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**Annual Report**

**2023-24**

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**Foreword**

This is my first report as Chair of the Herefordshire Safeguarding Adults Board. I want to begin by thanking colleagues in all partner agencies for their hard work and dedication, and to our communities for their support, in protecting and supporting vulnerable adults. That community support, focussed in Herefordshire through the Talk Community programme, is vital as Herefordshire faces some significant demographic challenges. Herefordshire has an older population than the national average with 26%residents over 65 years of age. This population is living longer with the 85+ population growing faster than the UK average. This aging population is found more in the rural areas of the County with 28% of over 65’s living alone. The Annual report of the Director of Public Health ‘Ageing well in Herefordshire’ (2023) has set out in detail the challenges and opportunities arising from these trends. Herefordshire also has around 1050 people of all ages registered as having a learning disability but this is thought to be an underestimate. There is also an increasing number of over 65’s with a learning disability.

It is known that the groups described above are more vulnerable to safeguarding concerns. Some of the current risks in Herefordshire are set out in this report. The key role of the Board is to identify these risks and oversee the multi-agency work required to ensure we have in place a system which can identify those at risk and provide them with support.

This annual report provides an update on the work of the Board and the partnership. I am pleased to say that whilst we acknowledge there is always more to do this partnership works well together in making sure vulnerable adults are kept safe in Herefordshire.

Kevin Crompton

Independent Chair HSAB

**The role of the Safeguarding Adults Board**

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

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

SABs have three core duties. They must**:**

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

Herefordshire SAB follows the six safeguarding principles:

1. Empowerment: people being supported and encouraged to make their own decisions and give informed consent
2. Prevention: it is better to take action before harm occurs
3. Proportionality: the least intrusive response appropriate to the risk presented
4. Protection: support and representation for those in greatest need
5. Partnership: local solutions through services working with their communities – communities have a part to play in preventing, detecting and reporting neglect and abuse
6. Accountability and transparency in safeguarding practice

HSAB promotes Making Safeguarding Personal by:

Developing a safeguarding culture that focuses on the personalised outcomes desired by people with care and support needs who may have been abused is a key operational and strategic goal. HSAB aims to do this through:

* a broader participation strategy
* accessible information to support participation of people in safeguarding support
* a focus on qualitative reporting on outcomes as well as quantitative measures
* advocacy
* person-centred approaches to working with risk
* policies and procedures that are in line with a personalised safeguarding approach
* strategies to enable practitioners to work in this way, by looking at the skills they need and the support they are getting to enable this shift in culture

**Strategic priorities**

The strategic plan for 2023-26 was approved at Board May 2023 and includes a yearly business plan. This forms the foundation for the work of the sub groups to deliver the desired outcomes to safeguard the citizens of Herefordshire.

The current priorities for the HSAB are:

* Self-neglect - improving our response to understanding and managing self-neglect needs, making sure all agencies understand and respond to self-neglect.
* Exploitation - addressing the safeguarding issues and challenges arising from criminal exploitation including ‘cuckooing’, sexual exploitation, modern slavery, county lines, human trafficking and financial exploitation.
* Prevention - supporting initiatives and activities which prevent or reduce abuse and neglect and keep people safe.
* Neglect and omission - understanding the profile of neglect and omission occurrences within the County and identifying approaches and resources to mitigate the impact.
* Board effectiveness - ensuring the Board fulfills its statutory duties and is effective in its role of assurance of the safeguarding system.

The Board has also decided to focus on:

* Transitions for those moving from a child to an adult service, service to service or service to discharge in a safe and positive way.
* Following the Safeguarding Adults Review on adults with multiple and complex needs the Board has also been monitoring provision for those ‘rough sleeping’ in Herefordshire.

**What does safeguarding look like in Herefordshire?**

Every year the local council takes part in a survey, commissioned by the government, collecting multi-agency performance data and asking individuals about their experience of care. The data from this survey is used to produce national data comparing local authority areas. The latest data available is from the 22/23 survey. 23/24 data will be available in late autumn 2024.

Some key highlights from the 22/23 survey are:

**Proportion of people who use services who feel safe**

Safety is fundamental to the wellbeing and independence of people using social care, and the wider population. Feeling safe is a vital part of service users' experience and their care and support. The Board will continue to consider what factors are making 23% of people not saying they feel safe.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 |
| Herefordshire | 73.6% | n/a | 73.8% | 77.2% | TBA |
| West Midlands average | 71.7% | n/a | 70.5% | 89.0% | TBA |
| All England average | 70.2% | n/a | 69.2% | 87.1% | TBA |

Please note 2020/21 due to Covid surveys were not conducted so data unavailable

**Proportion of people who use services who say that those services have made them feel safe and secure**

The measure below reflects the extent to which users of care services feel that their care and support has contributed to making them feel safe and secure. This is a positive result for Herefordshire given the proportion who say they do not feel safe above.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 |
| Herefordshire | 90.2% | n/a | 89.2% | 91.3% | TBA |
| West Midlands average | 86.9% | n/a | 86.1% | 89.0% | TBA |
| All England average | 86.8% | n/a | 86.8% | 87.1% | TBA |

**Safeguarding concerns**

The following graphics relate to circumstances where safeguarding concerns were raised. All of this data is from the Local Authority information systems as currently limited information is available from partner agencies.

**About the concerns regarding abuse that have been raised**

The number of concerns has decreased over this reporting period by around 34%. A key factor is that the safeguarding team changed their referral process over the last year. The Senior Practitioner now triages all referrals before sending to the safeguarding team to add as AP1’s (safeguarding concerns) to Mosaic (the social care recording system). This is to ensure only safeguarding referrals progress to the safeguarding team to assess, rather than all referrals which meant the team were working on referrals that could have been signposted elsewhere. The statutory return only requests those referrals categorised through the AP1 form. In 24/25 the Board will now discuss with partners how we can track of the numbers being triaged which end up being referred to other social care / support pathways.

**Characteristics of those affected by safeguarding concerns**

In Herefordshire during 2023-24 the largest age band was in the 18-64 with 34% of all concerns.

24% of the individuals involved in safeguarding concerns were aged 85 or over

[](https://stock.adobe.com/uk/images/set-diverse-people-face-human-multi-generation-portrait-on-white-background-female-male-avatar-flat-vector-illustration/228196738)

58% of individuals involved in safeguarding concerns were female

39% of individuals involved in safeguarding concerns were male

(34 individuals were recorded as not known).

**Where abuse has occurred**

The diagram above depicts the location of the concern at the time of this being raised with the local authority.

[](https://stock.adobe.com/uk/images/house-icon/38563060)

Once again the largest number involve those in their own home (47%).

The most common type of abuse that people suffer from in their own home is Financial & Material (28%)

**What type of abuse has been reported?**

Financial and material and Psychological/Emotional were the most commonly reported types of abuse. Previously Financial and material and Neglect and Omission were the most reported.

**Source of risk**

The “source of risk” was personally known to the individual in 53% of 2021-22 concluded safeguarding enquiries, 41% of 2022-23 concluded enquiries and 48% of 2023-24 concluded enquiries.

The “source of risk” was providing a service to the person in 25% of 2021-22 concluded safeguarding enquiries, 23% of 2022-23 concluded enquiries and 23% of 2023-24 concluded enquiries.

**Mental Capacity**

[](https://stock.adobe.com/images/creative-human-head-chat-logo/249309404)

In 2021-22 safeguarding enquiries that were completed people lacked mental capacity in less cases (58) than had mental capacity (94).

In 2022-23 safeguarding enquiries that were completed people lacked mental capacity in less cases (52) than had mental capacity (84).

In 2023-24 safeguarding enquiries that were completed people lacked mental capacity in less cases (30) than had mental capacity (70).

**Advocacy**

Where the person was assessed as not having capacity in 2021-22 32% and in 2022-23 33% were provided with either formal or informal advocacy. In 2023-24, there were 25% such service users which has reduced compared to the previously reported figure. The Board will be reviewing this data to understand why more advocacy is not taken up or provided.

**Making Safeguarding Personal**

In 2021-22 94.6% in 2022-23 76.2% and in 2023-24 77.7% of people or their representatives were asked what they wanted the outcome of their safeguarding enquiry to be. Some investigation into why this figure is so greatly reduced needs to be carried out.

Outcomes were partially or fully achieved in 77.1% of concluded safeguarding enquiries in 2021-22, 75% in 2022-23 and 82% in 2023-24. This is a significant increase in the figure last reported.

The number of concluded enquiries were it was assessed that the risk of abuse or neglect for the person was

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | **2021-22** | **2022-23** | **2023-24** |  |
|  |  |  |
| |  | | --- | |  | |  | **21%** | **20%** | **18%** | **Removed** |
|  |  |
|  |  | **55%** | **54%** | **50%** | **Reduced** |
|  |  |
|  |  | **8%** | **12%** | **14%** | **Remained** |
|  |  |

**How the Board works to deliver results**

The Board brings together representatives from:

* Herefordshire Council social care and public health teams
* Herefordshire and Worcestershire Integrated Commissioning Board (responsible for the purchase of health care)
* Wye Valley NHS Trust and Herefordshire and Worcestershire Health and Care NHS Trust (health care providers)
* Healthwatch
* West Mercia Police
* National Probation Service
* West Midlands Ambulance Service NHS Foundation Trust
* Hereford & Worcester Fire and Rescue Service
* Members from provider and voluntary services

This multi-agency approach ensures that all partner organisations work cohesively, using the same information and communicate consistent messages to provide the strategic direction for the work undertaken on their behalf.

It is the task of the Strategic Board to agree the priorities for the year, in consultation with Healthwatch and the community.

Sub groups develop work plans which contain the activity required to deliver the priorities. Each sub group chair is responsible for reporting successes, developments and any barriers to progress to the Board.

**What the sub groups have delivered this year**

**Performance and quality assurance (PAQA)**

Terms of reference:

This group is responsible for data quality, audit and effective information systems to meet current and future expected national and local data reporting requirements and enable performance to be managed and reasonable assurance secured on the quality of local safeguarding.

Attendance has improved over the last 12 months. Quoracy has been achieved at every meeting that took place. The consistent attendance by the statutory agencies has been a valuable addition to the work PAQA is doing.

Review of non-statutory partners attendance is an ongoing element of PAQA discussion, it remains an area which requires improvement. However, thanks must go out to all agencies as it is recognised that pressure across the entire system continues to have significant implications for PAQA’s attendance, but attendance this year has improved.

PAQA aims to improve the range of performance data it can use to inform the work of the partnership. In particular the group needs consistent representation by a Local Authority data analyst to support the provision of available data for PAQA and for advice on the structural elements of PAQA work. The aim is to also develop a multi-agency adult safeguarding data scorecard.

**Work plans 2023-24.**

* The Complex Adult Risk Management (CARM) Audit was completed and a report presented to HSAB Executive. The audit identified a need to improve our approach and this is now a 24/25 work stream.
* The Regional Multiagency Care Act Audit was completed and challenge events held with all agencies who completed the audit. Each agency was consulted separately on their responses by members of PAQA. Action plans were developed where required by agencies which continue to be monitored by PAQA. A Report was presented to the HSAB. This audit provided assurance that all agencies were complaint with their responsibilities and that adult safeguarding was a priority for them.

* Staff survey on agencies safeguarding knowledge completed. Action plans developed which continue to be monitored by PAQA,
* Neglect and omission audit completed and report shared with HSAB. Responses to instances of neglect and omission were appropriate in all cases analysed. Respondents understood the criteria.
* Advocate use for service users without mental capacity referred into adult safeguarding remains above 80% consistently.
* Self-Neglect and Hoarding audit carried out and recommendations made re use of assessment tools and information sharing across agencies. Report completed for HSAB.
* Safeguarding data has been presented at the PAQA meetings. Currently this is only Social Care safeguarding data and other agencies are unable to provide data to the meetings. PAQA will be reviewing the availability and use of multi and single agency data in 24/25.

**Key Issues identified**

* As previously referred to, consistent multi agency attendance is required for PAQA to be consistent in its aims and objectives that are presented through the work plan. A change of emphasis to learning from SARs and other adult safeguarding learning methods, such as the Rapid Review process, is intended to give the HSAB PAQA subgroup clear direction in the work that it is required to do. The triangulation with these learning methods and the county’s data from all agencies remains critical to PAQA’s work and progress over the next year.

* Although Section 42 conversions at 10% is an increase on the previous year the figure remains low. There is considerable work completed by the Adult Safeguarding Team on all cases unconverted and converted that is not captured in the current data.
* Notification of concerns raised about a domiciliary care provider, based in Manchester, who is at Level 3 of HCC QA process. This is the level at which new business is suspended. Investigating agencies have raised people trafficking and modern slavery concerns. Also, multiple complaints have been received about this provider.

**Examples of impact of PAQA work on practice and/or outcomes**

* All the audits have provided both assurance and identified deficits where actions are needed. Action plans and requests for assurance have been developed and requests sent to individual agencies where assurance is required.
* It is recognised that capacity of services from across the system remains a challenge with vacancy rates and recruitment posing problems. Ongoing requests for audit and other safeguarding information for PAQA increase the burden on all services, but the continued cooperation of all agencies enables HSAB and PAQA’s work to progress and to improve adult safeguarding processes across Herefordshire. The burden of the required work will require ongoing review by PAQA and HSAB during the coming year.

* Closer links with the HSAB Training & Workforce Development Subgroup are intended to bring some coterminous aims and objectives that are synchronised to produce consistent outcomes for all partners in adult safeguarding and HSAB.

**Policies and procedures**

Terms of reference:

Work is undertaken jointly with Worcestershire (as we have so many partners working across both Counties). We have a working protocol that has been signed off by both Boards.

During the 23/24 year we updated our Self-neglect and Hoarding policy, Information Sharing Protocol and commenced a review of our Complex Adult Risk Management guidance.

A review and update of the local Safeguarding Adults Review guidance was undertaken to include additional information to aid practitioners

The West Midlands regional policy group, of which Herefordshire is a contributor, has also updated the regional Safeguarding policy

**Joint Case Review (JCR)**

Terms of reference

The Joint Case Review Sub Group (JCR) is accountable to the Herefordshire Childrens Safeguarding Partners, Herefordshire Safeguarding Adults Board and Herefordshire Community Safety Partnership.

Herefordshire Children’s Safeguarding Partnership has a legal duty to undertake reviews of serious child safeguarding cases (Local Child Safeguarding Practice Reviews LCSPR’s) where children have died or suffered serious harm, the criteria for such reviews is set out in Working Together 2023

Herefordshire Safeguarding Adults Board. The Care Act 2014 states that Safeguarding Adult Boards (SABs) must arrange a Safeguarding Adult Review (SAR) when an adult in its area dies as a result of abuse or neglect, whether known or suspected, and there is concern that partner agencies could have worked together more effectively to protect the adult. The criteria for such reviews is set out in the Care Act 2014 (See Care Act Guidance 2016)The Chair of HSAB has the responsibility for decision making about whether to conduct a review in individual cases.

Herefordshire Community Safety Partnership. Overall responsibility for establishing a Domestic Homicide Review rests with the local Community Safety Partnership (CSP) Statutory Guidance under section 9(3) of the Domestic Violence, Crime and Victims Act 2004 (the 2004 Act)1.

In 23/24

* Five referrals for Safeguarding Adults Reviews were received
* One did not meet criteria for review as the individual did not have Care and Support needs
* During the triage meeting for one referral JCR identified extensive domestic abuse in the life of the individual, it was therefore decided that a joint DHR / SAR approach was most appropriate.
* Three referrals for SAR’s were scoped but did not meet criteria however learning was identified. Examples of learning identified are –
* recommendations parallel to those of the thematic premature deaths review
* strengthening of the CARM process
* improving multi-agency practitioners understanding of the Mental Capacity Act and duty to carry out assessments
* lack of professional curiosity
* poor recording

All reviews have an action plan including multi-agency recommendations which are regularly updated.

**Training and Workforce Development**

**Terms of reference:**

This group is responsible for agreeing and maintaining Herefordshire’s competency framework and provides evidenced assurance that partner agencies are meeting the requirements of the framework.

The group has particular responsibility to promote and facilitate multi-agency development opportunities for all practitioners, including disseminating learning from case reviews. By undertaking such activities, the group seeks to empower the workforce to be skilled and confident in adult safeguarding.

**Activity in 2023/24**

Attendance from multi-agency partners on Training and Workforce Development (TWD), and Chairing, remained consistent through 2023-24. The group met twice in 2023-24, with two meetings unfortunately being cancelled due to competing demands, however work continued in-between meetings through e-mail communications.

The agreed approach to workforce development and training for HSAB is to support a multi-agency Competency Framework, which details the level of training required for each role. Agencies are encouraged to share resources and, where appropriate, offer spaces on their safeguarding courses to other organisations. HSAB and its partner’s offer multi-agency training and learning events where a need is identified through quality assurance exercises, including case reviews.

During this annual report period, TWD contributed to the priority areas within the HSAB Strategic Plan. This included:

* Further promotion and dissemination of HSAB Self-Neglect and Hoarding Policy and Practitioner Resources.
* Introduced a limited-time training on the Mental Capacity Act & DOLS, delivered by the NHS Health and Care Trust. Courses started in March 2024 and will continue until December 2024. This was to address a gap identified in SARs regarding practitioners’ understanding of the MCA and their duties.
* Awareness raising on when to refer for Care and Support Assessments, and identifying individual who may be referred for Care and Support Assessments
* Regular promotion of the Complex Adults Risk Management process through the partnership bulletin and

In addition, Trauma-Informed Practice training was commissioned and offered to all staff and volunteers in Herefordshire who work with children, families and/or adults.

TWD was not able to progress planned activity on adult exploitation or carer assessments due to delays in developing/finalising the policies for each of these.

**Multi-Agency Adult Safeguarding Courses offered in 2023-24 and attendance figures:**

In total, 610 delegates attended courses in 2023-24 across the adult safeguarding themes.

|  |  |
| --- | --- |
| **Trauma-Informed Practice: Principles and Foundations**  Funded by the NHS ICB and Public Health | 162 attended |
| **Mental Capacity Act and DOLS**  Delivered by the NHS Health and Care Trust | 17 attended |
| **Domestic Abuse Courses (West Mercia Women’s Aid)**   * Domestic Abuse and Learning Difficulties in Adults – 15 * Domestic Abuse and Older People – 34 * Domestic abuse and the Rural context – 14 * Domestic Abuse and Trauma – 56 * Honour Based Abuse including Female Genital Mutilation and Forced Marriage – 21 * Raising Awareness of Male Survivors of Domestic Abuse -13 * Understanding Stalking and Harassment – 30 * Violence against Women and Girls – 12 * Working to address Housing Issues – 10   Commissioned by the Community Safety Partnership, with funding from the Office of the Police and Crime Commissioner | 205 attended |
| **Curiosity Saves Lives – Multi-agency Domestic Abuse Training**  Commissioned by the Community Safety Partnership, with funding from the Office of the Police and Crime Commissioner | 79 attended |
| **MARAC Awareness Training** | 23 attended |
| **Delivering Substance Use Interventions with Adults**  Delivered by Herefordshire Recovery Service – Turning Point | 21 attended |
| **Overdose Awareness and Naloxone Training** | 39 attended |
| **Exploitation and Vulnerability**  Delivered by West Mercia Police vulnerability trainers | 64 attended |

*Impact of multi-agency training courses – Evaluation Feedback from course delegates:*

“I do not currently complete Mental Capacity Assessments. However, I am training to be a Social Worker. This training will be beneficial when the time comes to have to complete an assessment as I will not be as fearful to do so.”

“Will help me in my role as a fire service prevention technician to understand the members of public I go to see to give advice to.”

“[I will use the course materials] daily with spotting ambivalence, helping folk evaluate their ambivalence, asking open questions, helping them explore strategies for meeting goals.”

“even though I am an experienced practitioner, I never had specific training in this area before even though a lot of cases we work have Domestic Abuse issues as a concern”

“I now feel confident to ask the right questions with professional curiosity.”

**Learning events:**

The annual White Ribbon Domestic Abuse Conference was held in November 2023, which this year was on the theme “Changing the Story.” Over 200 delegates from both Herefordshire and Worcestershire attended this event.

One Practitioner Forums was organised during this reporting period, with good attendance and engagement from a range of partner agencies. The Practitioner Forums are held as joint adult and child safeguarding events, which is in line with Think Family approaches.

The October 2023 Practitioner Forum was attended by approximately 50 delegates from a range of multi-agency organisations. This included a presentation from the Adult Social Care Principle Social Worker on Understanding Mental Capacity and Care Act Assessments/Eligibility, and a presentation by Turning Point about their services for drug and alcohol recovery.

*Feedback from Practitioner Forum Delegate Feedback:*

What did you learn?

“Developed knowledge on MCA - I have had experience previously but this was a great refresher and well presented by PSW in adults.”

“The services and work Turning Point offer and the hubs now available in Herefordshire. The referrals and treatment pathways available - quick turn around time.”

HSAB undertook a Care Act Self-Assessment exercise 2023, which offered an insight into learning and development profiles across the key partner agencies of HSAB.

The following table presents agencies’ self-assessment grading across the key questions related to learning, development and supervision.

|  | **Number of agency responses in each self-assessment grading** | | | |
| --- | --- | --- | --- | --- |
| Question | Inadequate | Requires Improvement | Good | Outstanding |
| The organisation has a clearly communicated Learning and Development Programme: | 0 | 3 | 5 | 1 |
| The organisation has a mandatory induction process for all staff and volunteers that includes familiarisation with their responsibilities for safeguarding and promoting the welfare of adults with care and support needs | 0 | 0 | 7 | 2 |
| Staff working and volunteering with adults receive regular management supervision and appraisals on an individual basis. | 0 | 2 | 6 | 2 |
| Organisations can evidence that supervision (including clinical/specialist) is happening on a regular basis for all staff and volunteers | 1 | 3 | 5 | 1 |
| Total | 1 | 8 | 23 | 6 |

On average across the responses, the majority of agencies graded themselves “Good” or “Outstanding” across the key questions about learning, development and supervision.

Having a clearly communicated Learning and Development Strategy, and being able to evidence that supervision is happening on a regular basis, are the two areas that appeared to be weaker among agencies.

Check and Challenge sessions were held to review individual agency responses, and each agency has developed an action plan to address areas of weakness. These action plans are being complete throughout 2023-24.

**Appendix 1. Business Plan Progress**

| Activity | Group | Q1 | Q2 | Q3 | Q4 | RAG |
| --- | --- | --- | --- | --- | --- | --- |
| PRIORITY ONE - Self-neglect and Hoarding – Year one  Deliverable: Establish a dataset, benchmark and build practitioner knowledge of self-neglect and hoarding | | | | | | |
| Develop self-neglect dataset. | PAQA |  |  | Request MOSAIC data |  |  |
| Progress | Data received from Mosaic | | | | | |
| Incidents of self-neglect are responded to in line with policy | PAQA |  |  |  | Agree hypothesis and audit, to include review of any relevant policies |  |
| Progress | Nov 23: Self neglect and Hoarding Policy is currently under review, consultation end Nov. Audit due to take place December  Jan 24: Revised document to be approved. Audit delayed due to capacity issues, scheduled 14/02/24  Mar 24: Audit completed and action plan developed. | | | | | |
| Practitioners are aware of appropriate tools when working with self-neglect | TWD | Practitioner Forum – Self-Neglect and Hoarding presentation | Dissemination of Self-neglect materials via T&WD (slides, recording, briefing) | -Canvass current agency tools  -Partnership Bulletin Self-neglect message | -Explore Multi- Disciplinary  risk assessment tool  -Partnership Bulletin Self-neglect message  Planning for practitioner forum |  |
| Progress | Jan 24:  Regional self-neglect film has been approved for use in Herefordshire, copy available on website and information included in Partnership Bulletin.  Self-neglect and hoarding presentation was delivered at Practitioner Forum on 24 March 2023, and publicised through the Partnership bulletin and single agency communications.  Dissemination resources – slides, learning briefing, recording, were created in April 2023 and disseminated through the partnership bulletin. TWD members disseminated through their own networks in Sept 2023.  Reminder about Self-Neglect and Hoarding policy published in Partnership Bulletin 4th Jan 2024  TWD members reported that they do not have any single agency tools that are used around Self-Neglect, apart from the Hoarding Scaling document that is used by F&R and some agencies. | | | | | |
| Re-introduce the self-neglect and hoarding group | Partnership Team |  | Principle Social Worker present proposal | Approach members |  |  |
| Progress | Nov 23: Approach has been made to partner agencies, plan to hold inaugural meeting November. Terms of reference under review, will include any recommendations from previous SARs  Jan 24: Chair nominated. Partner agencies have agreed ToR. Meeting still to be scheduled, ongoing health issues have resulted in delay.  Mar 24: Inaugural meeting scheduled. Regular meetings to take place through 24/25 | | | | | |

| Activity | Group | | Q1 | | Q2 | Q3 | | | Q4 | RAG |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| PRIORITY TWO - Exploitation – Year one  Deliverable: Establish a multi-agency response to exploitation to include a dataset | | | | | | | | | |  |
| Develop exploitation dataset | PAQA |  | |  | | | Request MOSAIC data |  | |  |
| Progress | Nov 23: The agreed definition of exploitation within Herefordshire is:   * Modern Slavery (including human trafficking) * Financial Exploitation (including scams, doorstep crime and rogue traders) * Radicalisation to commit acts of terrorism. * Any Sexual Exploitation * Criminal Exploitation * other Exploitation that enables services or benefits of any kind, including:   + Removal of organs   + Forced marriage   + Illegal adoption   MOSAIC currently only identifies sexual exploitation and modern slavery within its structure. PAQA will interrogate information available to better understand how other forms of exploitation can /should be identified. Issue also to be raised with regional procedures group via PSW.  Jan 24: PAQA have reviewed data, currently issue stands. Work will continue to improve understanding.  Mar 24: Data provided by Police records modern slavery, financial exploitation and scams, immigration crime, county lines and cuckooing and adult sex workers. Herefordshire numbers are very low or 0 in all cases. PAQA to continue to improve the local picture | | | | | | | | | |
| A “home invasion” procedure that protects the adult being criminally exploited in their homes | Policies | |  | | Add to Policies work plan |  | | |  |  |
| Progress | Nov 23: Responsibility for this Policy sits with the Police, work has commenced collating responses from across the region for review  Mar 24: Policy still in development. Police representative to update current policy to include reference to new terminology. | | | | | | | | | |
| Agree an adult exploitation strategy and pathway ensuring that those transitioning from childrens are safeguarded | Exploitation project team | |  | |  |  | | | Present proposal to Board |  |
| Progress | Nov 23: Initial meetings have been held, still to agree strategy, policy and pathway.  Jan 24: Meetings have been sporadic due to capacity issues. Further meeting scheduled. Draft strategies from other areas have been shared for comment.  Mar 24: Project team continuing with development of strategy, policy and pathway over 24/25 | | | | | | | | | |
| Audit to establish practitioners knowledge of exploitation | PAQA | |  | |  | Agree hypothesis and audit, to include review of any relevant policies | | |  |  |
| Progress | Nov 23: Review of regional exploitation policies has been agreed and will take place 2024. Local Adults policy still to be devised following agreement of strategy.  Any audit will have to be driven by information from the other sources due to limitations of MOSAIC identified above.  Jan 24: Meeting with CSC representatives has been held and a methodology agreed. Audit will now take place Q4.  Mar 24: Capacity issues have resulted in this audit being scheduled Q1 24/25 | | | | | | | | | |

| Activity | Group | Q1 | Q2 | Q3 | Q4 | RAG |
| --- | --- | --- | --- | --- | --- | --- |
| PRIORITY THREE - Prevention – Year one  Deliverable: | | | | | | |
| Implement a multi-agency approach to the safeguarding front door | Strategic Partners |  | Agree project plan and partners | Agree arrangements at Board |  |  |
| Progress | Nov 23: Project team has been established and scoping is now underway. ADASS supported workshop is planned.  Jan 24: Project team has linked with the regional project group. Project Board has membership and support from across the partnership. HSAB Business Plan dates to be realigned to project plan dates, RAG rating to be amended to reflect change  Mar 24: Project Team meet regularly and progress is being made. Proposal to be shared at Board meeting May 2024. | | | | | |
| How effective is our approach to working with adults with multiple disadvantage | Strategic partners |  |  |  |  |  |
| Progress | Nov 23: Assurance still to be sought that the strategic changes necessary are planned  Jan 24: Limited assurance provided to date.  Mar 24: | | | | | |
| Improve understanding of when to refer for Care and Support Assessment | TWD |  |  | Partnership Bulletin scheduled message  Practitioner Forum Presentation | Partnership Bulletin Scheduled message |  |
| Progress | Nov 23: Assessments included in October Partnership Forum attended by in excess of 50 delegates  Mar 24: Messages included in Partnership Bulletin | | | | | |
| Improve understanding of when to refer for Carers Assessment | TWD | Partnership Bulletin - Carers Week promotion |  |  | T&WD focus on Carer materials, language & dissemination  Planning for practitioner forum – tbc depending on Carer Strategy |  |
| Progress | Jan 24: Carers strategy is currently under review, this work stream will recommence once that is launched.  Mar 24: Carers strategy is currently going through the governance process and is due for launch during Carers week 2024. Activity regarding this will be scheduled for Year Two. | | | | | |
| Improve understanding of when to refer for Young Carers Assessment | TWD | Partnership Bulletin - Carers Week promotion |  |  | T&WD focus on Carer materials, language & dissemination  Planning for practitioner forum – tbc depending on Carer Strategy |  |
| Progress | Jan 24: Carers strategy is currently under review, this work stream will recommence once that is launched.  Mar 24: Carers strategy is currently going through the governance process and is due for launch during Carers week 2024. Activity regarding this will be scheduled for Year Two | | | | | |
| Audit Mental Health Assessment journey | PAQA |  |  |  | Agree hypothesis and audit, to include review of any relevant policies |  |
| Progress | Jan 24: Research has been tabled, other LA feedback is being sought via the AMHP network.  Mar 24: Capacity issues have resulted in this audit being delayed. Activity regarding this will be scheduled for Year Two. | | | | | |
| Assurance that professionals understand when to refer for assessment | PAQA |  |  |  |  |  |
| Progress | Mar 24: All audits undertaken this year have considered referrals and evidence that agencies understand when to make a referral for assessment for care and support needs. It has to be noted that the sample size is very small and further work will continue during 24/25 | | | | | |
| Establish the understanding of non-stat agencies and their responsibilities re assessment | PAQA |  |  |  |  |  |
| Progress | Mar 24: This will be the focus of audit in 24/25 | | | | | |
| CARM coordinator role is established | Community Wellbeing |  |  |  | Business case approved |  |
| Progress | Jan 24: This will be considered as part of the Multi-Agency Task and Finish group. Business plan dates to be realigned to project plan dates, RAG rating to be amended to reflect change. | | | | | |
| Improve knowledge and awareness of CARM process | TWD | Practitioner Forum – CARM reflected in presentation on Self-Neglect & Hoarding |  | Partnership bulletin scheduled CARM message. |  |  |
| Progress | October 2023: Self Neglect and Hoarding presentation, included CARM, included in Practitioner Forum. CARM will be promoted in the Partnership Bulletin in February 2024  Mar 24: CARM continues to be promoted by agencies internally. | | | | | |
| Review of CARM procedure | Policies/ Procedures |  |  |  | Review of CARM to ensure fit for purpose |  |
| Progress | Jan 24: Multi- agency Task and Finish group has been established and initial meeting held. Board will be updated regularly as to progress. Business plan dates to be realigned to project plan dates, RAG rating to be amended to reflect change  Mar 24: CARM working group meeting held to review CARM document and process | | | | | |
| Census of women’s experiences of homelessness in the county | Rough sleeper outreach team |  |  |  | Update to Board |  |
| Progress | Jan 24: Update scheduled for Feb Board meeting  Mar 24: Findings from census presented to Board. | | | | | |
| A review of the national Ending Rough Sleeping Data Framework | Rough sleeper outreach team |  |  |  | Update to Board |  |
| Progress | Jan 24: Update scheduled for Feb Board meeting  Mar 24: Review of Framework presented to Board. Action plan from review to be shared once finalized | | | | | |

| Activity | Group | Q1 | Q2 | Q3 | Q4 | RAG |
| --- | --- | --- | --- | --- | --- | --- |
| PRIORITY FOUR – Neglect and Omission – Year one  Deliverable: Gain an understanding of this category of neglect, do practitioners recognise it for what it is, establish a dataset and benchmark | | | | | | |
| Develop neglect and omission dataset | PAQA |  |  | Request MOSAIC info |  |  |
| Progress | Nov 23: Information received as requested | | | | | |
| Audit of cases | PAQA |  |  | Agree hypothesis and audit, to include review of any relevant policies | Present Y1 audit findings to Board |  |
| Progress | Nov 23: Audit completed and presented to Board Q3, report shared with TWD group for information and action planning. | | | | | |
| Development and implementation of professional resources | Policies & Procedures |  |  |  | Using outcomes from audit assess the need to develop any policy or procedure |  |
| Progress | Jan 24: Audit did not highlight the need for any further policies or procedures that are not already scheduled (Escalation) | | | | | |
| Development and implementation of professional resources | TWD |  |  |  | Using outcomes from audit assess the need to develop and implement professional resources |  |
| Progress | Jan 24: TWD will discuss audit findings and any learning needs at its next meeting April 2024, however initial review of the findings indicates a need for further awareness raising on Mental Capacity Act and quality of safeguarding referrals. | | | | | |

| Activity | Group | Q1 | Q2 | Q3 | Q4 | RAG |
| --- | --- | --- | --- | --- | --- | --- |
| PRIORITY FIVE – Board Effectiveness – Year one  Deliverable: The Board has fulfilled all of its statutory functions. | | | | | | |
| Implementation of regional audit tool | PAQA | Collate responses | Initial report to Board | Challenge events | Final report to Board |  |
| Progress | Nov 23: Regional tool has been completed by all relevant agencies and challenge events held. Some amendments to the tool have been requested and will be discussed at regional meeting to be held mid-November.  Jan 24: Changes to regional audit tool agreed, to be implemented Spring 24. | | | | | |
| Review governance surrounding this and other partnerships and boards | Independent Chair | Hold back to basics event | Proposal to Partners for approval |  | Review of new arrangements | Complete |
| Progress | Nov 23: Proposal for changes in SAB reporting have been agreed | | | | | |
| Develop and implement an agreed multi-agency outcomes / dataset for the Board. | Strategic leads  PAQA |  | Current performance reporting requested from Partners | Review returns |  |  |
| Progress | Nov 23: Requests for information have been sent and Partners are progressing  Jan 24: Returns received. To be reviewed at next PAQA business meeting (Mar 6th) | | | | | |
| Develop and implement an agreed audit programme, which will test the extent to which learning from SARs has impacted front line delivery. | Strategic leads  PAQA |  |  |  | Audit schedule presented to Board for discussion / approval |  |
| Progress | Jan 24: PAQA has a comprehensive audit schedule centred on Board priorities. Capacity issues have led to a slight delay in programme. PAQA will also receive single agency audit reports where appropriate. | | | | | |
| Develop and implement a communications strategy for the Board, raising awareness of how to recognise and respond to adult safeguarding issues. | Strategic leads |  |  |  |  |  |
| Progress | Mar 24: No progress has been made on developing a Board communications strategy. | | | | | |
| Enable local people with lived experience of safeguarding to influence the work of the Board. | Strategic leads |  |  | Review models used across the region |  |  |
| Progress | Mar 24: No progress has been made on engaging with local people with lived experience | | | | | |
| Ensure that learning from SARs is widely disseminated so that similar multi-agency safeguarding practice issues are less likely to occur in future. | Partnership Team | Ensure learning is included in Practitioner Forums / Newsletters / Shared with Partners / 7 min learnings are disseminated | Ensure learning is included in Practitioner Forums / Newsletters / Shared with Partners / 7 min learnings are disseminated | Ensure learning is included in Practitioner Forums / Newsletters / Shared with Partners / 7 min learnings are disseminated | Ensure learning is included in Practitioner Forums / Newsletters / Shared with Partners / 7 min learnings are disseminated |  |
| Progress | Mar 24: Learning from reviews is disseminated as defined above, changes to practice are evidenced by PAQA audit. | | | | | |
| Produce an annual report | Partnership Team / Chair | Gather sub group reports and dataset | Draft report to Board for approval  Publish on website |  |  |  |
| Progress | Mar 24: Annual report is progressing in line with schedule. | | | | | |

**Appendix 2**

**Meeting attendance**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Meeting and Frequency** | Board | PAQA | TWD | JCR |
| 4/yr | 8/yr\* | 2/yr | 4/yr |
| **Agency** |  | | | |
| **Community Wellbeing** | 4 | 5 | 2 | 1 |
| **Healthwatch** | 2 | 0 | 0 | 0 |
| **Hereford & Worcester Fire & Rescue Service** | 2 | 1 | 0 | 4 |
| **Herefordshire and Worcestershire Health and Care Trust** | 3 | 4 | 0 | 4 |
| **Herefordshire and Worcestershire ICB** | 2 | 5 | 2 | 4 |
| **Hvoss** | 1 | 0 | 0 | 0 |
| **Lead Member** | 1 | 0 | 0 | 0 |
| **National Probation Service** | 0 | 0 | 0 | 4 |
| **Public Health** | 1 | 0 | 0 | 0 |
| **West Mercia Police** | 3 | 5 | 1 | 4 |
| **Wye Valley NHS Trust** | 3 | 3 | 1 | 4 |
| **Turning Point** | 0 | 0 | 2 | 0 |

\*3 meetings cancelled

**Appendix 3 - BUDGET**

To deliver the above, the Partnership Team is used, which is a multi-agency funded team overseeing the work of the Board and its sub groups. The unit is funded as follows:

|  |  |  |
| --- | --- | --- |
| **AGREED BUDGET FOR 2023-24** | | **%** |
| Children's and Families | £155,763 | 33.0% |
| Community Wellbeing | £144,899 | 30.7% |
| Integrated Care Board | £101,857 | 21.6% |
| Police | £69,400 | 14.7% |
| *Drawn from Reserves* | *£9,254* | - |
| **Total Gross Budget** | **£481,173** | **100%** |

Contributions from statutory partner agencies

**Note:** This total contribution is for the support of the Herefordshire Safeguarding Adults Board, Herefordshire Safeguarding Children’s Partnership and the Community Safety Partnership



Herefordshire Safeguarding Adults Board

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