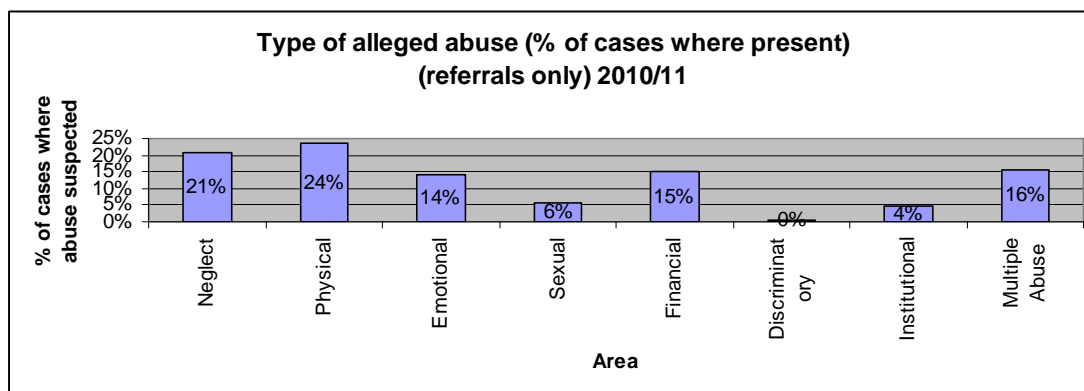
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Target for 2010/11	Outcome
<p><b>Thresholds</b> – 45% - 55% of alerts progress to referral (that is action taken under the safeguarding procedures) (range taken from Benchmarking done against comparator authorities in the AVA national data collection (09/10))</p>	<p>49% alerts progress to referral (this is within the range)</p>

#### 4.8 Types of Abuse

Of all the referrals, the majority involve allegations of physical abuse (24%) or neglect (21%) and financial abuse (15%). A high proportion involves allegations of more than one type of abuse (16%).

**Fig 6: Types of abuse**

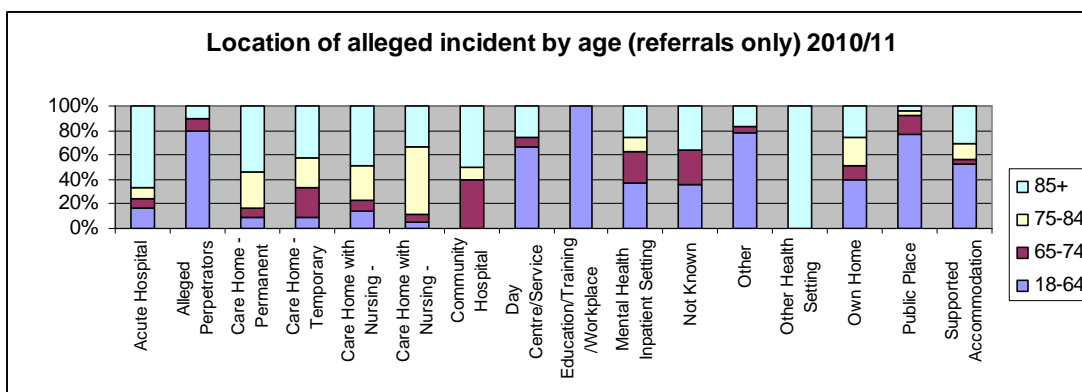


#### 4.9 Location of Alleged Incidents

Nearly all referrals in 2009/10 were related to incidents at home or in residential or nursing care. Incidents in a person’s own home accounted for 37% of all referrals, with 49% in residential or nursing care. Others include health settings (3%) and supported accommodation (2%). Together these account for over 90% of all referrals.

**Fig 7** shows the location of alleged incident by age and indicates that the majority of concerns in acute hospitals, care homes and community hospitals involve older people, particularly those aged 85 and over. The majority of concerns in public places, alleged perpetrators own home, day centres and services, education, training and workplace involve younger adults. Locations where there is a more even distribution of younger and older adults include mental health inpatient setting, own home and supported accommodation.

Fig 7: Location of alleged incident by age

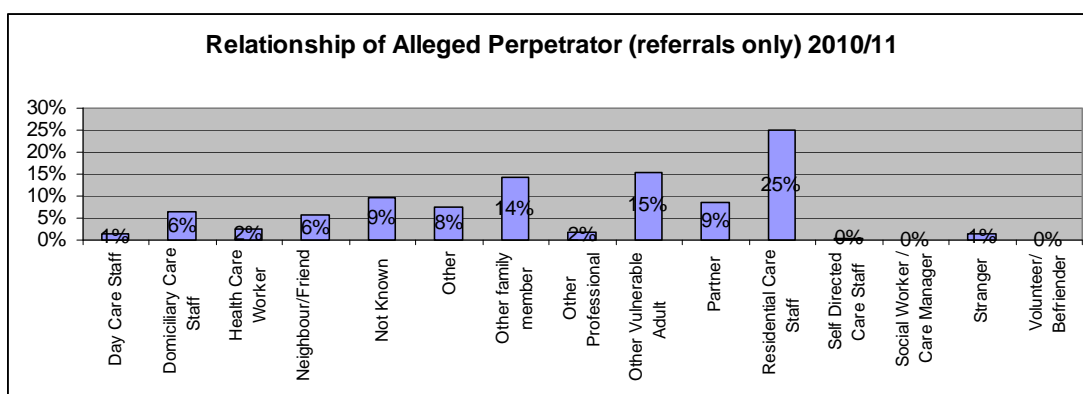


4.10 The Form Of Relationship Between the Alleged Victim and Perpetrator

The largest single group involves alleged abuse from residential care staff (25%). This reflects a number of referrals during the year in collective settings. Other staff (domiciliary, day care, social work, health care and other professional) made up another 11%.

Other substantial groups involve alleged abuse by partner (9%), other family members (14%) and other vulnerable adults (15%).

Fig 8: Relationship of Alleged Perpetrator



COMPLETED REFERRALS

4.11 Outcomes for completed referrals (Investigations)

- Form SA\_E seeks details on the outcomes of investigations in completed cases, for both the alleged victim (vulnerable adult) and the alleged perpetrator.
- In the majority of cases, outcomes relating to safeguarding will be in addition to a

community care assessment to determine other support needs.

- Of the total number of referrals during 2010/11 – 79% were completed during the year.

**4.12 Outcomes for the vulnerable adult**

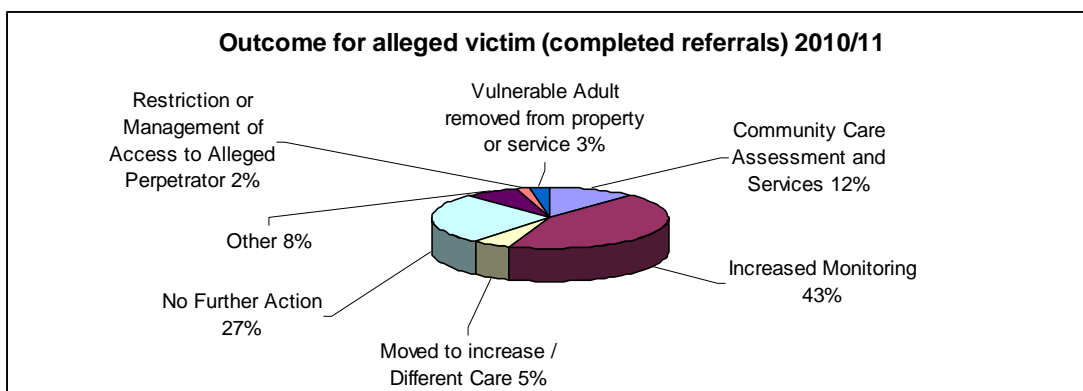
Whilst there will be a large range of possible outcomes, they fall broadly into three areas:

- Cases where no further action is judged necessary.
- Those where work is carried out to ensure a person’s safety by supporting them to move to a different environment.
- Those where other action is taken to safeguard the individual, such as an increase in services or active monitoring of circumstances.

In a quarter of cases (27%), no further action was taken after investigation. Where action was taken, the most common activities were:

- Increased monitoring – 43%
- Arranging a community care assessment or some form of review – 12%.
- Supporting the person to move to a safer environment or restriction of access to alleged perpetrator – 5%.
- An increase in services/different care – 5%.
- Vulnerable adult removed from property or service – 3%
- Restriction or management of access to alleged perpetrator – 2%

**Fig 9: Outcome for alleged victim (completed referrals)**



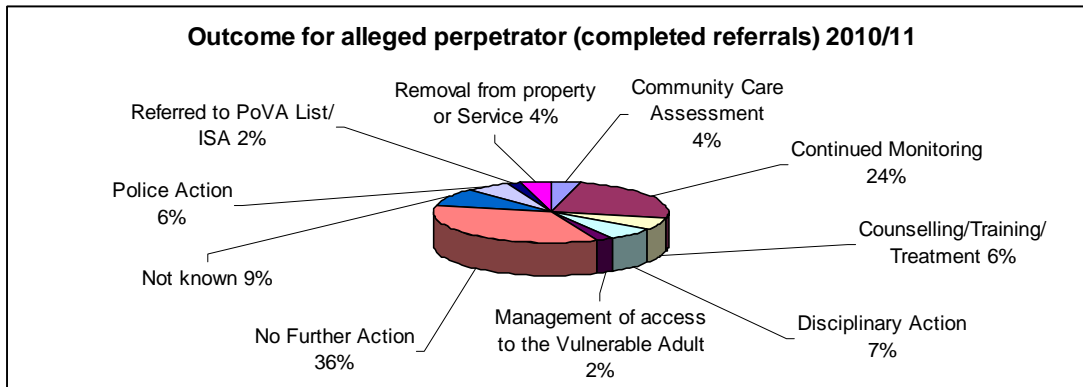
**4.13 Outcomes for the alleged perpetrator**

In over a third of cases (36%), no further action was taken after investigation. Where action was taken, the most common activities were:

- Continued monitoring – 24%
- Disciplinary Action/ Referral to Registration Body/POVA list/ISA – 9%

- Police action/criminal prosecution/formal caution - 6%
- Removal from property or service – 4%
- Community Care assessment – 4%
- Counselling/Training/Treatment – 6%
- Removal from property or service – 4%
- Management of access to vulnerable adult – 2%

**Fig 10: Outcome for alleged perpetrator (completed referrals)**



## 5.0 Safeguarding Learning and Development for 2010 - 11

### 5.1 Training Delivery

Safeguarding training remains a key element in the development safeguarding practices. The same number of alerter and responder/referrer courses were offered for 2010/11 as in 2009/10, however attendance on courses was lower than previous years, which is probably due to having reached the majority of commissioned care providers in previous years.

The uptake of e-learning, which is the recommended route for those who have limited and infrequent contact with vulnerable adults, and also is the refresher for those who have undertaken the classroom course, has significantly increased as illustrated in the table below. The Safeguarding Alerter Champions, i.e. those who act as alerter trainers in other organisations following attendance on our Champions course, continue to play a key role in the alerter training and will do so during 2011/12.

A summary of the training attendance is illustrated in the table below:

Course	2009/10 Outturn		2010/11 Outturn		+ / -
Level 1: Alerter classroom - including alerter delivered by cascade trainers	<b>3869</b>		<b>3333</b>		- 536
	<i>PVS</i>	2425	<i>PVS</i>	1880	
Level 1: 'Kwango' E-learning module	<b>329</b>		<b>2372</b>		+ 2043
	<i>PVS</i>	90	<i>PVS</i>	909	
Overall summary for Alerter classroom and e-learning					+1507
Alerter Champions 'Train the Trainer'	<b>95</b>		<b>99</b>		+ 4
	<i>PVS</i>	66	<i>PVS</i>	84	
Level 2: Responder / Referrer	<b>444</b>		<b>458</b>		+ 14
	<i>PVS</i>	163	<i>PVS</i>	215	
Level 3: Investigator	<b>75</b>		<b>81</b>		+ 6
Level 4: Chairing	<b>32</b>		<b>28</b>		- 4
Minute Taking	<b>0</b>		<b>55</b>		+ 55

**Performance targets**

<b>Target for 2010/11</b>	<b>Outcome</b>
<b>All statutory agencies to have a training plan in place</b>	There was significant progress on this target. 19 out of 22 agencies had a plan in place (86%).
<b>All statutory organisations to train 95% of relevant staff to at least Level 1: Alerter.</b>	Target closely monitored throughout the year. At March 2011, three agencies had fully achieved the target. Another 12 organisations reached a level of 30% or more relevant staff trained to Level 1 Alerter and others have basic awareness training in place. Performance linked to decision made by Board on competencies.

**5.2. The Multi-agency Training Sub Group**

Chaired by the Manager of the Workforce Development Unit, Health and Adult Services (HAS), this group brings together all the training managers from the statutory organisations, for example, Primary Care Trust, Fire and Rescue, Police and District Councils and also representation from the Private and Voluntary Sector.

This group meets 4 times per year. Activity within this sub-group is closely aligned to the Safeguarding Adults Board Implementation Group (BIG), targets have been set by the Board for this group to achieve in relation to statutory organisations having a robust training plan and to achieve 95% of staff trained to Alerter level by March 2011. These targets have given the group clear focus and commitment to the requirements. The group have monitored progress against these targets, most organisations have a training plan in place and there is still progress to be made against the 95% trained to alerter level 1. Significant progress has been made in relation to the engagement of statutory organisations especially from health and district councils. The Board also agreed a set of competencies for the levels of responsibility within the safeguarding process.

Significant progress has been made with other areas of the development within this group, for example:

- Training materials have been shared widely between statutory organisations, for example: sharing of Alerter and Responder/Referrer materials with Health, Police and Fire and Rescue
- The PCT representatives have set up their own Health Partnerships training group which brings together all Acute Health settings to ensure the profile of Alerter training is raised within this forum.
- Investigator and Chairing training commissioned by WDU has also been accessed by Health partners.
- In addition to training provision and management of the safeguarding training sub group the workforce development unit managed the Making Safeguarding Real conference in April 2010 and a safeguarding seminar, for over 100 providers in the Private and Voluntary sector, in April 2011.

### 5.3 Training Available

There is a variety of core safeguarding adults training programmes available:

- Basic awareness (delivered by the 4 Safeguarding Officers)
- Alerter – face to face
- Alerter – e- learning using a KWANGO package
- Alerter Champions – ‘Train the Trainer’ Alerter course
- Referrer/Responder
- Investigator
- Chairing
- Minute taking

A minute taking course for staff involved in Safeguarding meetings was commissioned from an external organisation for a number of key ACS staff. This resulted in the adoption of Minute Takers Guidance by the Board. The course has since been delivered by an in-house Senior Development Officer as a rolling programme for ACS staff who undertake safeguarding adults minute taking duties as part of their role.

The Investigator programme is now co-delivered by Workforce Development Units Senior Development Office and the Police, this commenced as a pilot in December 2010 and plans are in place to deliver 8 sessions of this 2 day course during 2010/11.

### 5.4 Plans for 2011 - 12

- **Review of Training Group** - The terms of reference will be reviewed so that there is an executive group (which includes City of York Council colleagues) which meets twice a year to monitor progress against the targets. In addition there will be a new group formed to focus more on training provision, especially alerter and responder training. It will be a conduit to communicate developments in relation to safeguarding practice to people who are delivering training on behalf of the Safeguarding Adults Board to ensure trainers keep up to date and training remains fit for purpose. It has also been agreed that links will be made to the MCA/DOLs training arrangements.
- **Safeguarding Alerter Champions** - i.e. those who act as alerter trainers in other organisations following attendance on the Champions course, will continue to play a key role in the alerter training and will do so during 2011/12. Further support will be provided to the champions to enable them to deliver quality training.
- **Chairing training** – This programme was reviewed during 2010 and designed to meet designated safeguarding competencies. There are 6 scheduled 2 day Chairing courses for 2011/12 and all managers who undertake the role of Designated Safeguarding Manager within Adult Social Care Operations will be required to undertake this revised course during 2011/12.
- **Investigator training** – this programme is now co-delivered by Workforce Development Units Senior Development Office and the Police. Started as a pilot in December 2010, plans are in place to deliver 8 sessions of this 2 day course during 2011/12.
- **Performance** – continue to monitor and develop relevant performance targets on behalf of the Board.



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<b>6.0</b>	<b>Progress on 2010 – 2011 Improvement and Development Plan</b>
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North Yorkshire Safeguarding Adults Board

Improvement and Development Plan 2010/11  
PEOPLE SAFE

KEEPING

**Mission: Working together to keep vulnerable adults safe from abuse and mistreatment and to sustain independence in safe environments**

**Practice Leadership**

	AIM	OUTCOMES	MEASURES (performance targets)	PROGRESS/EVIDENCE
<b>1</b>	Ensure operational guidance within organisations and across the partnership is fit for purpose	<p><b>Clarity of professional/practitioner roles/contribution.</b></p> <p><b>Confidence in process and help to keep people safe.</b></p>	Operational Guidance in place in agreed organisations- signed off at Executive/Board Level. <b>(100% statutory agencies with operational guidance in place)</b>	<b>22 out of 22 have ops guidance in place (100%).</b>
			LAA target ASP17 - performance information	Excellent progress against target for 2007-2011. Number of referrals at March 2011 = 3875 (compared with target of 1043 for full period)
			<b>(Increase in number of alerts from April 2010 to March 2011 = 50%)</b>	<b>Exceeds target for period. Increase in no. of alerts = 96%</b>
			Practitioner Survey to wider sector practitioners (Level 2). <b>(Level of practitioner confidence as evidenced by survey = 70%)</b>	<b>Target exceeded (80%).</b> Action Plan from practitioner survey approved December 2010.

2	Ensure that thresholds for concerns/responses and pathways are clear	Clarity on focus of who is helped and how when a 'safeguarding concern' is raised	Performance on information analysis/ Alerts not becoming referrals. ( <b>Proportion of alerts that progress to safeguarding referrals = 45% to 55%</b> )	Proportion of alerts that progress to safeguarding referrals is 49% for period April 2010 to March 2011. Benchmarking done on national data collection (09/10) suggests target range of 45% to 55%. <b>Current performance falls within that range.</b>
			(Increase in number of alerts from MAPP partners = 30%)	Exceeds target for period April 2010 to March 2011. Increase in no. of alerts from MAPP partners = 104%
			Quality Assurance from 'supervision' and audit	Ongoing in individual agencies. Multi-agency case file audits with expert advisor continue. Safeguarding audit tool - in use from Nov 2010.
			Case file audit process in place in LSAGs	See above - process to be considered by Practice sub group (established June 2011).
3a	Ensure that the serious case review procedures give scope for reviewing significant case concerns	Learning Lessons from Serious Concerns	Lessons learned Protocol adopted by Board	Lessons learned - draft protocol tested in two LSAGs. Report to Board Implementation Group(BIG) June 2011. To be considered further by Practice sub group.
			(Lessons learned from serious cases disseminated to Local Safeguarding Adults Groups (LSAGs) and sub groups)	Board considered lessons learned from Darlington SCR & disseminated lessons to LSAGs and sub groups May 2010. Process for disseminating lessons to be considered further in 2011/12.
3b	Ensure clarity about pathway links in the operational guidance in relation to clinical/H&S/SUI/rootcause analysis	Clarity on roles/contribution in procedure	Appears in operational guidance	Protocol for collective care settings adopted by Board October 2010. Issues with regard to hospital settings/link to clinical governance/SUI considered by Health Partnership Group and Board May 2011.

4	Ensure that risk management in complex cases has a protocol for escalation agreed by the Board in case of dispute	<b>Clarity of Problem Solving and Resolution</b>	Collective Care Settings Protocol in place and implemented	As above - 3b. Protocol for collective care settings adopted by Board October 2010. Issues with regard to hospital settings/link to clinical governance/SUI considered by Health Partnership Group and Board May 2011.
1	<b>Improved Governance</b>	<b>Good sound governance, including a clear focus on work and accountabilities and practitioner/integration arrangements at local level</b>		
1a	a) Review the agreed governance test for the Board and partnership		<b>a) (Key items on checklist in place and signed off at Executive/Board = 50% in place)</b>	<b>Performance = 58%.</b> Kept under review by policy and procedures sub group. BIG to consider further action/link with LCSB audit where possible.
1b	b) Accountability of local groups		<b>bi) (Level of attendance at LSAG meetings by agreed representatives = 75%) bii) Work Plans of sub groups and LSAGs</b>	<b>(bi) Performance = 65% at Feb 2011.</b> Action taken by Board and %improved. Actively monitored by LSAGs and Board. bii) Action Plan for 2010/11 approved by BIG Sept 2010.
1c	c) Effectiveness of Board Implementation Group		c) Resolution of issues raised by LSAGs	BIG Issues log adopted March 2010. Issues raised are actively addressed by Board/BIG e.g. pressure care.
2	Develop a training and practice learning strategy on a multi-agency basis with focus/target groups and performance measures on quality	<b>Improving access to training and practitioner confidence in SA work</b>	Action Plan in place to include:-	
			<b>a) (% statutory agencies with a Safeguarding Training Plan in place = 100%)</b>	<b>Performance = 86% March 2011.</b> Performance management co-ordinated by Training Group.
			<b>b) (% statutory agencies where 95% of relevant staff are trained to at least Level 1 Alerter = 100%)</b>	<b>Performance March 2011 = 14%.</b> Monitored by Training Group. Linked to decision made by Board on competencies - Jan 11. Agreed that target should be fully met by March 2013, i.e. 3 year training plan.

			c) Practitioner Briefings - multi-agency	Rolled out to each LSAG area. Co-ordinated by Safeguarding Team. Report to Board May 2011.
			d) Routine arrangements in place for capturing/sharing practice learning	Learning from Practitioner briefings reported to BIG for further action. Safeguarding Team - regular peer supervision and active management of issues log. Practice notes to be issued by April 2011.
			e) Review and evaluate training materials at all levels	Safeguarding Minute takers guidance approved by Board Oct '10. L1 & L2 refreshed and approved. Evaluation of L3 - refreshed TNA, inhouse by Dec '10. L4 evaluation underway.
3	Ensure robust arrangements for user involvement in the work of the Board	<b>User voice informing development of Safeguarding Adults work</b>	Collate views on how involvement should be achieved from user feedback a) From vulnerable people who have experience of the safeguarding pathway and b) From existing user groups/Partnership Boards  <b>(Process in Place for seeking views from vulnerable people)</b>	<b>Some processes in place but not yet embedded.</b> (a) Semi structured interviews by SAM from Sept '10 & survey developed to gather views from all people who have experienced safeguarding (b) Contact made with user groups/partnership Boards by Safeguarding Officers. Community Engagement/Communication Plan adopted by Board Jan 2011. Presentation given to PSI PB March 11
4	Ensure that the advocacy capacity of safeguarding arrangements is developed	<b>Ensure user voice on safeguarding plans and outcomes is clear and recorded</b>	a) <b>(Increase in IMCA referrals = 20%)</b>	<b>Performance = 269% at March 2011.</b>
			b) Increase referrals re safeguarding to existing advocacy organisations	Performance monitoring to be established by BIG.

5	Review commissioning and contracting arrangements across the partnership to ensure that the wider safeguarding agenda is integrated	<b>Safeguarding Adults policy is embedded in all arrangements</b>	100% of commissioned services (by ACS, SP and PCT) have effective safeguarding policy and procedures in place as evidenced by the appropriate Quality Assurance Framework	Board agreed Statement of Assurance and Performance management Jan 2011. Ongoing work includes joint safeguarding/contracting meetings in HAS. Supporting People reviewed safeguarding policy and procedures against QAF. PCT introduced commissioning standards compliance for all providers.
6	Ensure links between the Board and Safer Communities is evidenced	<b>People feeling safe and keeping safe in communities (free from discrimination and harassment)</b>	SAB reporting to Community Safety Partnership on performance and development (to inform business planning).	SAB report to Safer Communities partnership group Sept '10. Statement re commitment to SA included in community strategy.
			Evidence of preventative work on disability harassment and hate crime	Safeguarding Adults represented on Hate Crime Task Group set up by NYSP from Sept '10
			Evidence of preventative work on domestic abuse	Safeguarding Adults included in workstream of Domestic Abuse Strategy Action Plan overseen by NYSP. SAB represented on Domestic Abuse Joint Action Group.
7	Ensure that there is an effective media and communication strategy	<b>People in the local community know what to do if they are concerned about adult abuse or neglect in the community</b>	<b>Level of citizen awareness as evidenced by public survey results = 70%</b>	Community Engagement/Communication Plan adopted by Board. <b>Citizens' survey planned for NYCC Citizens panel deferred to August 2011 (baseline awareness).</b> Board agreed media campaign - small task group developing guidelines on message and methods.

<b>7.0</b>	<b>2011 2q– 2013 Development Plan</b>
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North Yorkshire Safeguarding Adults Board

Development Plan 2011/13

**KEEPING PEOPLE SAFE**

**Mission: Working together to keep vulnerable adults safe from abuse and mistreatment and to sustain independence in safe environments**

<b>Practice Leadership</b>
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	<b>OUTCOME</b>	<b>MEASURES</b>
<b>1</b>	Practitioner competence in safeguarding processes remains high.	Routine paper to Board on quality assurance and governance (including data on thresholds and training)
<b>2</b>	Lessons from cases used to assist in informing good practice.	Board feedback and understanding. Routine paper on Quality Assurance with feedback from <ul style="list-style-type: none"> <li>• Effective Practice sub group</li> <li>• Multi-agency case audits</li> <li>• Quality assurance and audit systems</li> </ul>

<b>Strategic leadership</b>		
	<b>OUTCOME</b>	<b>MEASURES</b>
<b>1</b>	Good sound governance	

	OUTCOME	MEASURES
	<ol style="list-style-type: none"> <li>1. Independent Chair in place</li> <li>2. Governance arrangements               <ol style="list-style-type: none"> <li>a. Management of change/ risk management/transition assurance</li> <li>b. Contribution of members clarified</li> <li>c. Connections and links in place to maximise multi-agency impact of safeguarding.</li> </ol> </li> <li>3. Scope and delivery of LSAGs remain critical to ensuring accountabilities and practitioner /integration arrangements at a local level.</li> </ol>	<ol style="list-style-type: none"> <li>1. Successful recruitment of Independent Chair</li> <li>2. Pending appointment of Independent Chair – peer review/audit of governance arrangements</li> <li>3. Recommendations coming forward and Board response. (part of routine report on performance and Quality Assurance)</li> </ol>
2	User voice informing development of safeguarding adults work.	<p><b>Board to set targets for 2012/13 from</b> views on how involvement should be achieved from user feedback;</p> <ol style="list-style-type: none"> <li>a) From vulnerable people directly affected by safeguarding through quality assurance and surveys.</li> <li>b) From existing user groups/partnership boards.</li> <li>c) Existing roles – e.g. Health watch and non exec police commissioners.</li> </ol>
3	People in the local community know what to do if they are concerned about adult abuse or neglect in the community.	Communication and marketing strategy



**NORTH YORKSHIRE SAFEGUARDING ADULTS BOARD  
MEMBERSHIP 2010/11**

Organisation	Designation
North Yorkshire County Council, Health and Adult Services	Corporate Director
	Executive Member
	Head of Self Directed Care and Transformation
	General Manager
	Senior Development Officer
	Safeguarding Adults Manager
	Safeguarding Adults Policy Officer
	Strategic Commissioning Manager, Supporting People
North Yorkshire County Council, Trading Standards	Head of Fraud and Financial Investigations Unit
North Yorkshire County Council, Children's Social Care	Head of Safeguarding
North Yorkshire Safeguarding Children Board	Safeguarding Children Board Manager
North Yorkshire Police:	Assistant Chief Constable & DCI Protection of Vulnerable Persons Unit
Crown Prosecution Service	Chief Crown Prosecutor
York and North Yorkshire Probation Trust	Area Manager (Public Protection)
NHS North Yorkshire and York	Director of Nursing
NHS North Yorkshire and York Community and Mental Health Services	Associate Director Mental Health
Tees Esk and Wear Valleys NHS Foundation Trust	Operations Director
South Tees Hospitals NHS Foundation Trust	Assistant Director of Nursing /Risk Manager
Harrogate District Foundation Trust	Chief Nurse
York Teaching Hospital NHS Foundation Trust (also Scarborough and North East Yorkshire Healthcare NHS Trust)	Assistant Chief Nurse and Lead for Safeguarding, MCA and DOLS
Bradford District Care Trust	Director of Operations and Nursing
Airedale NHS Trust	Assistant Director of Patient Safety
YOR LMC	Nominated GP
District Councils/ Housing	Head of Housing, Harrogate Borough Council(represents 7 District Councils)
North Yorkshire Fire and Rescue	Group Manager
Supporting People	Strategic Commissioning Manager, Supporting People
Independent Care Group	Chief Executive and Chair
North Yorkshire and York Forum	Chief Officer

## **Appendix 2: Statements of Assurance – available separately.**

**Statements of Assurance: Board Partners**

North Yorkshire Safeguarding Adults Board requested in April 2011 that each statutory authority provide a statement of assurance from the Executive Board of its organisation. This should indicate how it is able to assure itself that best practice and statutory requirements are being followed, with regard to safeguarding vulnerable adults. Where complete assurance cannot be given, an indication should be given of what progress has been made towards this.

<b>Agency</b>	<b>Signed by</b>
<b>North Yorkshire County Council Health and Adult Services</b>	Derek Law, Corporate Director Health and Adult Services – July 2011
<b>North Yorkshire County Council Children &amp; Young People’s Service, Children’s Social Care</b>	Janet Newton, Head of Safeguarding - May 2011
<b>North Yorkshire Police</b>	Nigel Costello DCI PVPU - April 2011
<b>York and North Yorkshire Probation Trust</b>	Peter Brown, Chief Executive – June 2011
<b>North Yorkshire Fire and Rescue</b>	No Statement available at 28 October 2011
<b>NHS TRUSTS</b>	
<b>Airedale NHS Foundation Trust</b>	Debra Fairley, Deputy Chief Nurse - August 11
<b>Bradford District Care Trust</b>	Nicola Lees, Director of Operations and Nursing - April 2011
<b>Harrogate And District NHS Foundation Trust</b>	Angela Monaghan, Chief Nurse - 2011
<b>NHS North Yorkshire And York</b>	Jayne Brown Chief Executive - May 2011
<b>Scarborough And North East Yorkshire NHS Trust</b>	Chris Whilde, Governance Lead Clinical Services, Operational Lead for Vulnerable Adults - July 2011
<b>South Tees NHS Foundation Trust</b>	Tricia Hart, Deputy CEO/Director of Nursing and Patient Safety – May 2011
<b>Tees, Esk And Wear Valley NHS Foundation Trust</b>	Tim Cate, Director of Operations, North Yorkshire (Acting) – August 2011
<b>York Teaching Hospital Foundation Trust:</b>	Lucy Connolly, Assistant Chief Nurse - July 2011
<b>DISTRICT COUNCILS</b>	
<b>Craven District Council</b>	Paul Shevlin, Chief Executive - October 2011
<b>Hambleton District Council</b>	Peter Simpson, Chief Executive - May 2011
<b>Harrogate Borough Council</b>	Wallace Sampson, Chief Executive - September 2011
<b>Richmondshire District Council</b>	Peter Simpson, Chief Executive - May 2011
<b>Ryedale District Council</b>	Louise Sandall, Head of Organisational Development – April 2011
<b>Scarborough Borough Council</b>	Hilary Jones, Strategic Director – June 2011
<b>Selby District Council</b>	No Statement available at 28 October 2011

## NORTH YORKSHIRE COUNTY COUNCIL HEALTH AND ADULT SERVICES: MAY 2011

North Yorkshire County Council Health and Adult Services is committed to ensuring that safeguarding and protecting vulnerable adults remains a high priority and has identified that it will continue to be supported in 2011/12.

The Care Quality Commission Assessment of Performance Report for North Yorkshire 2009/10 reports that North Yorkshire is performing well for safeguarding.

### **Criminal Records Bureau checks**

NYCC has a robust system in place in relation to safer recruitment and CRB checks and meets statutory requirements as per NYCC policies (CRB Checks Operating Framework, Recruitment and Selection Policy and Procedure October 2010 and Disciplinary Policy and Procedure June 2010) All staff working for Health and Adult Services have enhanced CRB checks in accordance with government guidance (A move to five yearly checking is currently being phased in). This statement should be noted as historic in view of the changed position on Criminal Records Bureau checks.

Relevant staff attend safer recruitment training to ensure that high standards of recruitment are sustained.

### **Policies and Procedures**

Adult safeguarding policies and systems are in place that are in accordance with the North Yorkshire Safeguarding Adults Multi-agency policy and procedure. The Safeguard and Protect Operational Guidance was implemented in March 2009, with a paperwork review resulting in amended paperwork from April 2010. A full Equalities Impact Assessment has been completed and approved at Assistant Director Level.

These procedures have been assessed by an external assessor and considered to be fit for purpose.

The Safeguarding Team carry out regular promotion of the procedures with operational teams, assess issues raised from operational practice and highlight any requirements for practice updates to be issued to staff. A review of these procedures began in January

The role of all staff in safeguarding vulnerable adults is incorporated into job descriptions and questions on dignity and respect are built into all interview processes.

*Note: A review of the operational guidance is in progress and will feed in to the overall review of the multi-agency policy and procedure. The policy and procedures remain robust and operational.*

Adult safeguarding training plans are included in the statutory and mandatory training matrix for ACS which ensures that training competencies as agreed by the Board are met. The safeguarding training plan is within the annual Workforce Development Training Plan which was approved by ACS Management Board on 4 May 2011.

100% of staff who require Alerter level training (Level 1) have undertaken this training and satisfy the safeguarding competencies, as reported to the Care Quality Commission (Assessment of performance report 2009/10). Sufficient level 2, 3 & 4 training is in place to ensure staff who need this training can access it.

Additional training provision for level 3 and 4 is being made available during 2011/12. This is now in-house and much more closely linked to the procedural requirements. All Designated Safeguarding Managers (Care Services Managers and Team Managers) are required to attend this regardless of whether they have undertaken it in the past.

### **Staff with designated safeguarding roles**

Designated Safeguarding Managers are clear about their roles and responsibilities in the procedures and have appropriate training to carry out the tasks. Following the operational restructure, these staff will receive appropriate induction and training.

The Safeguarding Team includes a Safeguarding Adults Manager, four Safeguarding Officers and a Safeguarding Adults Policy Officer, each of which has clearly defined roles with sufficient time and support to undertake them. These staff continue to support operational staff within ACS and multi-agency partners.

In addition there is a dedicated Mental Capacity Act Coordinator and trainer.

The administration of safeguarding (minute-taking, performance monitoring) is supported through safeguarding portfolio holders. These staff receive training for minute-takers and are required to follow the 'Guidelines for safeguarding minute takers'.

Significant work has been undertaken with registered managers through the registered manager forum and dedicated safeguarding sessions, to remind them of their responder role and responsibilities.

*Note Further work is planned (May 2011) for a dedicated day for this group of managers around the responder role, links to CQC notifications requirements, MCA and medication notification of incidents and near misses.*

The Director for Health and Adult Services has a legal responsibility for safeguarding, with key responsibility for safeguarding in his job description and is chair of the Board. The Head of Self Directed Support and Transformation is the Management Board lead for safeguarding and also the lead for Mental Capacity Act /Deprivation of Liberty Safeguards.

An 'inspection ready' group ensures that the Directorate remains compliant with good practice and recommended standards and follows recommendations of the 'expert advisor' Sue Fiennes.

Regular case audits are carried out by managers and the safeguarding team and improvements made as required. An independent assessor assists with external case audits on a 6 monthly basis.

The Safeguarding Adults Board Annual Report 2009/10 was formally presented to the NYCC Care and Independence Overview and Scrutiny Committee on 4 November 2010 as part of the ongoing commitment to report six monthly to the committee.

### **Commissioning**

Robust and appropriate performance and contract monitoring systems are in place through the quality assurance framework, contracting and safeguarding self assessment tool. ACS has a programme in place to ensure that the proportion of independent sector staff that receive relevant training continues to improve.

Most providers from whom ACS commission services have robust systems and practices in place to ensure they can fulfil their role in safeguarding vulnerable adults and the council works with providers where there are identified shortfalls in quality as identified by the safeguarding self assessment. There is a positive link between quality development and safeguarding.

Where shortfalls are identified, improvement plans are agreed with providers and improvements are monitored. Information is shared with providers via a dedicated section of the Council's website aimed at working with providers. Relevant and timely information is also shared with providers via e-mail. Providers receive information on safeguarding training, which they can access free of charge.

Regular briefings are provided for providers on the expectation in safeguarding. In April 2011, a large Safeguarding Seminar was held together with the Independent Care Group. As guidance is reviewed and refreshed or trends identified, information is shared with providers, to ensure that they are aware of the Council's expectations of them.

**NYCC CHILDREN & YOUNG PEOPLE'S SERVICE, CHILDREN'S SOCIAL CARE**

The following arrangements are in place which will contribute to safeguarding vulnerable adults:

- Statutory requirements in relation to CRB checks are fully met and in line with North Yorkshire County Council policy.
- All staff are able to access North Yorkshire County Councils Adult Safeguarding Procedures.
- Children's Social Care Procedures include guidance on Safeguarding Adults and making an alert.
- The Safeguarding Adults Board Annual Report will be presented to CYPLT each year, when a review of arrangements to safeguard adults will also be undertaken.

**NORTH YORKSHIRE POLICE**

North Yorkshire Safeguarding Adults Board requests that you provide a statement of assurance from the Executive Board of your organisation. This should indicate how you are able to assure yourself that best practice and statutory requirements are being followed, with regard to safeguarding vulnerable adults.

Where you are unable to give complete assurance, you should indicate what progress you have made towards this.

As a minimum, the statement should state that your organisation's Board has satisfied itself that

1. Your organisation meets statutory requirements in relation to Criminal Records Bureau checks. [Yes – NYP have a Vetting Unit that undertake necessary checks. Those engaged more regularly in the safeguarding arena such as PVP are vetted to a higher level.](#)
2. Adult safeguarding policies and systems are up to date and robust. These should be in accordance with the North Yorkshire Safeguarding Adults Multi-agency policy and procedure and take account of recommendations made by the Board, using the recommended checklist. [Yes - DI Page in conjunction with York and North Yorkshire County Councils has written the policy in relation to Safeguarding Vulnerable Adults. This was written in 2010 but may if necessary be amended in the near future as new Draft ACPO Guidance has been received. In any case this would be reviewed in 2012 in line with force policy.](#)
3. Adult safeguarding training plans are in place in accordance with guidance from Training group. [Yes – training has been implemented and commenced by Jacqui Williams. In addition, from June the new Domestic Abuse, Stalking and Harassment \(DASH\) training will commence and replaces the 174 procedure and incorporates Hate Crime. Therefore vulnerable adults are also catered for in this process. Training will also take place over the same period for Vulnerable and of Concern \(VACS\) around anti-social behaviour in light of the Gary Newlove and Fiona Pilkington cases among others. Training also takes place between NYP and NYCC groups utilising Trainers from both organisations.](#)
4. Eligible staff have undertaken and are up to date with safeguarding adults training at level 1 (alerter) and satisfy the safeguarding competencies as directed by the North Yorkshire Safeguarding Adults Board. [FCR Call Handlers, Dispatchers and Crime Recording staff all undertook alerter training](#)

during 2010. Alongside this R&R officers also undertook the same training. The FCR had approx 200 staff undertake the training and around 350 R&R staff. All training took place on Staff Development Days and the figures do not take account of annual leave, sickness absence etc.

5. Designated and/or named individuals are clear about their role and have sufficient time and support to undertake it. Yes – training has commenced so as to ensure persons are aware of the role and responsibility. PVP if not dealing with cases offer appropriate guidance and support.
6. There is a Board level Executive Director lead for safeguarding adults, the Board reviews safeguarding adults across the organisations at least once a year and has robust audit programmes to assure it that safeguarding adults systems and processes are working. Yes, reviewed by DCI Costello on behalf of ACC Madgwick. DCI Costello is the regional lead for vulnerable adults and best practice is shared at regional meetings.
7. The Safeguarding Adults Board Annual Report is formally presented to your agency's Executive Management Board or equivalent. Annual report will be presented as agenda item to SLT and then to appropriate NYPA meeting.
8. Boards of all statutory agencies are recommended to publish a declaration locally on their websites (and also in other media as they decide) as soon as possible when they are satisfied these arrangements are in place. This to my knowledge has not yet been done. DI Page now tasked with internal and external communications to ensure compliance.

## **YORK AND NORTH YORKSHIRE PROBATION TRUST**

1. York and North Yorkshire Probation Trust (YNYPT) meets statutory requirements in relation to Criminal Records Bureau checks.
2. All staff of YNYPT have access to an electronic process map for safeguarding adults ('Identify and Manage Concerns about Vulnerable Adults') The process map links directly to available guidance on both the York and North Yorkshire Safeguarding Adults Boards' websites. A policy will be produced by the end of September 2011, in accordance with the North Yorkshire Safeguarding Adults multi-agency policy and procedure and with reference to the recommended checklist.
3. Adult safeguarding training plans are in place in accordance with guidance from Training group.
4. All staff have received a Core Team Briefing on Safeguarding Adults, to launch the new process map and the training plan. All operational staff will have completed the kwango e-learning package by the end of September 2011 and the package has been included in the Personal Induction Plan for new staff.
5. Staff are clear about their role and have sufficient time and support to undertake it.



6. The Director of the North Yorkshire Local Delivery Unit is the senior management lead for safeguarding adults. An Annual review of all YNYPT's safeguarding policies and systems (children and adults) is presented to senior management and the Board each year. A Quality Management Framework determines a schedule of themed internal audits. Safeguarding adults will be specified under this framework once the training is completed and the new process map has had time to embed. Safeguarding issues are already addressed as part of the auditing of risk assessment and risk management processes.
7. The Safeguarding Adults Board Annual Report is formally presented to YNYPT's Board along with the internal review of safeguarding.
8. A declaration will be published on the YNYPT website once the Safeguarding Adults Policy is completed.
9. From 2011-12, our model contract for providers will include a requirement to support our safeguarding work.

## AIREDALE NHS FOUNDATION TRUST

Assurance Requirements	Completed Yes / No	If No, timescale for completion
1. The Trust meets the statutory requirement of carrying out Criminal Bureau checks on relevant employees.	Yes	
2. Adult safeguarding policies are up to date and robust.	Yes	
3. Adult safeguarding training plans are in place in accordance with guidance from the training group.	Yes	
4. Eligible staff have undertaken and are up to date with safeguarding adults training at level 1 (alerter).	Yes	
5. Designated and/or named individuals are clear about their role and have sufficient time and support to undertake it.	Yes	
6. There is a Board level Executive Director lead for safeguarding adults.	Yes	
7. The Safeguarding Adults Annual Report is formally presented to your agencies Executive Management Board or equivalent.	Yes	
8. Boards of all statutory agencies are recommended to publish a declaration locally as soon as possible when they are satisfied these arrangements are in place.	Yes	

**BRADFORD DISTRICT CARE TRUST**

Bradford District Care Trust provides safeguarding adults' support to a relatively small number of patients who access our service in North Yorkshire; these include some community, inpatient and CAMHS.

<b>Recommendation</b>	<b>Current Position</b>	<b>Evidence of Assurance</b>	<b>Further Action to be taken</b>
1. Your organisation meets statutory requirements in relation to Criminal Records Bureau checks.	Community Services comply with CRB process	Actual CRB documentation	None
2. Adult safeguarding policies and systems are up to date and robust. These should be in accordance with the Safeguarding Adults Multi-agency policy and procedure and take account of recommendations made by the Board, using the recommended checklist.	Adult Safeguarding policy up to date	Policy availability	Policy being reviewed to incorporate community services elements transferred as part of TCS by June 2011
3. Adult safeguarding training plans are in place in accordance with guidance from Training group.	Yes	Training strategy Attendance register	Review annually
4. Eligible staff have undertaken and are up to date with safeguarding adults training at level 1 (alerter) and satisfy the safeguarding competencies as directed by North Yorkshire's Safeguarding Adults Board.	Yes	Compliance monitored through newly set up BDCT safeguarding meeting  Community Services present compliance through quality and performance contract meeting with commissioners	None
5. Designated and / or named individuals are clear about their role and have sufficient time and support to undertake it.	Yes	Job descriptions Feedback at 1:1 Annual Joint performance and development plans	None

Recommendation	Current Position	Evidence of Assurance	Further Action to be taken
6. There is a Board level Executive Director lead for safeguarding adults, the Board reviews safeguarding adults across the organisations at least once a year and has robust audit programmes to assure it that safeguarding adults systems are processes are working.	Yes Nicola Lees – Executive Director for Safeguarding within BDCT.	Annual safeguarding reports Board development session April 11, programme and notes	None
7. The Safeguarding Adults Board Annual Report is formally presented to your agency's Executive Management Board or equivalent.	Yes	Annual report Minutes of Board meetings / ex meeting	None
8. Boards of all statutory agencies are recommended to publish a declaration locally on their websites (and also in media as they decide) as soon as possible when they are satisfied these arrangements are in place.	Yes	Availability on the website	None

**HARROGATE AND DISTRICT NHS FOUNDATION TRUST**

The Harrogate and District NHS Foundation Trust Board of Directors has stated that the Safeguarding of Adults is a high priority for the organisation and that it has satisfied itself that:

1. The organisation meets the NHS Employers' standard and statutory responsibilities in relation to Criminal Record Bureau (CRB) checks and the organisation also meets the "gold standard" of CRB checks on staff every three years.
2. Adult safeguarding policies and systems are in place, up to date and are in accordance with the North Yorkshire Safeguarding Adults Multi-agency policy and procedure and take account of recommendations made by the Local Safeguarding Adults Board, using the recommended checklist. The policy is accessible to all staff.  
*Note: At the current time two policies are in place due to the recent transfer of staff and services from North Yorkshire and York Community Adult Health Services. In due course these policies will be merged and a policy for the integrated Trust developed.*
3. Adult safeguarding training plans are in place and are in accordance with guidance issued from the Community Services Training group. The amount of training required is established and is commensurate with the amount of contact staff have with vulnerable adults.
4. Eligible staff are required to undertake safeguarding training at level 1 (alerter) and satisfy the safeguarding competencies as directed by the North Yorkshire Safeguarding Adults Board.
5. Lead individuals and all clinical and other staff who have patient contact are clear about their role related to safeguarding adults and have this identified within their job description.
6. There is a Board level Executive Director lead for safeguarding adults (Chief Nurse), the Board reviews safeguarding adults across the organisations at least once a year via the Quality Committee and has an audit programme to assure it that safeguarding adults systems and processes are working. The organisation is represented on the Local Safeguarding Adults Board and the North Yorkshire Safeguarding Adults Health Partnership Group.
7. The Local Safeguarding Adults Board Annual Report will be shared within Harrogate and District NHS Foundation Trust and relevant actions implemented.

## NHS NORTH YORKSHIRE AND YORK

This is a joint declaration between the Provider and Commissioning arms of NHS North Yorkshire and York. Safeguarding Vulnerable Adults is a high priority in our organisation and we can provide assurances in the following areas:

### **Criminal Records Bureau checks**

The organisation meets statutory requirements in relation to Criminal Records Bureau checks as per NHS North Yorkshire and York Policies: Independent Safeguarding Authority Registration/Criminal Records Bureau Disclosure, NYYPCTHR05; Recruitment and Selection Policy, NYYPCTHR20.

### **Policy and Procedures**

A robust Policy and Procedure for Safeguarding Vulnerable Adults is in place in accordance with the North Yorkshire Safeguarding Adults Multi-agency policy and procedures using the recommended checklist. They are accessible to all staff and take into account recommendations made by the Local Safeguarding Adults Boards (LSAB's).

*Note: The review date of 01/04/2011 has been postponed due to recent and pending significant changes to the organisation. Updating will be carried out when the organisation merges with another organisation scheduled for October 2011. However the policy and procedures remain robust and operational.*

### **Training**

A training plan is in place in accordance with guidance from the joint LSAB's training sub group.

A system of mandatory training is in place whereby the level of training increases with the amount of contact staff have with vulnerable adults:

All staff = 30 minute e-learning

Staff with limited/infrequent contact = 2 hour e-learning

Staff with close/regular contact = ½ day classroom

The training material is provided by North Yorkshire County Council (NYCC) Workforce Development and the trainers are trained and updated by NYCC thereby satisfying the safeguarding competencies.

*Note: Training Needs Analysis will be repeated once the significant changes to the organisation conclude later this year. The training programme continues to be delivered during the transitional period.*

The provider arm has a designated lead nurse for safeguarding adults. The role has clarity and support.

The commissioning arm of the PCT have 3 dedicated safeguarding nurses who work within the NHS Funded Continuing Healthcare team and are responsible for leading and working in partnership with both City of York and North Yorkshire County Council on any allegation or investigation into Adult Safeguarding within Care Homes and the NHS CHC funded packages of care within the community.

### **Board Level**

The Associate Director Mental Health is the provider Board Executive Lead for Safeguarding Adults. A Safeguarding Vulnerable Adults Group has been established within provider services. It operates to develop systems, review effectiveness, monitor and report on referrals, monitor compliance and raise the profile of safeguarding vulnerable adults.

The Deputy Chief Executive and Assistant Director Vulnerable People and NHS Funded Continuing Healthcare are the commissioning Board Executive Leads

The LSAB Annual Report is formally presented to the boards.

The organisation is represented at LSAB's and the North Yorkshire Safeguarding Adults Health Partnership Group

*Note: A safeguarding adults declaration will be published on the organisations website once the significant changes to the organisation have concluded.*

### **Commissioning**

The organisation provides guidance for commissioned providers about expectations in relation to safeguarding adults. It undertakes ongoing performance monitoring of providers in relation to safeguarding adults responsibilities through regular service review meetings. Providers are required to demonstrate their compliance with safeguarding adults policies and procedures.

Performance monitoring of independent contractors is undertaken through formal contract monitoring and clinical governance review processes, including QOF visits for general practice, clinical governance visits for dentists and contract monitoring visits for pharmacists.

The PCT also has in post 2 Mental Capacity Act and Deprivation of Liberty who ensure that Safeguarding and MCA/DOLs are closely linked and who work with healthcare providers to promote MCA/DOLs and Safeguarding.

**SCARBOROUGH AND NORTH EAST YORKSHIRE NHS TRUST (JULY 11)**

**Scarborough and North East Yorkshire NHS Trust responses to the requirements are detailed below;**

1. The organisation meets statutory requirements in relation to Criminal Record Bureau checks as per the Human Resource Department Recruitment Policies and Procedures. Compliance with this requirement was recently audited by the CQC
2. SNEYT has had an active Safeguarding Adults Policy in place since 2008 but this was revised in November 2009 to bring it into line with the North Yorkshire Safeguarding Adults Multi-agency policy using the recommended checklist. The Policy was approved by the Safeguarding Governance Committee and the Clinical Governance Committee which is a sub committee of the Trust Board.
3. The Safeguarding Governance Committee approved a training plan for the Trust which defines the different levels of training and how we intend to deliver this training to our staff. This item has been discussed in detail with the other provider trusts at the Safeguarding Adults Health Partnership Group and our training strategy is in line with the acute trusts' interpretation of the Safeguarding Boards requirements.
4. SNEYT have provided training for staff at level 1 and 63% of appropriate staff have received this training. Additionally we undertook a general awareness exercise where 76% of all Trust staff received.
5. The safeguarding adult's team consists of the Deputy Chief Executive, Head of Corporate Services, Governance Lead for Clinical Services (Designated operational lead for safeguarding adults), Matrons for Medicine and Surgery and the discharge liaison nurses. The job descriptions for the Deputy Chief Executive and the operational lead have specific responsibilities for managing and reporting safeguarding vulnerable adult's issues. The role of all staff in safeguarding vulnerable adults is incorporated into all new job descriptions and an annotation to all current contracts was sent out recently highlighting individual staff responsibilities for safeguarding vulnerable adults. The workload of the safeguarding team whilst fluctuating has been met by the current team
6. Teresa Fenech, Deputy Chief Executive is the board level executive director with responsibility for safeguarding adults. In the last year several safeguarding issue have been discussed at the Trust Board with presentations to the non executive and executive team. Action plans agreed at the board have been carried out. Patient Safety issues are incorporated into the monthly Matron's trust Board report.
7. An internal audit of Safeguarding Adults procedures was carried out by the East Coast Consortium and significant assurance was given by their report to the corporate governance committee, which is a formal sub committee of the Trust Board. To date the operational team has not submitted a formal annual report to the Trust Board
8. The CQC revisited the Trust in January 2011 and have declared that the Trust is compliant with Outcome 7 Safeguarding people who use services from abuse. SNEYT will look at publishing this declaration on its website in the very near future.



Since April 2011, the arrangements within the Trust have changed and the board lead for safeguarding is now Nicki McNaney, Director of Nursing. A further change relates to the closer working relationship between York Foundation Trust and SNEYT and will involve representation for both Trusts at the Safeguarding Board by Lucy Connelly.

**SOUTH TEES NHS FOUNDATION TRUST**

<b>Requirement</b>	<b>Position</b>	<b>Action Plan</b>
Organisation meets statutory requirements in relation to CRB checks	The organisation has in place Recruitment and selection policy supported by appropriate training to ensure safe recruitment practice. This includes meeting the statutory requirements for CRB checks. In addition those staff who represent the organisation on safeguarding adults boards and sub committees are subject to 3 yearly CRB checks	No action required
Adult safeguarding policies and processes are up to date and robust	The Trust Safeguarding Vulnerable Adults policy was updated and approved by the Board in August 2010. It reflects the requirements of the North Yorkshire Safeguarding Adults Multi-agency policy	Following vertical integration with community services in North Yorkshire and South Tees the Trust policy will need to be reviewed and revised accordingly - date for completion August 2011
Adult safeguarding training plans are in place in accordance with guidance from Training Group	The training requirements for staff are laid out in the Safeguarding Vulnerable Adults Policy	Following vertical integration with community services in North Yorkshire and South Tees a training strategy is being developed to ensure compliance with competencies agreed at Health Partnership Group Strategy will be in place by August 2011
Eligible staff have undertaken and are up to date with safeguarding adults training at level 1 (alerter) and satisfy the competencies as directed by North Yorkshire Safeguarding Adults Board	Training continues to be a significant challenge for the organisation. 30-40% of eligible staff have undertaken level 1 training. Level 1 training has been delivered by mixture of e learning and face to face teaching. Use of the Kwango e learning package has resulted in difficulties in obtaining reports on completion by individuals.	Awareness raising for all new staff to be delivered at corporate induction. Level 1 training to be available via NHS Learning Management System and regular delivery of face to face training over 2011/2012 will ensure that all eligible staff are trained at level 1 in line with competencies agreed at Health Partnership

Requirement	Position	Action Plan
	Two members of staff have now completed the 'train the trainer' course	Group  Consideration to be given in year as to how updates/refresher training will be provided
Designated and/or named individuals are clear about their role and have sufficient time and support to undertake it	The strategic lead role is fulfilled by the Assistant Director of Nursing and Patient Safety In recognition of the increasing safeguarding adults agenda and workload the Trust has recently appointed a Specialist Nurse for Safeguarding Adults	Job description of ADN under review to ensure accurate reflection of role and responsibility in relation to safeguarding adults - to be completed by July 2011
There is a Board level Executive Director lead for safeguarding adults, the board reviews safeguarding adults across the organisation at least once a year & has robust audit programmes to assure that systems and processes are working	The Board lead for safeguarding adults is Director of Nursing and Patient Safety, Deputy CEO.  All safeguarding concerns are reported internally via the trust incident reporting system. All incident forms are reviewed by the ADN	A Safeguarding Adults/MCA/DOLS Group has been established to monitor the implementation of relevant policies, systems and controls and make recommendations where necessary to the Risk and Assurance Sub Committee. This group will meet quarterly and will also monitor attendance at training and advise on actions to be taken where necessary.  As incident and referral forms will be reviewed by the Assistant Director of Nursing and Patient Safety. Monthly reports will be compiled of reported incidents and fed back to the Safeguarding Adults/MCA/DOLS Group as an agenda item on a quarterly basis.  An annual audit will be undertaken on 10% of referrals made which will include review of vulnerable adult case files and patient case notes to consider if procedures have been followed. The results of this audit will be presented to the Risk and Assurance Committee.
The Safeguarding Adults Board Annual Report is formally presented to Executive Management Board or equivalent		The 2010/11 report will be presented to Management Group and Board

Requirement	Position	Action Plan
Boards of all statutory agencies are recommended to publish a declaration locally on their websites (and other media) as soon as possible when they are satisfied these arrangements are in place		To be considered by the Board

### TEES, ESK AND WEAR VALLEY NHS FOUNDATION TRUST

	Assurance requirement	Assurance provided	Actions in progress when only partial compliance.
North Yorkshire Safeguarding Adults Board requests that you provide a statement of assurance from the Executive Board of your organisation. This should indicate how you are able to assure yourself that best practice and statutory requirements are being followed, with regard to safeguarding vulnerable adults.			
1	Your organisation meets statutory requirements in relation to Criminal Records Bureau checks.	<p>The trust has Safe Recruitment standards in place which ensures CRB checks are a standard part of recruitment of new staff and internally recruited staff.</p> <p>The service TEWVFT provides in Scarborough, Whitby, and Ryedale are fully compliant with all the required CRB checks.</p> <p>The services in Harrogate, Hambleton, Richmondshire are not fully compliant – newly recruited staff since the onset of legislation have been checked but no retrospective check were in place when services transferred on June 1<sup>st</sup> 2011.</p>	<p>A CQC compliance action plan is in place and is on target regarding implementing retrospective CRB and POVA checks for all staff working within the services in services provided by TEWVFT Harrogate, Hambleton, Richmondshire.</p> <p>All checks will be complete by October 1<sup>st</sup> 2011.</p> <p>Any concerns arising from the CRB retrospective check process will be dealt with within the Employment Processes.</p>

	Assurance requirement	Assurance provided	Actions in progress when only partial compliance.
2	Adult safeguarding policies and systems are up to date and robust. These should be in accordance with the North Yorkshire Safeguarding Adults Multi-agency policy and procedure and take account of recommendations made by the Board, using the recommended checklist.	TEWVFT staff comply with the Safeguarding policies and procedures of the locality in which they work. All TEWV FT staff working in the locality of North Yorkshire are therefore compliant with these North Yorkshire Safeguarding Adults Multi-agency policies and procedures	Implementation of the policies will be monitored through spot check by the local SA link network in service areas.
3	Adult safeguarding training plans are in place in accordance with guidance from Training group.	The training strategy in place in TEWFT is fully compliant with guidance from training group. The strategy include induction training, alerter responder and access to specialist multi agency programmes as well as specialist programme e.g. Domestic Violence The training strategy is evaluated annually and at times in between annual reviews incorporates recommendations from national or local review. E.g. This quarter the PREVENT briefing and referral procedures has been incorporated.	
4	Eligible staff have undertaken and are up to date with safeguarding adults training at level 1 (alerter) and satisfy the safeguarding competencies as directed by the North Yorkshire Safeguarding Adults Board.	The service TEWVFT provides in Scarborough, Whitby, Ryedale are compliant with all the required training standards – last check 70% as per expected trust standard for this year..  The services in Harrogate, Hambleton, Richmondshire are not fully compliant – training compliance standards were not available form the previous provider at the time when services transferred on June 1 <sup>st</sup> 2011	The services in Harrogate, Hambleton, Richmondshire are currently subject to an audit of training compliance and the training strategy in place in the rest of TEWV FT has been put into place. A dedicated resource of B6 post is being recruited for the NY area.

	Assurance requirement	Assurance provided	Actions in progress when only partial compliance.
5	Designated and/or named individuals are clear about their role and have sufficient time and support to undertake it.	TEWV FT has a structured Safeguarding Adults team led by a Lead Named Nurse and supported by a Senior Nurse . Current recruitment is in place to enhance the team with an Adult Safeguarding Adviser/trainer post for NY. Additional administrative support is also being recruited. A temporary Senior Nurse post is in place to develop MARAC/MAPPA processes.	
6	There is a Board level Executive Director lead for safeguarding adults, the Board reviews safeguarding adults across the organisations at least once a year and has robust audit programmes to assure it that safeguarding adults systems and processes are working.	The Executive Director of Nursing and Governance is the Board level lead for Safeguarding Adults. Quarterly assurance reviews are available to the Board through the Quality and Assurance Committee (Board Sub Committee) An annual Board seminar focuses on Safeguarding structure/process update and ensures Board members receive annual update training.	
7	The Safeguarding Adults Board Annual Report is formally presented to your agency's Executive Management Board or equivalent	Quarterly assurance review reports are available and annual report made at end of Q4 each year.	
8	Boards of all statutory agencies are recommended to publish a declaration locally on their websites (and also in other media as they decide) as soon as possible when they are satisfied these arrangements are in place.	The TEWV FT Board can make a website declaration.	

## York Teaching Hospital Foundation Trust: June 2011

York Teaching Hospital Foundation Trust responses to the requirements are detailed below;

1. The organisation meets statutory requirements in relation to Criminal Record Bureau checks as per the Human Resource Department Recruitment Policies and Procedures.
2. The local Safeguarding Adults Policy and Procedure 2010 (due for review in 2012) has been developed in conjunction with the multi agency policy and procedures, it also meets all of the checklist recommendations. The policy is currently under review taking into consideration community services. A revised policy should be available in September 2011 and will be shared with partner agencies.
3. There is a training needs analysis for safeguarding adults, with different levels of training delivered to different staff groups dependent on their role.
4. 57% of **all** staff have been trained at awareness level for safeguarding adults. The training needs analysis is currently being updated to incorporate the training requirements for restraint, MCA and DOLs. In addition the staff groups required to undertake level 1 training will be reviewed as not all staff require level 1 training. Awareness level training will continue to be delivered to all staff as part of statutory and mandatory training.
5. The Chief Nurse is the Board level Director with responsibility for the Safeguarding Adults Agenda. This responsibility is delegated both strategically and operationally to the Assistant Chief Nurse for Adult Safeguarding. We are currently establishing a Safeguarding Adults Team. The responsibilities of these individuals are recognised by the organisation and reflected in the Assistant Chief Nurse and Safeguarding Adults Team job descriptions.

Response to bullets 6, 7 and 8

To date the organisation has not reported formally to the Board of Directors but has begun regular reporting to the Risk and Assurance Committee. The organisation has established a Safeguarding Adults Working Group (November 2010) and routine auditing will become part of this groups work plan. It is noted that the annual reporting requirements of the local authorities tend to be during Quarter 3 (Sept to Dec) each year. The organisations performance framework – work plan has scheduled to develop an annual report in November 2011.

### CRAVEN DISTRICT COUNCIL

#### Progress against actions specified in Safeguarding Adults Statement of Assurance Oct 2011

Key District Council Responsibilities for Safeguarding Adults	Current Position	Additional Actions Required and Date	Responsible Officer
Organisation meets statutory requirements in relation to Criminal Records Bureau checks.	Yes – Covered in CDC Recruitment and Selection Policy		Corporate Head – Business Support /Senior HR Officer
Adult safeguarding policies and systems are up to date and robust. These should be in accordance with the North Yorkshire Safeguarding Adults Multi-agency policy and procedure and take account of recommendations made by the Board, using the recommended checklist.	Yes - Revised Safeguarding Policy and Procedures were jointly produced by all NY District Councils. CDC adopted revised corporate Children & Vulnerable Adults Safeguarding Policy and Procedures on 14 July 2010.		Deputy Chief Executive
Adult safeguarding training plans are in place in accordance with guidance from Training group	Safeguarding training incorporated into 2010/11 corporate training plan.	2011/12 plan finalised September 2011.	Corporate Head – Business Support /Senior HR Officer
Eligible staff have undertaken and are up to date with safeguarding adults training at level 1 (alserter) and satisfy the safeguarding competencies as directed by the North Yorkshire Safeguarding Adults Board.	Strategic Heads of Service and Senior Managers responsible for monitoring action to safeguard and promote welfare of children and vulnerable adults within their areas of responsibility and ensure delivery of safe services and safe working practices.  Staff with key safeguarding roles have been made aware of NY Safeguarding	Ensure that all officers with safeguarding responsibilities have carried out appropriate training.  Ensure E learning package	Strategic Heads of Service and Senior Managers Corporate Head – Business Support /Senior HR Officer  Partnerships Officer

Key District Council Responsibilities for Safeguarding Adults	Current Position	Additional Actions Required and Date	Responsible Officer
	Training Programme.	available free of charge for all staff with front line responsibilities is available via website. Revised information leaflet produced and circulated to staff August 2011.	Partnerships Officer
Designated and/or named individuals are clear about their role and have sufficient time and support to undertake it.	Designated officers identified in corporate Children & Vulnerable Adults Safeguarding Policy and Procedures.		
There is a Board level Executive Director lead for safeguarding adults, the Board reviews safeguarding adults across the organisations at least once a year and has robust audit programmes to assure it that safeguarding adults systems and processes are working.	Deputy Chief Executive has strategic safeguarding lead across the organisation.  Systems are not currently annually audited.	Carry out annual audit of safeguarding processes. CLT reviewed procedures at 8 June 2011 meeting.	Deputy Chief Executive Partnerships Officer Principal Housing Services Manager
The Safeguarding Adults Board Annual Report is formally presented to your agency's Executive Management Board or equivalent.	Action not currently undertaken	Formally present Safeguarding Adults Annual Report (Expected November 2011) and similar Children & Young Peoples Report once produced.	Partnerships Officer
Boards of all statutory agencies are recommended to publish a declaration locally on their websites (and also in other media as they decide) as soon as possible when they are satisfied these arrangements are in place.	CDC currently publish declaration internally to staff via intranet.  Requirement to publicise externally already noted as part of CDC website upgrade.	Corporate safeguarding internet page will be included on new Council Website due to launch Oct 2011.  Internal intranet safeguarding page updated August 2011.	Partnerships Officer
Agencies with responsibility for commissioning services for vulnerable adults have	Community Grants Programmes include requirement for any organisation providing services to children & Young	Head of Strategic Housing to confirm that housing services comply with this requirement. Oct	Principal Housing Services Manager



Key District Council Responsibilities for Safeguarding Adults	Current Position	Additional Actions Required and Date	Responsible Officer
<p>1) Robust and appropriate performance and contract monitoring systems in place with all providers, including the independent sector, in relation to safeguarding.</p> <p>2) Have ensured that the providers from whom they commission services have robust systems and practices in place to ensure they can fulfil their role in safeguarding vulnerable adults.</p> <p>3) Provide guidance for commissioned providers about expectations in relation to safeguarding.</p>	<p>people or vulnerable adults to have policies and procedures in place which have been approved by the relevant NY Safeguarding Board.</p> <p>Strategic Heads of Service and Senior Managers responsible for monitoring action to safeguard and promote welfare of children and vulnerable adults within their areas of responsibility and ensure delivery of safe services and safe working practices.</p>	<p>2011.</p> <p>Partnerships Officer to check with Strategic Heads of Service all services are compliant with this action. Oct 2011.</p>	<p>Partnerships Officer</p>

## HAMBLETON DISTRICT COUNCIL

Hambleton District Council:

- Adopted its Children and Vulnerable Adults Safeguarding Policy and Procedures in July 2010. The Vulnerable Adults element is in line with the North Yorkshire Safeguarding Adults Multi-agency policy and checklist.
- Meets the statutory requirements in relation to CRB checks and has robust procedures in place.
- Has an Adults Safeguarding Training Plan in place in accordance with guidance from the Safeguarding Vulnerable Adults Training Sub Group. The Training Plan identifies the different levels of training required and how the Council intends to deliver this training to our staff. 8 members of staff are currently being trained as Alerter Champions (training to be completed on 20<sup>th</sup> June 2011). It is anticipated that 95% of our staff who have regular close contact with vulnerable adults will have achieved Level 1 Alerter Training by the end of March 2012.

- Designated Safeguarding Officers are: Dave Goodwin (Assistant Director – Health, and Senior Management Team representative with responsibility for safeguarding adults); Paula Ferguson, Leisure Centre Manager; and Lisa Wilson, Lifestyles Manager. Each Safeguarding Officer is clear about their role and has sufficient time and support to undertake it.
- Reviews its Children and Vulnerable Adults Safeguarding Policy and Procedures at least once a year and there is a robust system in place to assure that safeguarding adults processes are working.
- Formally presents the North Yorkshire Safeguarding Adults Board Annual Report to its Senior Management Team.
- Will publish this declaration on its website.

## **HARROGATE BOROUGH COUNCIL**

### **STATEMENT OF ASSURANCE: SAFEGUARDING ADULTS**

Harrogate Borough Council:

- Adopted its current Safeguarding Policy and Procedures on 23 June 2010.
- Meets the statutory requirements in relation to CRB checks and has robust procedures in place.
- Has a Safeguarding Training Plan in place that identifies the different levels of training required and how the Council intends to deliver this training to our staff.
- Has a Designated Safeguarding Officer (Alan Jenks Head of Housing) and Deputy Designated Safeguarding Officer (Jane Whitaker Play Development Officer), each of whom is clear about their role and has sufficient time and support to undertake it.
- Reviews its Safeguarding Policy and Procedures at least once a year and has a robust system in place to assure that safeguarding processes are working.
- Formally presents the North Yorkshire Safeguarding Adults Board Annual Report to its Senior Management Team.
- Will publish this declaration on its website.

## **RICHMONDSHIRE DISTRICT COUNCIL**

Richmondshire District Council:

- Adopted its Children and Vulnerable Adults Safeguarding Policy and Procedures in July 2010. The Vulnerable Adults element is in line with the North Yorkshire Safeguarding Adults Multi-agency policy and checklist.
- Meets the statutory requirements in relation to CRB checks and has robust procedures in place.
- Is developing an Adults Safeguarding Training Plan in accordance with guidance from the Safeguarding Vulnerable Adults Training Sub Group. The Training Plan will identify the different levels of training required and how the Council intends to deliver this training to our staff. It will also aspire for members of staff to be trained as Alerter Champions. It is anticipated that 95% of our staff who have regular close contact with vulnerable adults will have achieved Level 1 Alerter Training by the end of March 2012.
- Designated Safeguarding Officers are: Dave Goodwin (Assistant Director – Health, and Senior Management Team representative with responsibility for safeguarding adults); Gavin White Head of Supported Housing. Each Safeguarding Officer is clear about their role had has sufficient time and support to undertake it.
- Reviews its Children and Vulnerable Adults Safeguarding Policy and Procedures at least once a year and there is a robust system in place to assure that safeguarding adults processes are working.
- Formally presents the North Yorkshire Safeguarding Adults Board Annual Report to its Senior Management Team.
- Will publish this declaration on its website.

## **RYEDALE DISTRICT COUNCIL**

### **STATEMENT OF ASSURANCE, ADULT SAFEGUARDING**

Your organisation meets statutory requirements in relation to Criminal Records Bureau checks.

A: Yes

Adult safeguarding policies and systems are up to date and robust. These should be in accordance with the North Yorkshire Safeguarding Adults Multi-agency policy and procedure and take account of recommendations made by the Board, using the recommended checklist.

Approved by NYSAB 28 October 2011

A: Yes

Adult safeguarding training plans are in place in accordance with guidance from Training group.

A: Yes

Eligible staff have undertaken and are up to date with safeguarding adults training at level 1 (alserter) and satisfy the safeguarding competencies as directed by the North Yorkshire Safeguarding Adults Board.

A: Yes and in progress of rolling out to the whole authority.

Designated and/or named individuals are clear about their role and have sufficient time and support to undertake it.

A: Yes

There is a Board level Executive Director lead for safeguarding adults, the Board reviews safeguarding adults across the organisations at least once a year and has robust audit programmes to assure it that safeguarding adults systems and processes are working.

A: Yes, Louise Sandall, Head of Organisational Development and we have a Safeguarding Panel which meets quarterly to review processes and procedures

The Safeguarding Adults Board Annual Report is formally presented to your agency's Executive Management Board or equivalent.

A: Yes

Boards of all statutory agencies are recommended to publish a declaration locally on their websites (and also in other media as they decide) as soon as possible when they are satisfied these arrangements are in place.

A: Yes

In addition, agencies with responsibility for commissioning services for vulnerable adults should ensure that;

They have robust and appropriate performance and contract monitoring systems in place with all providers, including the independent sector, in relation to safeguarding.

A: Yes, All contractors are required to adhere to our Safeguarding requirements

Providers from whom they commission services have robust systems and practices in place to ensure they can fulfil their role in safeguarding vulnerable adults. (For PCTs this should include GP practices and staff).

A: Yes, All contractors are required to adhere to our Safeguarding requirements

They provide guidance for commissioned providers about expectations in relation to safeguarding.

A: Yes

**SCARBOROUGH BOROUGH COUNCIL**

North Yorkshire Safeguarding Adults Board requests that you provide a statement of assurance from the Executive Board of your organisation. This should indicate how you are able to assure yourself that best practice and statutory requirements are being followed, with regard to safeguarding vulnerable adults.

Where you are unable to give complete assurance, you should indicate what progress you have made towards this.

As a minimum, the statement should state that your organisation's Board has satisfied itself that

1. Your organisation meets statutory requirements in relation to Criminal Records Bureau checks.

We do CRB checks on new employees where appropriate and working towards those that currently needs checks against appropriate posts

2. Adult safeguarding policies and systems are up to date and robust. These should be in accordance with the North Yorkshire Safeguarding Adults Multi-agency policy and procedure and take account of recommendations made by the Board, using the recommended checklist.

Policies were reviewed in 2010 and accepted at council on 18/1/11. Policies were sent to the Adult Safeguarding Manager for comment and comments taken on board and added. A data base for audit trail has also been put in place for all safeguarding alerts made by Scarborough Borough Council

3. Adult safeguarding training plans are in place in accordance with guidance from Training group.

Yes

4. Eligible staff have undertaken and are up to date with safeguarding adults training at level 1 (alerter) and satisfy the safeguarding competencies as directed by the North Yorkshire Safeguarding Adults Board.

On going training is taking place with staff across Scarborough Borough Council with staff over and above those identified on recommended list

5. Designated and/or named individuals are clear about their role and have sufficient time and support to undertake it.

Yes

6. There is a Board level Executive Director lead for safeguarding adults, the Board reviews safeguarding adults across the organisations at least once a year and has robust audit programmes to assure it that safeguarding adults systems and processes are working.

Over view and Scrutiny have reviewed Safeguarding policies and procedures in 2010 and an annual report is to be sent to the committee. The Strategic Director has named responsibility for Safeguarding.

7. The Safeguarding Adults Board Annual Report is formally presented to your agency's Executive Management Board or equivalent.

Is to be presented by Safeguarding Officer from 2011

8. Boards of all statutory agencies are recommended to publish a declaration locally on their websites (and also in other media as they decide) as soon as possible when they are satisfied these arrangements are in place.

The Safeguarding Policy is on Scarborough Borough Councils Website

In addition, agencies with responsibility for commissioning services for vulnerable adults should ensure that;

9. They have robust and appropriate performance and contract monitoring systems in place with all providers, including the independent sector, in relation to safeguarding.

Working progress meeting with legal team to include when commissioning services who have had training to raise awareness of the importance of this