

# Derby Safeguarding Adults Board

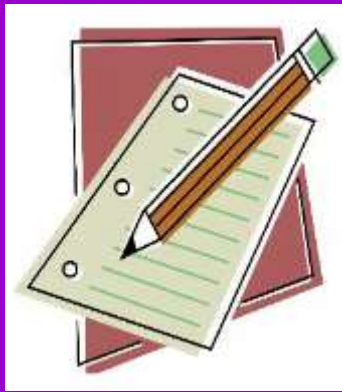


**Annual Report 2021-2022**

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# 1. Statement from the Chair



## 1.1 Foreword

Welcome to this Derby Safeguarding Adults Board (DSAB) annual report for 2021/22.

Once again this has been another challenging year due to the ongoing Covid situation. However due to the tremendous vaccination programme we have seen less people dying and suffering serious illness which is testament to those who developed the programme.



The partners on our board have continued to meet remotely every quarter ensuring that we continue in our work to achieve the strategic aims of our plan. Our subgroups have also continued to meet despite the tremendous pressures colleagues have faced within their own individual organisations.

The board has also maintained its links both at a regional and national level enabling it to keep up with the ever-changing landscape in adult safeguarding. Going forward we will be preparing ourselves for the changes being brought about by the new Integrated Care System model.

All of the details outlining our work during the year can be found within the report. As always, I am extremely grateful for the support of all partners contributing to the work of the board and support to myself and would place on record my thanks to them all.

I sincerely hope that you will find the time to read the report.

Best wishes

*Allan Breeton*

Independent Chair, Derby Safeguarding Adults Board

# **2. Derby Safeguarding Adults Board (DSAB) 2021-22**



## **2.1 Derby Safeguarding Adults Board (DSAB)**

### **Who are we and what we do:**

The Derby Safeguarding Adults Board (DSAB) is a multi-agency partnership which became statutory from 1<sup>st</sup> April 2015 following the Care Act 2014.

The DSAB consists of senior representatives from the following:

- Derby City Council (DCC)
- NHS Derby and Derbyshire integrated Care Board (ICB)
- Derbyshire Constabulary
- Derbyshire Healthcare NHS Foundation Trust (DHCFT)
- Derby Homes
- DHU Healthcare
- East Midlands Ambulance Service (EMAS)
- Derbyshire Community Health Service NHS Foundation Trust (DCHS)
- University Hospitals of Derby and Burton (UHDB) NHS Foundation Trust
- Derby City and Neighbourhood Partnership
- Care Quality Commission (CQC)
- Derbyshire Police and Crime Commissioner (PCC)
- National Probation Service Midlands
- Derbyshire Fire and Rescue Service
- Public Health
- Health Watch Derby
- NHS England
- Department of Work and Pension
- Diocese of Derby

The Board has been independently chaired for 11 years by Allan Breeton and he continues to provide an independent perspective, challenge and support to the Board in order that it can meet its strategic objectives.

The Board meets quarterly and has robust governance arrangements across and within agencies. The Chair of the Board ensures that links are made with other Boards that impact on Safeguarding Adults in Derby, including the Derbyshire Safeguarding Adults Board, Derby City and Derbyshire Safeguarding Children Partnership, the Health and Well Being Board and the Derby City Prevent Strategy Board.

The DSAB plays an important role in the strategic development of adult safeguarding locally. The objective of the DSAB is to assure that local safeguarding arrangements and partners act to help and protect adults in Derby City who meet the criteria set out in the Care Act 2014.

The criteria apply to anyone aged 18 or over who:

- Has needs for care and support (whether or not the local authority is meeting any of those needs), and
- Is experiencing, or at risk of, abuse or neglect, and
- As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect

## 2.2 Derby Safeguarding Adults Board Aims:

Derby Safeguarding Adults Board recognises that being greater than the sum of its parts it will ensure that partners work together to:

- stop abuse or neglect
- prevent harm
- reduce the risk of abuse or neglect to adults with care and support needs
- safeguard adults in Derby in a way that supports them in making choices and having control about how they want to live

## 2.3 Resources and Funding:

All partners who sit on DSAB contribute resources for the Board to meet its statutory requirements. This is achieved through:

- Funding from statutory and non-statutory partner agencies (Derby City Council, NHS Derby and Derbyshire Clinical Commissioning Group, Derbyshire Constabulary, Derbyshire Fire and Rescue Service and Derby Homes). The total contribution that the Board received for 2021-22 was £212,214
- Staff support/resources – for example attending Board and Subgroup meetings, providing administrative support
- Projects/work run by partner agencies that contribute towards the work of the Board

## 2.4 Board Subgroups:

The Board work programme is supported by its six sub-groups. Each subgroup comprising multi-agency representation across statutory and non-statutory services as well as health and social care organisations. Each subgroup is accountable to the Board in relation to achievements against the business plan and provides a highlight report for each Board meeting which focuses on the subgroups progress in respect of actions needed to implement the current Board Strategic Plan. The four key subgroups are:





## 2.4.1 Learning and Development (L&D) Subgroup

The Learning and Development (L&D) Subgroup is a joint subgroup with Derbyshire Safeguarding Adult Board, and was chaired by Kerry Pope, Derbyshire Constabulary.

The purpose of this Subgroup is to:

- take direction from Derby and Derbyshire SABs in relation to Learning and Development and agree priorities which meet the strategic objectives of both Boards
- support both SABs in meeting the requirements of national guidance/legislation and standards in service provision to safeguard adults who are in need of care and support
- identify, develop and maintain and promote a multi-agency safeguarding adults training programme
- promote a consistent approach to safeguarding adults across Derby and Derbyshire
- embed the principles of Making Safeguarding Personal within safeguarding training
- develop quality assurance tools to evaluate safeguarding training
- analyse learning identified from multi agency reviews and audits in relation to existing safeguarding adults training and identify gaps and areas for development.



The Learning and Development Subgroup has had another productive year. We have adapted really well to the online learning world and continued to arrange and facilitate two multi-agency training courses, 'Making Enquiries under s42 of the Care Act (2014)' and 'Chairing Meetings' during 2021/22. Making Enquiries under s42 of the Care Act (2014) has been running since February 2017 and the Chairing Meetings course has been running since March 2019. The courses have been really well attended and the feedback received from those that did was good.

For the group to move on to other areas of training we will no longer provide training from the board in respect of Making Enquiries under s42, this training package is now available for individual agency training.

A task and finish group have been meeting throughout 2021/22 to discuss Equality and Diversity. The subgroups aim is to ensure that that Equality and Diversity has consistent messages within training and the work that is carried out as a partnership. The work of this group has continued into 2022 and a training course has now been developed. The roll out of the training is pending sign off from the board, but it is anticipated delivery will commence in the last quarter of 2022.

The National Safeguarding Adults week took place in November 2021 and the partnership put on a number of training events. All courses were really well attended and feedback from the event was positive.



The group have developed a course planning and development checklist for agencies to consider when putting courses together. The checklist includes 'golden threads' of safeguarding that need to be included, ensuring that the relevant audience is specified and at what level the course is pitched at. This will drive consistency within the partnership.

The subgroup has an action plan linked to the three strategic priorities which both Derbyshire and Derby City Safeguarding Adults Board have adopted; these are Making Safeguarding Personal, Quality Assurance and Prevention. This action plan is reviewed at each meeting and shared with both Boards to monitor progress

### 2.4.2 Quality Assurance (QA) Subgroup



The Derby City Safeguarding Adult Board's Quality Assurance (QA) Sub-Group is chaired by Bill Nicol, NHS Derby and Derbyshire Integrated Care Board and is primarily concerned with assessing the quality and standard of inter-agency and partnership collaboration in ensuring that adults at risk are protected from abusive behaviour and practice.

Another productive year for the Quality Assurance Subgroup. Although operating under unique and challenging conditions due to the Covid Pandemic much was achieved in accordance with the Safeguarding Adult Boards three key priorities: Making Safeguarding Personal, Quality Assurance, & Prevention.

Emphasis was placed upon seeking assurance that front line staff were able to respond and work with partners to reduce the risk of adults at risk being subjected to abusive behaviour and practice.

This was achieved by collating and monitoring operational statistics in order to better understand themes and challenges. We also continued to audit case files in order to scrutinise the various aspects of safeguarding adult work.

It would be fair to state that agencies have worked well to ensure compliance with statutory requirements.

Another success has been the ongoing improvement and sophistication of systems which collate referral standards, rates, and trends. These figures provide insight into multi-agency partnership arrangements and the efficacy of performance.

The group have also produced Key Performance Indicators (KPIs) to better understand the work of key stakeholders and partners.



As Chair I would like to thank subgroup members for their ongoing commitment and contribution. We have more to do but the direction of travel is positive and there should be no doubt that progress has been achieved.

### 2.4.3 Mental Capacity Act Subgroup



The Mental Capacity Act (MCA) Subgroup is chaired by Emily Freeman, Head of Service for Safeguarding Adults and Professional Standards at Derby City Council. This is a joint subgroup for both Derby and Derbyshire Safeguarding Adults Boards. It is positively supported with representation from key statutory and non-statutory partners and is well attended.

The purpose of the MCA is to promote and safeguard decision making within a legal framework. The MCA empowers people to make decisions for themselves wherever possible and protects those who are unable to make decisions for themselves.



The MCA Subgroup sits under the Derby and Derbyshire Safeguarding Adults Boards and the aim of these Boards is to work with partners to:

- stop abuse or neglect
- prevent harm
- reduce the risk of abuse or neglect to adults with care and support needs
- safeguard adults in Derby and Derbyshire in a way that supports them in making choices and having control about how they want to live.

The MCA Subgroup meets quarterly, reviewing the Strategic Action Plan which links with Derby and Derbyshire's SABs three priorities: Making Safeguarding Personal, Quality assurance and Prevention.

Due to the global Coronavirus pandemic, it was agreed by DSAB to extend the second year of the Board's Strategic Plan, therefore the Action Plan for the MCA Subgroup agreed in 2020-21 was continued to 2021-22. During the pandemic the work of the MCA subgroup was paused to allow health and social care partner agencies to refocus resources to respond to the unprecedented emerging situation and by extending the second-year action plan, allowed the MCA Subgroup to meet its year two actions.

The following work has been undertaken by the Subgroup during 2021-22:

- Implementation of Newsletters highlighting key themes on MCA. The newsletters have been circulated to SAB members and have also been published on the SABs websites. This newsletter will continue to be published twice a year in 2022-23

- Activities reports are regularly discussed at the subgroup. Reports are received from partners such as health and from the Advocacy and IMCA Services
- Successfully published guidance around information available to young people, their carers and families about MCA to assist transition to adult services when the young person turns 18. The guidance was signed off by the Policy and Procedure Subgroup in January 2022
- Received recommendations from reviews (locally and nationally) that were relevant for the Subgroup, embedding any learning for example implementation of the MCA slides
- The Deprivation of Liberty Safeguards were due to be replaced with the Liberty Protection Safeguards in October 2020, however this was delayed due to Coronavirus. The MCA subgroup formed a Partnership Implementation Project Group to work collaboratively to develop as much joint policy, procedure and guidance as possible to ensure consistency across the city and county. This work will be progressed throughout 2022-23 in preparation for the implementation of LPS.
- Terms of Reference for the MCA Subgroup were reviewed to include the core values of Equality and Diversity
- Partners continued to share good practice, tools and information and scrutinizing the application of the MCA and DOLS across partner agencies

The following work is in progress and focus for the MCA Subgroup for 2022-23:

- Making Safeguarding Personal:
  - To look at how to obtain feedback from customers or their representatives
  - To develop a forward plan of items for the MCA newsletter, and explore expansion of audience from staff and professionals to include citizens
- Quality Assurance:
  - Receiving assurance from agencies that they are implementing the legal framework of the MCA within their organisations
  - To consider and develop Key Performance Indicators that demonstrate appropriate application of MCA within partner agencies
- Prevention:
  - To develop up to date information and awareness campaign on the preventative safeguards within the MCA, such as Lasting Power of Attorney and Advance Decisions to Refuse Treatment

#### **2.4.4 Safeguarding Adults Review (SAR) Subgroup**

The Safeguarding Adults Review (SAR) Subgroup is chaired by Andy Smith, Derby City Council. The SAR Subgroup looks at referrals submitted to the group which need to be assessed against the SAR Criteria.

The SAR Criteria is:

(1) A Safeguarding Adult Board (SAB) must arrange for there to be a review of a case involving an adult in its area with needs for care and support (whether or not the local authority has been meeting any of those needs) if:

- a) there is reasonable cause for concern about how the SAB, members of it or other persons with relevant functions worked together to safeguard the adult **and**
- b) either of the following conditions are met

(2) Condition 1 is met if:

- a) The adult has died, and
- b) The SAB knows or suspects that the death resulted from abuse or neglect (whether or not it knew about or suspected the abuse or neglect before the adult died)

Condition 2 is met if:

- a) The adult is still alive, **and**
- b) The SAB knows or suspects that the adult has experienced serious abuse or neglect

The DSAB signed off their first Safeguarding Adults Review (SAR01) in April 2021 and it was agreed that the recommendations will be followed up by the Quality Assurance Subgroup.

In March 2021, the SAR Subgroup commissioned a second Safeguarding Adults Review (SAR02). SAR02 was commissioned to an Independent Reviewer and is in its last stages of completion. It is hoped that the learning will be shared with partner-agencies following sign off of the report in January 2023.

#### **2.4.5 Making Safeguarding Personal (MSP) Subgroup**



The Derby City Safeguarding Adult Board's Making Safeguarding Personal (MSP) Subgroup is chaired by Perveez Sadiq, Derby City Council.

The focus of the MSP subgroup is to promote awareness of Safeguarding Adults across Derby City and to ensure that the views of Adults who have experience of safeguarding processes are used to inform practice development and stronger multi-agency working.

Progress during 2021-22:

The MSP Subgroup meeting quarterly, reviewing the Action Plan which links with the DSAB's three priorities: Making safeguarding Personal, Quality assurance and Prevention.

The following work has been undertaken by the Subgroup:

- Have now confirmed a Derby citizen as a member of the MSP Subgroup, who regularly provides feedback
- Created a template to record information on Community groups within Derby City with the aim of setting up outreach sessions and briefings for the next financial year
- Working alongside Healthwatch Derby, the subgroup have added questions on Healthwatch's generic survey for feedback re: safeguarding
- Have received four Dignity Award applications this year, of which one has passed, two have been contacted requesting additional information and one will be marked in February 2022
- The group is currently completing a piece of work around the 'Not Answered' for the regionally agreed MSP questions.
- The draft Communications Strategy document has been circulated for final feedback and to be signed off in February 2022
- Terms of Reference for the MSP Subgroup have been reviewed to include the core values of Equality and Diversity
- Continue to receive data information from the MI Team on MSP data
- 18 different briefings were delivered during the National Safeguarding Adults Awareness Week, in partnership with agencies



The following work is in progress and focus for the MSP Subgroup for 2022-23:

- **Making safeguarding personal** - to explore how to obtain feedback from customers. This includes general feedback and also around the MSP questions
- **Quality assurance** – To continue to monitor and analyse MSP data and explore how to improve completion rates
- To explore self-referral rates and how these can be improved
- **Prevention** – To implement an action plan in line with the Communication Strategy

#### **2.4.6 Policies and Procedures (P&P) Subgroup**

The Policy and Procedures (P&P) Subgroup is a joint subgroup with Derbyshire Safeguarding Adult Board, and is chaired by Zoe Rodger-Fox, Chesterfield Royal Hospital.

The purpose of the Joint Policies and Procedures Sub-group is to establish and review multi-agency policies and procedures and practice guidance in relation to safeguarding adults to ensure that staff are equipped to respond to safeguarding



adults concerns and promote the welfare of adults with care and support needs with the aim to:

- To support both SABs in meeting the requirements of national guidance/legislation and standards in service provision to safeguard adults who are in need of care and support.
- To identify, develop, review and promote multi-agency safeguarding adults policy, procedures and practice guidance. Existing guidance will not be reviewed unless there is a requirement due to:
  - A change in legislation or statutory guidance
  - The review date has arrived
  - A formal request is made via the Board or a SAB Subgroup that an amendment is required due to a factual inaccuracy.
  - Learning from a SAR/learning review/DHR requires a change to be made to existing guidance
- To promote a consistent approach to safeguarding adults across Derby and Derbyshire.
- To embed the principles of Making Safeguarding Personal within safeguarding policy and practice guidance.

This group has completed a review of the Terms of reference and the membership. The Chair and Deputy Chair were happy to continue with the agreement of the group, they are both from Health services and they are accompanied by a wide range of agencies as partner members. Engagement with the meeting has remained high throughout the year with contribution to the work plan being shared across the partnership. The group are eager to bring experts speakers and support into the group and have sought support and advice from Her majesty’s coroner, domestic abuse services and police colleagues.

There has been a full review of the work plan and reassignment of actions to support the group in moving forward with creations of new documents. The integrated policies and procedures were published, and a standing agenda item created where policy and procedure change requests can be reviewed to ensure timely change in line with new legislation and learning.

The group continue to risk assess the outstanding work and ensure new policies. Procedures and guidance are produced to meet the needs of the public and the partners. The table below highlights the progress the group have made during the year.

	2019-2021	2020-2021	2021-2022
RED - Document needed and not yet started	10	6	4
AMBER - Document being worked on or awaiting sign off	11	6	4
GREEN - Document in Place	26	42	51

# 3. Safeguarding and Deprivation of Liberty Safeguards (DoLS) Activity Report





## 3.1 Activity Reports:

### 3.1.1 Safeguarding Adults 2021-22 Data

The 2021-22 Safeguarding Adults Collection (SAC) records details about safeguarding activity for adults aged 18 and over and was amended in line with the changes brought about by the Care Act 2014.

Here is an explanation of some of the terminology used in the following data reports:

**Safeguarding Concerns:** This means cases where a sign of suspected abuse or neglect is reported to the council or identified by the council. Derby City Council have captured information about concerns that were raised during 2021-22, that is the date the concern was raised with the council falls within the reporting year, regardless of the date the incident took place.

**Safeguarding Enquiries:** This means the action taken or instigated by the local authority in response to a concern that abuse or neglect may be taking place. An enquiry could range from a conversation with the adult to a more formal multi-agency plan or course of action.

**Section 42 Safeguarding Enquiries:** The enquiries where an adult meets ALL of the section 42 criteria.

**Other Safeguarding Enquiries:** The enquiries where an adult does not meet all of the section 42 criteria but the council considers it necessary and proportionate to have a safeguarding enquiry.

The next two pages will highlight the total number of safeguarding referrals received 2021-22 with the following breakdown:

- **Number of safeguarding referrals received during 2021-22**
- **Safeguarding enquiries started and concluded during 2021-22**

## Total Number of Safeguarding Referrals received during 2021-22 and breakdown of individuals

Total Number of Safeguarding Referrals Received in 2021-22

4360

1%

Total Percentage decrease in Referrals from 2020-21

Total Number of Section 42 Safeguarding Enquiries

1900

## Ethnicity

2020-21	2021-22	Ethnicity
69%	68%	White / White British
1.7%	1.5%	Mixed / Multiple
5%	6%	Asian / Asian British
3%	4%	Black / African / Caribbean / Black British
1%	1%	Other Ethnic Group
16%	18%	Undeclared / Not Known

The average population of Derby City who are White/White British is **80%**

White/White British is the largest ethnicity group for safeguarding referrals with **68%**. The percentage, a decrease of 1% from the previous year

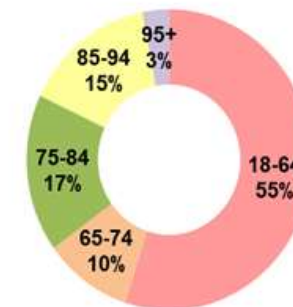
## Age and Gender



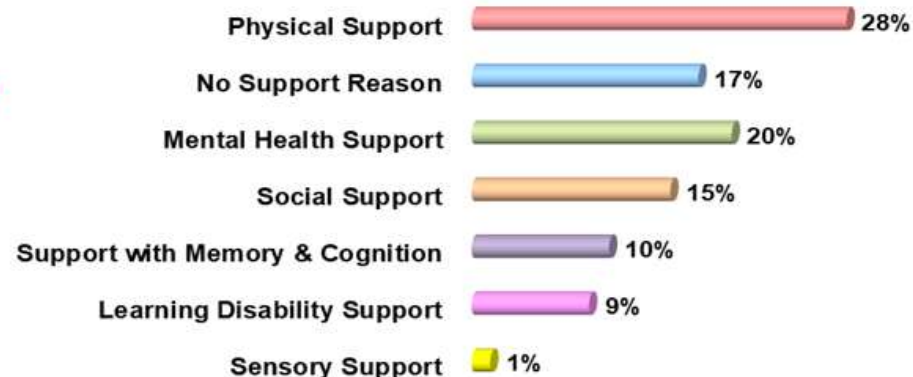
**45%** of those referred were males whilst **55%** were females. This is an increase in Referrals for males from 2020-21 by **1%**

The average population of females in Derby is **50.5%**

The highest figure for age group is 18-64 amounting to **55%**, the same as 2020-21



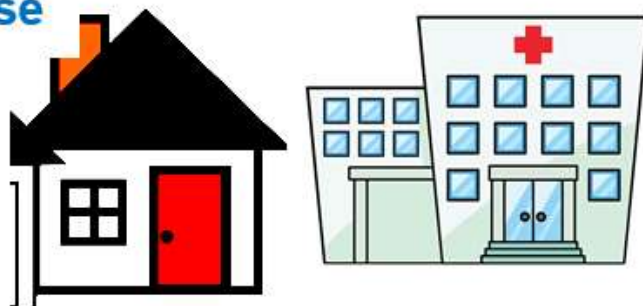
## Primary Support Reason



## Safeguarding Enquiries started and concluded during 2021-22

### Location of Abuse

**63%** of Safeguarding Enquiries concluded were where alleged abuse took place in the individuals own home. This is an increase of 2% from 2020-21.



**18%** of concluded referrals were where abuse took place in a care home, which is a **1%** increase from 2020-21 whilst **7%** were in a hospital setting, which is a 2% decrease from 2020-21

### Alleged Source of Risk



**7%** were experiencing abuse from a stranger or person not known

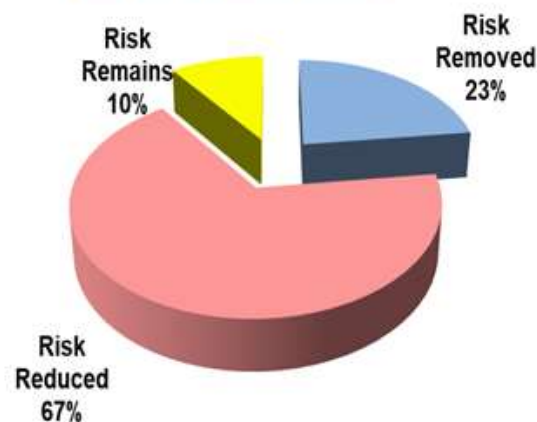
**58%** of abuse allegedly was by someone they knew. This is a **6%** decrease as 2020-21 reported **63%** of abuse was carried out by someone who they knew

**35%** of abuse was allegedly by a professional, which is an increase by **6%** from 2020-21

### Type of Abuse

2020-21	2021-22	Type of Abuse
26%	29%	Neglect and Acts of Omission
17%	15%	Physical Abuse
16%	13%	Self Neglect
12%	12%	Psychological Abuse
12%	12%	Financial or Material Abuse
7%	8%	Domestic Abuse
4%	6%	Organisational Abuse
4%	4%	Sexual Abuse
1%	1%	Sexual Exploitation
>1%	>1%	Modern Slavery
>1%	>1%	Discriminatory Abuse

### Risk Outcomes



**90%** felt that following the completion of the Safeguarding Enquiries, the risk was removed or reduced. This is a decrease of **1%** from 2020-21



### 3.1.2 Deprivation of Liberty Safeguards (DoLS) Data – 2021-22

The Deprivation of Liberty Safeguards, often referred to as DOLS came into effect in 2009. They are part of the legal framework set out in the Mental Capacity Act 2005 to safeguard the rights of people who lack the mental capacity to make decisions for themselves.

The European Court of Human Rights established in principle that 'no one should be deprived of their liberty unless it is prescribed by law'. The Deprivation of Liberty Safeguards were subsequently introduced to ensure, that in circumstances where a hospital or care home believe it will be necessary to deprive a person of their liberty in order to deliver a particular care plan, that any deprivation of liberty:

- is in the person's best interests
- is necessary and proportionate to prevent harm
- is with representation and rights of appeal
- is reviewed, monitored and continues no longer than necessary

What amounts to a deprivation of liberty depends on the specific circumstances of each individual case. As a result, there is no single definition or a standard checklist that can be used. However, in March 2014, a landmark Supreme Court judgement set out an 'acid test' for determining whether a person is being deprived of their liberty. The judgment states that if a person:

- lacks capacity to consent to their care and treatment and
- is under continuous supervision and control and
- is not free to leave

the person is being deprived of their liberty.

In July 2018, the government published a Mental Capacity (Amendment) Bill, which passed into law in May 2019. It replaces the Deprivation of Liberty Safeguards with a new scheme known as the Liberty Protection Safeguards.

The following information is a summary taken from [www.scie.org.uk/mca/dols/practice/lps](http://www.scie.org.uk/mca/dols/practice/lps) about the key features of the Liberty Protection Safeguards (LPS):

- They start at the age of 16-year-old.
- There is no statutory definition of a deprivation of liberty beyond what is set out in the Supreme Court judgement of March 2014, known as the acid test.
- Deprivations of liberty have to be authorised in advance by the responsible body.
  - For NHS hospitals, the responsible body will be the hospital manager.
  - For arrangements under Continuing Health Care outside of a hospital, the responsible body will be the local CCG.
  - In all other cases, the responsible body will be the local authority.

- For the responsible body to authorise any deprivation of liberty, it needs to be clear that
  - The person lacks capacity to consent to the care arrangements
  - The person has a mental disorder
  - The arrangements are necessary to prevent harm to the cared for person and proportionate to the likelihood and seriousness of that harm
- In order to determine this, the responsible body must consult with the person and others, to understand what the person's wishes and feelings about the arrangements are.
- An individual from the responsible body, but not someone directly involved in the care and support of the person subject to the care arrangements, must conclude if the arrangements meet the three criteria above (lack of capacity; mental disorder; necessity and proportionality).
- Where it is clear, or reasonably suspected, that the person objects to the care arrangements, then a more thorough review of the case must be carried out by an Approved Mental Capacity Professional.
- Where there is a potential deprivation of liberty in a care home, the Act allows care home managers – if the local authority felt it was appropriate - lead on the assessments of capacity, and the judgment of necessity and proportionality, and pass their findings to the local authority as the responsible body. This aspect of the Act has generated some negative comment, with people feeling that it might lead to insufficient independent scrutiny of the proposed care arrangements.
- Safeguards once a deprivation is authorised include regular reviews by the responsible body and the right to an appropriate person or an IMCA to represent a person and protect their interests.
- As under DoLS, a deprivation can be for a maximum of one year initially. Under LPS, this can be renewed initially for one year, but subsequent to that for up to three years.
- Again, as under DoLS, the Court of Protection will oversee any disputes or appeals.

The implementation date is yet to be confirmed.

# Total Number of Deprivation of Liberty Safeguards (DOLS) applications received – 2021-22

Total Number of DOLS Applications received in 2021-22

862

73

Total Numbers of Applications Granted in 2021-22

Total percentage of applications received from the hospital

11%

## Ethnicity

2020-21	2021-22	Ethnicity
89%	90%	White / White British
1%	0%	Mixed / Multiple
4%	3%	Asian / Asian British
2%	2%	Black / African / Caribbean / Black British
0%	0%	Other Ethnic Group
4%	4%	Undeclared / Not Known

White/White British is the largest ethnicity group for applications received in 2021-22 with **90%**. This is a **1%** increase from 2020-21

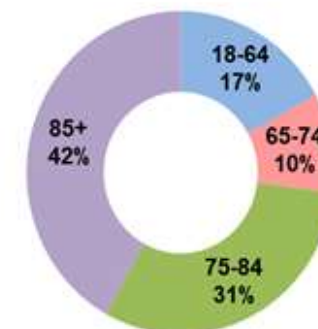


## Age and Gender



There were **41%** of applications received for males and **59%** of applications received for females. This is a **1%** increase for males and **1%** decrease for females from 2020-21.

The highest figure for age group is over 85 amounting to **42%**. This is a increase from 2020-21 by **5%**



## Location and Primary Support Reason



**11%** of referrals were received from the hospital whilst **89%** of applications were received from a care home. **1%** increase in hospital and 1% decrease in care home referrals from 2020-21

**57%** of applications were for individuals with dementia. This is a **16%** increase from 2020-21

### **3.1.3 Deprivation of Liberty Safeguards (DoLS) in Practice**

Derby City Council received a request to renew a previous DOLS authorisation for Jack who was living in a specialist residential placement in Wakefield. Jack is married to Susan. Jack was previously a teacher before taking early retirement and moving to Spain with Susan 15 years ago. Whilst in Spain Jack was diagnosed with Korsakoff's syndrome and COPD. In 2013 Susan and Jack returned to Derby.

Upon return Susan experienced a significant and sudden decline in her health due to a longstanding neurological condition – she required nursing care support day and night. In parallel Jack's health was deteriorating and he required residential care support, being assessed by ASC as unable to remain safely in the community.

A specialist placement in Wakefield was identified where they could remain together, but their individual needs could be met. They have lived there since 2014. Jack has been subject to a DOLS authorisation since 2016 with Susan acting as his representative.

In 2021 Derby City Council received a request for a renewal of Jack's DOLS authorisation. I visited him at the Home in Wakefield to complete the assessment. When I met with Jack, he told me that he was "OK here, but I would rather be in the sun in Spain!", we talked about the life he had enjoyed with Susan in Spain. Jack had little recollection of the reasons they returned to Derby and had no insight into his own care needs. He told me that he would be able to "live in a flat and look after myself if I was not here. I can do the shopping and cook meals" – Support staff advised me that Jack has not been to the shops (except for a coffee with his brother) since he has lived at the Home.

They offer weekly to take him out into the community to a range of activities, but he always declined. When I asked Jack what was most important to him, he said that living in the same place as Susan was what he wanted, "even if it was not in Spain".

With Jack's agreement, and as part of my consultation, I met with Susan. She told me that although initially her health had improved when she first came to live in Wakefield, her neurological condition is now severely limiting her mobility and she is reliant upon staff to use a hoist for all transfers. She spends most of her time in her adapted wheelchair. Susan explained that she needed to move from Wakefield as they were currently registered as a residential home and were unable to meet her nursing care needs.

A suitable placement had been identified in Rotherham where they could accommodate Susan on the nursing care unit and offer Jack a specialist placement on the residential unit of the same home. Susan has an allocated Social Worker from Wakefield, with Jack being allocated to a locality team in Derby



**Outcome:**

I agreed with Susan that she would relinquish her role as representative for Jack so that she could focus on her own needs. We discussed that it would be difficult to advocate for his needs whilst also making significant decisions for her own future.

I agreed with Susan, and Jack, that the offer of a placement which could meet both their needs would need to be further considered by Jack's Social Worker as it would need to be confirmed that it could meet his needs proportionately and with the minimal number of appropriate restrictions. I therefore recommended that an independent paid representative be appointed to support Jack to consider the options available to him and to ensure that Jack's wishes and feelings remained central to the decision-making process.

The allocated Social Worker was tasked with identifying whether the suggested placement was suitable for Jack and to engage with the MDT and Representative to make a Best Interest decision.

# 4. Moving Forward...



## **4.1 Board Priorities for 2022-23**

### **DSAB Vision**

“Helping people make choices to keep safe”

### **DSAB Strategic Priorities for 2022-23**

Derby Safeguarding Adults Board is working closely with its partners and the following three strategic priorities have been agreed to achieve its vision:

#### **1) Making safeguarding Personal (MSP)**

DSAB will develop and embed an approach to its work that puts the adult at the heart of safeguarding. We will also support partners to develop processes which engage the adult, or their representative, in a conversation about how best to respond to individual safeguarding concerns.

#### **2) Quality Assurance**

DSAB will develop and implement systems to assure itself that it and all partners have appropriate arrangements in place to safeguard those adults most at risk in Derby.

#### **3) Prevention**

DSAB will develop and implement preventative strategies that seek to reduce incidence of abuse and neglect within Derby.

### **Priorities for 2022-23**

#### ***Making Safeguarding Personal***

- To identify existing customer groups where safeguarding adults awareness can be raised
- To develop a communication strategy, ensuring the use of plain English
- To consider safeguarding adult data about self-referrals
- To ensure MSP is demonstrated in safeguarding practice
- To receive feedback from Adults / their representative after completion of the safeguarding process
- To provide data on outcomes and making safeguarding personal to the Board

#### ***Quality Assurance***

- To scope options for an assurance framework for partners
- To ensure systems are in place for identification and delivery of appropriate learning and development opportunities
- To evaluate management performance information and develop an action plan
- To consider methods of increasing case file audits completed in the year

- To identify learning from multi-agency reviews nationally and locally where safeguarding adult issues arise
- To implement systems for DSAB Policy & Procedures and Practice Guidance to be developed, updated and maintained

***Prevention***

- To scope out preventative strategies currently in place in relation to safeguarding adults

# 5. Statements from Partners



## **Derby City Council (DCC)**

### **Safeguarding work undertaken and key achievements in 2021-22**

During 2021-22 DCC completed and achieved the following:

- Managed and responded to 4360 safeguarding adult referrals through the single point of access based within the Multi-Agency Safeguarding Hub
- Continued to host the co-location of the Multi-Agency Safeguarding Hub partner agencies within Derby City Council House
- Worked in partnership with the Ann Craft Trust to promote the National Safeguarding Adults Awareness Week, to highlight a number of themes for focus and exploration across the week, with 500 delegates attending from across the partnership
- Promoted the Derby Dignity Day Event in February 2022 by promoting a Dignity Poem, creating a Dignity Collage and a video promoting what Dignity means to DSAB colleagues
- Continued to prioritise Making Safeguarding Personal (MSP), keeping the individual at the heart of safeguarding and promoting the agenda within Adult Social Care and partner agencies
- Outcome measures of MSP continue to be embedded within the safeguarding process
- Delivered 100 webinars during 2021-22, ranging of 13 different Safeguarding Adults training courses from across private sector and partners agencies. 5000 places were available with a 50% of intake
- Supported the Multi-Agency case file audits that were led by the Quality Assurance Subgroup
- Provided local coordination in respect of the Safeguarding Adults Collections (SAC) Returns and Deprivation of Liberty Safeguards (DoLS) Collection for NHS Digital 2022-22
- Represented on the Derby Safeguarding Adults Board and it's six subgroups (Learning and Development Subgroup, Mental Capacity Act Subgroup, Quality Assurance Subgroup, Making Safeguarding Personal, Safeguarding Adults Review Subgroup and Policies and Procedures Subgroup), ensuring that the Agenda of the DSAB was being followed

## **Clinical Commissioning Groups (CCG)**

DDCCG has continued to play a significant role in implementing the Board's key strategic objectives. Throughout 2021/22 the Safeguarding adults team contributed to each of the boards supporting sub-groups and workstreams including chairing the Quality Assurance sub-group, Operational & Leadership sub-group and Case file audit group meetings.

The Safeguarding team seek continuous quality and reassurance from all providers in Derby and Derbyshire, via communication streams such as on-going dialogue, site visits, assurance frameworks and self-assessments. This quality assurance work is used to demonstrate good practice but also analytically assess providers against key standards of Safeguarding, including the boards key strategic objectives.

The Safeguarding team continue to contribute to Domestic Homicide Reviews, Safeguarding Adult Reviews and Fatal Fire Reviews. Furthermore, learning from such reviews is disseminated to relevant partners, and 'key themes' are incorporated into wider training delivery.

DDCCG provide staff development opportunities in respect of Safeguarding with events such as Level 3 Safeguarding Adults Training, attended by over 380 of staff throughout 21/22, in addition to more specific and specialised guest sessions such 'Mental Capacity Act & the Role of the GP' which had over 40 attendees, delivered by Capsticks Solicitors.

During the Level 3 Safeguarding Adults training, the statistical data regarding Making Safeguarding Personal (MSP) is a key focus point for improvement using the data gathered from partner agencies (e.g. 50.75% outcomes not asked/recorded at referral point), in effort to increase the quality of MSP authenticated referrals from health providers.

Safeguarding adults has remained a priority across the NHS and staff should be proud of their commitment during these on-going unique circumstances. The extraordinary challenges presented by COVID have necessitated robust inter-agency partnership working arrangements. Throughout quality assurance measures, all partner agencies of the CCG have demonstrated evidence of robust inter-agency collaboration, with both prevention and partnership working being critical components in any safeguarding care planning. The audits were well supported by key partner agencies and their commitment to learning and improvement should be commended.

Finally, DDCCG has maintained its presence at all safeguarding related activity and fulfilled its statutory functions, in addition to increasing the number of staff that have attended Safeguarding training during the past 12 months.



## Derbyshire Police

Protecting the vulnerable is central to our policing mission and is a continual thread through the Chief Constable's Priorities. Protecting the vulnerable is also a key feature within the PCC's Priorities.

Derbyshire Constabulary continues to invest in several dedicated units which work in partnership to achieve this. From a centralised Safeguarding Coordination Hub (SCH) which has improved the previous Risk and Referral Unit by adding an additional three supervisors and twelve staff dedicated to the management of all cases involving vulnerable adults, to Public Protection hubs, within in Buxton, Chesterfield and Derby.

During the last year we have re structured these hubs to allow for many officers to focus on safeguarding adults. A dedicated team for the investigation of adult exploitation has been created, along with the introduction of a central Missing persons unit, all focused on safeguarding adults and vulnerable people.

In May 2021 we commenced in partnership a DRIVE programme to tackle the highest harm domestic abuse perpetrators identified through established MARAC processes. To support this further a Domestic Abuse Review Team (DART) was established in November 2021 enhancing domestic abuse risk assessment further. By considering accumulative risk, they are identifying those at most need of safeguarding and specialist support.

Two new teams have also been created and are due to start within 2022, focusing on the management of civil orders and repeat and serial offenders. Again, demonstrating Derbyshire's Constabularies' commitment to this important agenda.

Safeguarding adults is a core responsibility for all officers and staff. To ensure our people are skilled all operational officers now have access to the Vulnerability Hub accessed through their mobile data terminals, to assist them identify vulnerability on patrol and ensure early support. A learning and development team have been recruited and are due to deliver a continuous cycle of vulnerability training to new recruits and the wider organisation. This is to ensure every police contact makes a difference to change someone's life.

Domestic Abuse Matters training continues to be rolled out across the force. All incidents and reports to police are subject to a risk assessment process called THRI'V'E. This allows us to prioritise and reprioritise against not only threat, harm and risk but also known vulnerabilities. 'V' is central to our decision making at all levels.

Performance in this area is governed by the Vulnerability Governance and Performance Assurance Boards both chaired by the Deputy Chief Constable. These meetings are supported by local performance and tasking groups and scrutiny panels, which focus on quantitative and qualitative data.

Demand continues to increase. In Spring 2020 Derbyshire Police would typically deal with around 30 vulnerable adult cases across the county each day. 2021 this saw rise to an average of 50 cases a day and in 2022 we are seeing this trend continue.

In the year ahead we will continue our 24/7/365 service to support and protect vulnerable adults across Derbyshire. We continue to strive for further improvement by adopting a crime directorate model, realigning all detective resources under one command function, allowing resources to be realigned to areas of greater harm, risk and threat, in an agile and timely manner. Whole force training and a robust performance framework demonstrates Derbyshire Constabularies' commitment to protecting the people of Derbyshire.

## Derbyshire Fire and Rescue Service

Derbyshire Fire and Rescue Service (DFRS) remain committed to the safeguarding adults and children.

Area Manager Clive Stanbrook who is the strategic manager for Safeguarding within Derbyshire Fire and Rescue Service (DFRS) states: -

*'DFRS have an unwavering commitment to making Derbyshire safer together with our partners and other agencies. This commitment includes all situations where the lives, health and wellbeing of the public of Derbyshire are placed at any way at risk, including safeguarding of the most vulnerable. Because of this pledge we will endeavour to do everything in our power to work with the Adults and Children's Safeguarding Boards to increase the safety of the most vulnerable in Derbyshire and to ensure that our staff are trained and aware to deal with all safeguarding concerns appropriately.'*

This year DFRS have referred 3 adults to the safeguarding process and 2 children. Alongside this we have supported 458 vulnerable adult referrals and 45 vulnerable children's referrals. All of these have been managed via a multi-agency setting including initial enquiry process.

In January this year the Fire Standards Board, who set the Standards for the Fire and Rescue Sector, introduced a set of Safeguarding Standards for all services to implement to ensure compliance and the best outcomes for adults and children at risk. It is Derbyshire Fire and Rescue Services' aspirations to implement these by April 2023 with agreement by the Board.

The Safeguarding Team have also introduced an Easy Read Guide for all operational staff on how to spot signs of abuse and what to do. This includes how to make safeguarding personal to the victim, how to discuss concerns with empathy and understanding consent. This has been welcomed by the Response, Protection and Prevention teams.

We have also introduced our new referral process for Children workers this year called 'FRANCES'. It is hoped that this process will support and encourage all professionals who work with children to refer into us for safe and well visits.

DFRS continue to make significant commitments to safeguarding continuing to ensure all new employees undertake safeguarding models for adults and children and understanding the categories of abuse. This training is now mandatory and is part of our Induction toolkit for new employees.

Lastly, DFRS safeguarding officers have continued to support attendance at all sub-groups and boards this year.

## Derby Homes

Derby Homes have been working closely with the adult safeguarding board and the MASH to understand the quality of referrals being submitted and what can be done to improve them. As a result, general awareness raising, and some specific training has been carried out with Derby Homes staff.

Derby Homes continues to provide a financial contribution to the running of the adult safeguarding board as well as providing representation at board meetings and all the relevant subgroups. They also support the delivery of any agreed board multi-agency safeguarding training packages.

Central Midlands audit Partnership carried out a safeguarding audit in January 2021. Derby Homes were delighted to receive a substantial rating, with only 2 minor recommendations for improvement, both of which have now been implemented.

Derby Homes sits on the Domestic Abuse Partnership Board which consists of organisations and agencies across the city who work together to develop a strategy and action plan for the city to safeguard adults and children who are victims of domestic abuse.

Derby Homes is currently seeking accreditation on the work that it does to support staff and customers who are experiencing domestic abuse. There are now 2 clear policies in place relating to staff and to customers.

Derby Homes has 27 safeguarding champions in total who are available to talk to staff about any safeguarding concerns they might have. 9 of them are workplace domestic abuse champions who can offer support to colleagues affected by domestic abuse.

Champions will ensure that appropriate information is available to offer support at a time when colleagues need it most. They will also provide a vital link between the organisation and the champions network, ensuring access to the most up to date policies, procedures and training.

Each year Derby Homes agrees on a safeguarding promotional campaign that the champions help to promote, 2022 is focused on exploitation. The aim being to raise awareness to staff and customers so that they can spot signs of exploitation and know where to access support.

## Derbyshire Healthcare Foundation Trust (DHCFT)

There has been a change in personnel within the Assistant Director Safeguarding Adults role in May 2022; A transition with cross over was enacted to ensure partnership working has continued with a smooth transition. The Assistant Director and Named Doctor work closely within the Trust and for the multi-agencies.

DHCFT are active members of Safeguarding Adult Boards and the associated subgroups, as well as other interagency meetings including MAPPA and Channel. The Trust has continued to be an active partner in Domestic Homicide Reviews and Safeguarding Adult Reviews when appropriate.

There is a move to restore further face-to-face work within DHCFT and we remain very proud of our services and the way they have responded to the COVID-19 pandemic, and their hard work to continue to prioritize the safeguarding of our most vulnerable. This allowed the 'business' of adult safeguarding to continue.

## MASH

There continues to be 3 MASH Health Advisors covering 2 WTE posts working in the Multi Agency Safeguarding Hub integrating both adult safeguarding and child safeguarding work within the role. Now restrictions have eased, the MASH Health Advisors are now back in the Council House.

**Safeguarding Strategy**

**NHS Derbyshire Healthcare NHS Foundation Trust**

- Column 1 (Dark Blue):** Icon of an open book. Text: "We ensure that our staff receive and maintain appropriate training in safeguarding adults and children"
- Column 2 (Purple):** Icon of a family. Text: "We routinely involve families and carers when we are supporting the person in our care, both when they come into our services and within 72 hours on an in-patient stay. We gather information and family history to help us assess and make good safety plans with the person"
- Column 3 (Red):** Icon of hands holding a heart. Text: "We are working to be able to show that we provide trauma-informed care and clinical practice, particularly in safeguarding. This means that we will be able to understand the impact of trauma better and work with people to achieve the outcomes they seek."
- Column 4 (Orange):** Icon of people talking. Text: "We are growing in our demonstration of professional curiosity and are able to have richer conversations with people that enable us to consider a range of possible interpretations, rather than a single narrative. This helps us to be able to safety plan more effectively with people."
- Column 5 (Green):** Icon of interlocking gears. Text: "We will be able to show that our teams are working together, using intelligence, joint planning and creativity to safeguard individuals and families across our care pathways."
- Column 6 (Blue):** Icon of hands holding a person. Text: "We want people who have experience of abuse to feel safe and supported in our services and to know what is going to happen next in the safeguarding pathway."
- Column 7 (Light Blue):** Icon of a person with a shield. Text: "If people working in our organisation cause hurt or harm we will take this seriously and work with our partner agencies to apply legal and safeguarding processes, reporting to the police and professional bodies whilst upholding a just culture in which staff and people who use our services can have confidence."

**Making a positive difference**

For more information about our Safeguarding Strategy please visit [www.derbyshirehealthcareft.nhs.uk](http://www.derbyshirehealthcareft.nhs.uk)

## **Prevention**

### Prevention

We continue to work with our clinical teams to ensure that safeguarding is the 'golden thread' running through our Organisation. Our Safeguarding Named Nurses have continued to meet with teams throughout the pandemic.

We continue to be involved in complex case discussions which are held fortnightly with our teams and inpatient services.

Our Trust teams continue to support Prevent with attendance at monthly Channel Panel meetings and referral related activity daily.

We are core panel members at monthly MAPPA and MARAC meetings.

As a Trust we fully work with the accountability of the NHS, the Police, and Local Authorities. This relationship is absolutely crucial in ensuring the safeguarding of our vulnerable adults and children.

## **Quality Assurance**

Accountability and transparency in the Trust remain key to the delivery of safeguarding procedures. We continue to publish our Safeguarding Annual Reports, committee papers and our learning.

We have members of the Local Authority attend our safeguarding operational meetings adding the extra layer of transparency and to offer their specialist knowledge to our safeguarding champions.

We review actions from SAR/DHR and ensure learning is cascaded throughout the Organization.

## **Making Safeguarding Personal**

We continue to apply person-centred safeguarding responses. We do this by our attendance at Trust complex case discussions which helps us respond to person-centred safeguarding responses and safety plans.

We support all staff in safeguarding themselves and the people they work with. An example of this is contact from our Estate's Office regarding concerns about a member of staff. We were able to support further enquiries and ensure they were safe and out of a potentially abusive situation.

We work closely with our Safeguarding Trainers to ensure the learning from DHRs, and SARs are shared within the safeguarding training.

Equality, diversity and inclusion work remains a priority and is given consideration in all our work within the Trust and our multi-agency involvement.

Sexual safety is a Trust priority and we are currently working with our acute inpatient wards to continue their reporting of incidents. A policy/protocol will be produced to support this.

### **Additional Information (e.g impact of Covid-19)**

Throughout COVID we have continued to run our services. We are working to restore all services; however, we are mindful, from a wellbeing point of view that this is time of change. We remain supportive and compassionate towards our staff during this time.

### **Liberty Protection Safeguards (LPS)**

We are actively engaging with the agencies and developing internal plans primarily about on-going assurance of the MCA/LPS. We will continue to provide feedback and consultation during this draft stage of the process. We have a nominated lead within DHCFT to take this forward.



## **DHU Healthcare**

DHU Healthcare's core values revolve around putting patients' interests at the heart of everything we do, respecting individual rights to respect and dignity, demonstrating excellence in everything we do and placing patients and colleagues at the heart of the organisation. These four core values underpin the safeguarding criteria within the internal structures of DHU Healthcare.

To support the delivery of the safeguarding agenda within DHU Healthcare, there is a clear governance and accountability framework in place. The framework provides assurance to our commissioners that whilst the ultimate responsibility and accountability for adult safeguarding lies firmly with the Board of Directors, every member of staff is accountable and is responsible for safeguarding adults at risk.

DHU Healthcare has a robust referral pathway and strong communication and information sharing links with other organisations. This is coupled with representation at The Safeguarding Board meeting and associated subgroups.

### **Current and future work**

The DHU Healthcare Safeguarding team will continue to provide support to all DHU Healthcare staff regarding safeguarding concerns and will develop new and innovative means of ensuring quality assurance within the safeguarding agenda.

The DHU Healthcare Safeguarding training has been further developed utilising various mediums and platforms to enhance the learning experience.

The DHU Healthcare Safeguarding Childrens and Safeguarding Adult procedures have been redeveloped into one overarching safeguarding procedure, in line with the 'Think Family' approach. This was coupled with area specific guidance documents keeping abreast of important safeguarding initiatives both local and national and easily available to all staff across DHU Healthcare.

Going forward DHU Healthcare will continue to be vigilant about the expanding range of initiatives and disciplines that come under the 'safeguarding' umbrella. DHU Healthcare will continue to focus upon safeguarding practice, and as a partner agency within the Safeguarding network we will continue to work collaboratively, supporting the development and implementation of agreed safeguarding strategies and policies.

### **Additional Information**

It is recognised that the impact of Covid -19 has affected many people's daily lives, in different ways. Financially, socially, family relationships and support networks, and children's education to name a few. These changes increased the risk for some of the most vulnerable who were unable to protect themselves from abuse and neglect.

During this past year the Safeguarding Team at DHU Healthcare were involved in both National and Local campaigns and initiatives to safeguard Children and Adults at risk. Regular updates and information were distributed to clinical staff to assist them in recognising the risks associated with the pandemic and the ongoing areas of concern.



## Care Quality Commission (CQC)

No one organisation has complete oversight of safeguarding children and adults: responsibilities are spread over a number of organisations. That is why it is essential for all the organisations that come into contact with children and adults to work in partnership to help protect them from abuse and neglect.

Local authorities hold the lead and coordinating role in safeguarding children and adults. They have legal duties and powers to establish Local Safeguarding Children Boards and Safeguarding Adults Boards.

The Boards' objectives include developing local safeguarding policy and ensuring effective working with partners such as Clinical Commissioning Groups and the police to help and protect and promote the welfare of children, and to help and protect adults in their areas who are in need of care and support. Local authorities also have duties to conduct Serious Case Reviews for children and Safeguarding Adults Reviews where death or serious injuries have occurred.

For CQC, working with local authorities and other partners means:

Being clear about our role and its boundaries.

Understanding the roles of partner organisations.

Sharing information and intelligence with local authorities and the police as appropriate (statutory guidance on safeguarding adults contains details about multi-agency confidentiality agreements and principles governing information sharing).

Contributing, where appropriate, to Serious Case Reviews and Safeguarding Adults Reviews.

CQC work with partner organisations at a local level, especially local authorities safeguarding teams and the Local Safeguarding Adults Board (LSAB). CQC do not routinely attend LSAB meetings. However, we maintain contact with them and respond to requests for information.

At a national level, CQC work with partner organisations such as NHS England, ADASS and the Department of Health and Social Care amongst others. Working together in this way assists in developing multi-agency solutions to safeguarding issues that are identified.

CQC fully engage with Serious Case Reviews (SCRs) and Safeguarding Adult Reviews (SARs), carrying out, where appropriate, Independent Management Reviews of our own decisions and actions. This helps to inform improvements to our systems, processes or practice. At a national level we will respond to recommendations made by these Reviews.

## **University Hospitals of Derby and Burton NHS Foundation Trust (UDBH)**

The UHDB Safeguarding & Vulnerable People Team is made up of a diverse and multi-professional team who provide specialist and expert safeguarding training, specialist advice, case coordination and supervision to Trust Executives and employees. We provide training, coordinate multi-agency and multi-disciplinary work in safeguarding and vulnerable people activity across the Trust to ensure UHDB fulfils its safeguarding obligations and duties in a wide range of issues and cases - ensuring the loop is closed effectively and sufficiently on any safeguarding enquiries and concerns.

The Trust has well established governance arrangements and safeguarding is regularly reported to the Board. The Trust is also subject to the Safeguarding Adult Assurance Framework and a Tier 2 individual audit for Staffordshire.

Given the impact and challenges faced over the last 2 years due to the pandemic Covid-19 we are assured that focus on safeguarding has been maintained within front line services with broadly consistent numbers of referrals made. The Trust Safeguarding Team have remained present in clinical areas to support staff with the management of safeguarding concerns.

UHDB continues to prioritise the safeguarding agenda and adopts a THINK family approach across the organisation. This is embedded across training and supervision sessions.

Domestic abuse management remains a high priority for the organisation and training and guidance has been developed to support staff within this area. Learning and audit work across children and adult safeguarding services has influenced this provision.

As part of UHDB's commitment to supporting our colleagues, Special Leave guidance has been implemented. This has been developed in conjunction with the Trust's inclusion networks and champion roles and explores broader support we can offer to our colleagues when they need it most, this includes safe leave for victims of domestic abuse.

UHDB has an effective model to support High Volume Service Users. This multiagency forum has been efficient in identifying those who frequently attend our services. Representatives at the group include medical and nursing staff, safeguarding professional, Social Care and Mental Health Liaison. Robust care planning is undertaken and a multiagency response to the action plans. This includes liaison with external partners. The model is now being developed at our Queens Hospital Burton site.

An internal audit on the quality of safeguarding adult referrals demonstrated the added value that UHDB Safeguarding Team brings to the referral process in ensuring that thresholds are met, and appropriate information is included to support safeguarding enquiries. It also identified a benchmark of the Trust's position in making safeguarding personal and actions plans implemented to ensure improvements in this area.

## Our Trust priorities as set out in our Safeguarding Framework

- Embed respect for human rights and personhood of patients who lack capacity
- Ensure that the views and wishes of children, young people and adults are sought and heard within safeguarding processes as appropriate
- Ensure that the Trust is a responsible and effective agent in working with multi-agency partnerships
- Ensure that awareness of safeguarding and vulnerability issues is maintained and improved by regular communications and promotion
- Maintaining effective recruitment processes and response to allegations against staff

## **Derbyshire Community Health Services (DCHS) NHS Foundation Trust**

DCHS has continued throughout 2021/22 to ensure that the Trust has a local service delivery response based on clinical prioritisation that is in keeping with the latest guidance from NHSE/I, in response to the pandemic.

DCHS is a proactive member of the Board and sub-groups; contributing to the Board work streams and working with partner agencies to enable people in Derby to live a life free from fear, harm and abuse.

### **Making Safeguarding Personal**

The Safeguarding Team advocates making safeguarding personal through the provision of advice/support, training and supervision. Staff are advised and encouraged to have conversations with the patients/service users that they are providing care for and/or where there is a safeguarding referral; to give the person the opportunity to voice their needs and what they want, reflecting the safeguarding personal agenda.

Safeguarding supervision enables the Named Nurses and Specialist Practitioners for both adults and children to explore and reflect with staff what daily life is like for the patient/service user, their current level of need/support and how to make a safeguarding journey personal.

### **Prevention**

The Safeguarding Team provides advice/support to staff: this includes discussions regarding care and support/safety plans to prevent harm when either someone makes an unwise decision and/or they don't have capacity and how to make a safeguarding referral to Social Care to enable the people that DCHS staff have contact with to be safeguarded and protected from harm.

Safeguarding supervision is recognised by DCHS as an important element of the safety culture. It provides professional advice and support to practitioners who are involved in the day-to-day work with adults and their families including promoting good standards of practice and contributes to improving outcomes for adults at risk and their families. DCHS has identified which staff groups require safeguarding adult supervision.

DCHS attends meetings where there are concerns regarding abuse, harm, domestic abuse and radicalisation, as part of information sharing across agencies. This includes contributing to safety plans; to reduce risk and enable access to appropriate support.

## **Quality Assurance**

DCHS has demonstrated compliance with the Safeguarding Adult Assurance Framework (SAAF), Section 11 Audit and the Markers of Good Practice, Looked After Children Audit. DCHS submitted the SAAF in October 2021 and had a follow up site visit on 13th June 2022. DCHS is required to provide quarterly information to the Clinical Commissioning Group regarding safeguarding data and activity which includes 'making safeguarding personal', quality assurance, Board/sub-group activity and learning.

The DCHS Safeguarding Governance Group (SGG) provides assurance to the Quality Services Committee (QSC) and the DCHS Board. The Group meets bi-monthly and provides assurance to QSC that DCHS is meeting its statutory safeguarding duty and is compliant with the Care Act 2014 and Section 11 of the Children Act 2004.

Covid working arrangements continued to have an impact on the planned safeguarding audit for 2021/22. The audit schedule in place for 2022-2023 includes the quality of referrals to adult social care, including making safeguarding personal and repeat audits for safeguarding supervision and Deprivation of Liberty Safeguards.

## **Diocese of Derby**

The Diocese of Derby has over 300 churches across most of Derbyshire. We work in communities, schools, prisons and hospitals as well other aspects of city and county life. Our churches have continued to deliver services such a food banks and to provide pastoral support to seek to ensure the most vulnerable in our communities remain safe from harm.

We have maintained our safeguarding service throughout the year with increasing numbers of referrals as churches reopened and began worshipping in person once again. We have supported a number of churches in working with elderly parishioners who may be at risk of abuse and have ensured that arrangements are in place in relation to those who may pose a risk when returning to worship in church.

The Diocese continues to work towards embedding a culture of safeguarding in all we do. Our practice around safer recruitment and training has been strengthened with the implementation of new national guidance. We have continued to develop our support for and communication with our Parish Safeguarding Officers who support our work in individual parishes.

Our work continues to be overseen by our multi-agency Diocesan Safeguarding Advisory Panel. We have now completed our internal past cases review and this will be published during the forthcoming year. A number of recommendations have been identified and work is commencing on taking these forward.

We continue to develop our partnership working not only via our advisory panel but also by representation on the safeguarding board and various subgroups and our work with others in relation to faith and safeguarding.



## Healthwatch, Derby

Healthwatch Derby has supported the DSAB strategy by:

- Helping local people having a voice in the local Health and Social Care environment
- Using their experiences to help improve the quality-of-service design and delivery
- Help empower local people by helping them understand how things work, what to expect and provide information to enable them make decisions through informed consent. This helps people recognise good and bad, helps assess risks to allow prevention planning
- Providing a route for people to raise safeguarding concerns and work with partners to highlight possible risks and we act as a conduit to enable partner organisations support and represent those in greatest needs
- Healthwatch Derby actively supports and promotes the work of the DSAB

Healthwatch Derby seeks the views of local people through outreach work, face to face, surveys, Enter and View of Health and Social Care establishments and Mystery Shopper activity.

We provide the experiential data to all services, commissioners and monitoring bodies. We raise awareness of local services and how people can stay healthy and safe.

## **Department for Work and Pensions**

Department for Work and Pension (DWP) is committed to supporting its most vulnerable customers across all our service lines.

DWP's key obligation is to ensure customers receive the correct benefit entitlement at the right time. We consider customers' individual circumstances to help us provide the right service or engage appropriate support and working closely with our multi-agency partners is essential.

DWP have appointed Advanced Customer Support Senior Leaders (ACSSLs) across Great Britain. Part of their role is to reach across local communities to build strategic relationships with other organisations who provide support to our most vulnerable customers. We want to ensure opportunities to highlight concerns to agencies with statutory safeguarding responsibilities are not missed and our collaboration with multi agency Safeguarding Adult Boards (SABs) is key to this approach.

DWP is not a statutory member of the SAB, or have a statutory safeguarding duty, however, they are committed to attending the board as a non-statutory member, and to working with the statutory members to ensure our customers are supported to access our services, through a multi-agency approach where required.



2021-22 Annual Report  
 Derby Safeguarding Adults Board  
 01332 642961  
 January 2023  
<http://www.derbysab.org.uk/>