Report to:	Health and Wellbeing Board					
Date:	21 st October 2015					
Report of:	John Livesey Acting Director of Children and Adult Services	Report No:				
Contact Officer:	Rachel Tanner – Assistant Director Care Management and Provider Services	Tele No: 01204 332032				
Report Title:	Safeguarding Adults Annual Report and Strategic Plan 2015-8					
Non Confidential:	(<i>Non-Confidential</i>) This report does not contain information which warrants its consideration in the absence of the press or members of the public					
Purpose:	The purpose of the report is to inform Health and Wellbeing Board of the performance of the Safeguarding Adults Board partnership to meet the strategic objectives to protect Adults at risk from abuse, neglect and exploitation.					
Recommendations:	It is recommended that the Health at contents of the reports.	nd Wellbeing Board note the				
Decision:						
Background Doc(s):	 Annual Report of Safeguarding Adult Board 2014-2015 (Appendix 1) Bolton Safeguarding Adult Board Strategic plan 2015-2018 (Appendix 2) Bolton Safeguarding Adult Board Constitution (Appendix 3) 					
(for use on Exec Rep) Signed :	Chair – Deputy Leader	Monitoring Officer				

1. Introduction

- 1.1. This report is to provide the Health and Wellbeing Board with an update on the performance of the Safeguarding Adults board and its adherence to its new statutory duties as outlined in the Care Act 2014.
- 1.2. The Care Act 2014 requires all Local authorities as the lead agency to establish a Safeguarding Adults Boards to co-ordinate and ensure the local arrangements to safeguarding and promote the welfare of adults at risk in its area.
- 1.3. Bolton has operated a shadow board since 2005 'No secrets' and in response to the Care Act 2014, the board was constituted on 1st April 2015 and acts as an independent body to form a view of the quality of safeguarding locally, challenge organisations when necessary and have an independent voice.

2. Functions

- 2.1. The Board has the following three statutory functions as described in the Care Act 2014:
 - Publish a strategic plan for each financial year that sets out how the Board's main objectives will be met and what members will do to achieve these. The Board will endeavour to develop its strategic plan with community engagement.
 - Publish an annual report detailing the Board's and its member's achievements against the strategic plan to meet the vision, including any findings from Safeguarding Adult Reviews.
 - To conduct any Safeguarding Adult Reviews advising on lessons that can be learned where an adult at risk has died or has been seriously harmed in circumstances where abuse or neglect is known or suspected.
- 2.2. This report provides the Executive cabinet member with the Boards Annual performance report for 2014-15 (**Appendix A**), and the Boards 3 year strategic plan that includes an annual business plan (**Appendix B**).
- 2.3. The Board has not conducted any Safeguarding Adult reviews in 2014-5.

3. Summary of performance.

- 3.1. The Annual report demonstrates that there has been continued commitment from the partners to Safeguarding Adults in Bolton with many achievements and developments as individual agencies and cross partnership initiatives. Below are a selection of achievements:
- Development of Making Safeguarding personal
- Established a multi-agency Safeguarding intelligence forum
- Established new approaches to learning lessons

- Improved the quality assurance of safeguarding
- Fire safety initiatives and partnerships signed up to be Housing providers
- 3.2. The report also details the statutory performance returns, these demonstrate the level of Safeguarding activity in Bolton and compare this with national data where this is available. The Board continues to develop the performance reporting as part of the forward strategic plan.
- 3.3. The activity data highlights that Bolton was an outlier in 2013-4 within two areas of performance; low levels of alerts per 100,000 population and low level of cases proceeding through to investigation. The annual report evidences the improvements made in these areas to ensure that the data was accurately collated and improvements to reporting and decision making were made. There was a 17% increase in alerts in 2014/5 and a 56% increase in cases proceeding to a safeguarding referral and investigation.
- 3.4. In many other areas Bolton's performance reflects that national trends and themes regarding types of abuse, abuse settings, and the service user category. Some areas of performance saw fluctuations from Bolton's previous reporting, further detailed work is underway to understand these shifts. It is expected that this is related to data quality issues.
- 3.5. The Board have considered the annual performance and refreshed the vision and direction for 2015-18, the revised strategic objectives are set out in the first statutory 3 year plan for Bolton, the Board's ambitions are reflected across a number of key areas, including:
 - Governance, Leadership and Partnership.
 - Quality Assurance and Performance Management
 - Workforce Development
 - Early Intervention and Prevention
 - Mental Capacity
 - Learning Lessons
 - Communication and Community Engagement
- 3.6. The Board will report on progress in achieving the objectives on an annual basis and produce an annual business plan.

4. Accountability

- 4.1. The Board's annual report will be made available in accordance with its constitution to the following;
 - The Chair of the Health and Wellbeing Board.
 - The Chief Executive and Leader of Bolton Council.
 - Greater Manchester Police.
 - Bolton Healthwatch.
 - Health and Social Care Overview Scrutiny Committee.
 - NHS Bolton CCG Board

5. Recommendations

5.1. The Health and Wellbeing Board are recommended to comment upon and note the performance and work of the Safeguarding Adult board.

Bolton Safeguarding Adults Board

Working in partnership to prevent Adult abuse and neglect

Annual Report 2014/15



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Foreword

Welcome to Bolton's Safeguarding Adults Board Annual Report for 2014/15. The Adult Safeguarding Board is a voluntary board made up of statutory and non-statutory agencies working in partnership for the protection of adults at risk, ensuring vulnerable people in Bolton can live their lives free from harm and abuse. The Board became statutory on 1st April 2015.

All the organisations represented on the Safeguarding Adults Board have a vital role to play in protecting adults at risk in the Borough, they work together to make sure that concerns are addressed, awareness of safeguarding is promoted and we continuously learn from best practice.

The Care Act 2014 strengthens the work of Local Safeguarding Adults Boards, placing them on a statutory footing, and setting out through government guidance specific duties and broader expectations for local authorities, boards and the local agencies involved.

This annual report provides an overview of Bolton's Safeguarding Adults Board and its membership, the work it has focussed on over the past 12 months and the achievements made. It will also summarise the priorities and challenges that lie ahead to ensure that safeguarding remains everybody's business and the partnership's vision for adults at risk can continue to be achieved.

1.Introduction

1.1 Welcome message from the Chair and Executive Cabinet Member

The Care Act (2014) puts adult safeguarding on a statutory footing from 1 April 2015. The Act more clearly defines the duties and responsibilities for all of the partners organisations that work together to safeguard adults at risk and in particular the three statutory partner; Bolton Council, Greater Manchester Police and Bolton Clinical Commissioning Group.

The partners wholeheartedly welcome the increased emphasis on safeguarding adults. We want to work together to promote a stronger and safer range of local services and to strengthen Bolton's culture of supporting adults at risk of harm. To do this, we have reconstituted Bolton's Safeguarding Adults Board and have set out our vision and ambitions in a three year strategic plan; the first of its kind developed under the new statutory framework for adult safeguarding.

The strategic plan sets out our ambitions across a number of key areas, including:

- Governance, Leadership and Partnership.
- Quality Assurance and Performance Management
- Workforce Development
- Early Intervention and Prevention
- Mental Capacity
- Learning Lessons
- Commination and Community Engagement

To achieve these ambitions and deliver safer services and communities, we know that we have to work in partnership with each other and most importantly with the people who use our services.

We know that achieving these priorities presents a significant challenge, and we also know that some of the actions identified by the Board will take time. That is why we have developed a detailed business plan that sets out the actions which we will take each year as we move towards our goals.

We will provide annual information on the implementation of this strategy, and I look forward to working together to achieve more effective and safer services and communities in Bolton.

Dr John Livesey

John h Crist.

Acting Director of Children's & Adult Services

Bolton Council

Cllr Linda Thomas
Executive Cabinet Member
Deputy Leader
Bolton Council

Linda Thomas

1.2 Bolton Borough

The Bolton Borough has a total population of around 280,100 (mid-2013 population estimates) living in the town of Bolton and the surrounding township areas of Farnworth, Kearsley, Horwich, Westhoughton and Turton. The population of the borough is forecast to increase by around 20% or around 54,000 people by 2035. Bolton has an ethnically diverse population, with 11% belonging to a non-white ethnic group. 6.1% of the population are of Indian background, the largest such community in North West England. The next largest ethnic group is Bolton's population of Pakistani background at 2.5% of the Borough's population. Bolton's White population makes up 89% of the total, with the vast majority identifying as British.

As well as being home to a range of different communities, Bolton is also socioeconomically diverse. While parts of the borough are amongst the most affluent in the country, around one quarter of the borough is amongst the 15% most deprived areas in the country.

The age profile of Bolton is similar to that of England, but the proportion of children is slightly higher; and the proportion of working age and older people is slightly lower. However, Bolton for the most part closely follows trends in age groups for both Greater Manchester and England and Wales.

Disability and ill-health are important concerns for our residents. In the 2011 census, 20% of residents said they had a limiting long-term illness or disability. The proportion of the population with a disability increases with age, rising to 56% of those aged 85+.

The 2011 Census found that there were 30,649 people in Bolton who said they had caring responsibilities for members of their family or friends. The person they care for may need support because of long term illness, frailty, physical disabilities, mental health issues or substance misuse.

1.3 Our Vision - Bolton Safeguarding Adults Board

The Board's vision sets out the overarching aims for the partnership:

People should be able to live a life free from harm, abuse and exploitation.

The board's statement of purpose that underpins this vision is to:

- Prevent abuse and neglect happening within the community and in service settings.
- Promote the safeguarding interests of adults at risk to enable their wellbeing and safety.
- Respond effectively and consistently to instances of abuse and neglect.

The core purpose of the board is to protect adults who are at risk, but to also have a key responsibility to promote the wider agendas of safeguarding and prevention through ensuring safeguarding is everybody's responsibility in our organisations and communities. To achieve this we need a co-ordinated and timely response to reports of abuse, and we also need to create a community where abuse is not tolerated and people speak out.

The board has endeavoured to work to the following principles in all its developments to achieve the vision and adhere to its statement of purpose:

- **Principle 1 Empowerment** taking a person-centred approach, whereby users feel involved and informed, and their consent is needed for decisions and actions to safeguard.
- **Principle 2 Protection** it is everybody's responsibility to act upon suspicions of abuse to ensure that adults at risk are afforded protection to them in law.
- **Principle 3- Prevention** it is better to take action before harm occurs and prevention should be the primary goal, everyone has a role from organisations to members of the public and communities.
- **Principle 4 Proportionality** ensuring outcomes are appropriate for the individual and responses to allegations of abuse are proportionate to the risk and nature of allegation.
- Principle 5 Partnership agencies and communities should work together
 to respond effectively and share information appropriately ensuring the
 individual is involved.
- **Principle 6 Accountability** all agencies have a clear role and should be transparent and accountable for decisions that are made.

1.4 Structure of the Board

The Executive Board was a voluntary partnership of statutory and non-statutory organisations and comprises of senior officers as representatives from the following organisations:

- ✓ Bolton Council Childrens and Adults Services
- ✓ Greater Manchester Police
- ✓ NHS Bolton Clinical Commissioning Group
- ✓ Bolton Council Strategic Housing Partnership
- ✓ Bolton NHS Foundation Trust
- ✓ Greater Manchester West Mental Health Trust
- ✓ Greater Manchester Fire & Rescue Service
- ✓ Greater Manchester National Probation Trust

- ✓ Chester and Greater Manchester Community Rehabilitation Company
- ✓ Community, Voluntary and 3rd Sector Representation
- ✓ Bolton College
- ✓ Bolton University

The following are members in an advisory capacity:

- ✓ Bolton Council Legal services
- ✓ NHS Bolton Clinical Commissioning Group lead practitioner
- ✓ Bolton Council Safeguarding clinical advisor
- ✓ Safeguarding Board and Partnership Manager
- ✓ Chair of the Operational Safeguarding Group

Board members are all senior officers of their organisations who are responsible for effectively representing their organisation and have authority to make decisions on their agencies' behalf. Each agency is responsible for ensuring work around safeguarding takes place effectively in their organisation and contributes to the partnership's vision and priorities.

To support the work of the Board there is an operational safeguarding group that oversees the work of the priorities identified for the year's work program that was delivered through 5 subgroups and 2 task and finish groups.

The 7 work streams are as follows:

- Quality Assurance and Performance sub-group
- Workforce Development sub-group
- Early Intervention and Prevention sub-group
- Mental Capacity sub-group
- Learning Lessons sub-group
- Governance, Leadership and Partnership task and finish group
- Communication and Community Engagement task and finish group

The Boards and subgroups have met regularly throughout the year with positive multi-agency attendance and commitment to move our work forward.

2. Our Work & Achievements

2.1 Governance, Partnership and Leadership

This is a new task and finish group and for the first time features in Bolton's strategic plan 2015-2018. The strategic objective of this group and what it hopes to achieve over the next three year period is as follows:

 Effective working relationships between members of the Board need to be sustained and developed, ensuring appropriate representation, membership and links to wider networks/Boards are embedded.

- A clear governance structure that is Care Act 2014 compliant.
- All policies and procedures are up to date and compliant with the relevant legislation and guidance.
- Strategic links and key shared work streams have been identified and included as relevant to the Board Business Plan. For example, shared agendas relating to:
 - 1. Bolton's Safeguarding Children Board.
 - 2. Bolton's Community Safety Partnership.
 - 3. Health and Wellbeing Board.
- There are a range of policy, procedures and guidance in place that provides a
 framework within which organisations can work together effectively to respond
 to abuse and neglect, and reflects developments in national guidance and
 legislation, as well as national/regional/local learning, and new approaches to
 safeguarding. For example Making Safeguarding Personal.

Where we are now:

Senior representatives of partner agencies actively contribute to the Board which is overseen by the Director of Children's and Adult Services. The Board has a three year Strategic Plan, a detailed Annual Business Plan, Annual Reports, and a series of sub-groups and task and finish groups tasked with taking forward the various work streams of the Board.

There is positive and widespread engagement across statutory and non-statutory organisations with the Board, supported by an Annual Board Development Day. The last Annual Board Development Day took place in December 2014. There is, however, an identified need to further explore the development of integrated and joint working agendas.

Following the appointment of the Safeguarding Board and Partnership Manager in October 2014 all partner agencies were contacted and discussions have taken place regarding membership of the Board. Once established that the Board had the correct membership a new constitution was developed and signed off by the statutory members in April 2015. This has since been extended to all members of the Board.

On 10 February 2014 at the annual conference the Bolton Safeguarding Adult Board (BSAB) launched its new online safeguarding procedures. This is a multi-agency policy and has been developed and signed up to by all members of BSAB.

A new three year strategic plan has been developed to commence in April 2015 – 2018, alongside this is a 12 month business plan. The business plan will come back to the Board each quarter to update members on progress or to alert members if any actions cannot be met within the agreed timescale.

2.2 Communication and Community Engagement

This is a new task and finish group and for the first time features in Bolton's strategic plan 2015-2018. The strategic objective of this group and what it hopes to achieve over the next three year period is as follows:

- Develop systems and resources to improve public awareness of the types of abuse and risks of harm presented to adults at risk in the Borough of Bolton.
- Provide detailed information and advice to the public about services/support groups available in the Borough of Bolton
- Adults who have experienced, or are at risk of, abuse and neglect shape and influence the development of safeguarding services.

This new task and finish group became operational in the April 2015 and will be reported on in the next annual report.

2.3 Quality Assurance and Performance

The strategic objectives of this sub-group:

- We will know if we are making a difference.
- We will be confident that our response to safeguarding is effective and consistent.
- Measures and processes effectively capture the outcomes of safeguarding adults work in Bolton (such as improved levels of safety, improved sense of wellbeing, reduced levels of risk, successful achievement of outcomes desired by adults at risk).
- There is consistent recording and reporting of safeguarding information across partner organisations in Bolton, enabling the sharing of intelligence at both a strategic and operational level.

What the sub-group has achieved prior to 31 March 2015:

- Developed a Safeguarding case file audit tool and carried out a baseline audit which has included recommendations for improvement.
- Piloted a method for Making Safeguarding Personal between November 2014 and January 2015 and made proposals for full roll-out in 2015.
- Researched a safeguarding reporting thresholds policy for implementation in 2015.
- Refined the performance report for the Board so that it reports the information required to keep them abreast of safeguarding activity in the Borough.
- Established the Safeguarding Intelligence Forum to share information between agencies about the risk presented by providers.

2.4 Workforce Development

The strategic objectives of this sub-group:

- We will have a skilled, knowledgeable and confident workforce.
- Robust multiagency training is available to agencies.

 The workforce development plan incorporates local/regional and national policy, procedures and learning, and meets the needs of stakeholders involved in the safeguarding process.

What the sub-group has achieved prior to 31 March 2015:

- Programmes of Safeguarding training delivered across all organisations.
- MCA/DoLS training delivered across the Clinical Commissioning Group and Royal Bolton Hospital.
- 7 Best Interest Assessors from Bolton Adult Social Care and Greater Manchester Mental Health Trust trained at Manchester Metropolitan University.
- 10 Safeguarding Champions have been identified across agencies and a pilot has begun within older peoples provider services. A framework has been developed to support this.
- Three E Learning courses on the internet (Kwango) have been purchased by Adult Social Care training department and are available to all staff, including from partner agencies. The three subject areas are Adult Safeguarding, Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS).
- An Annual Safeguarding Conference was organised for 10 February 2015.
 This conference saw the launch of the new online Bolton safeguarding procedures, presentations on the Care Act 2014, including the new statutory safeguarding duties and shared information on the Making Safeguarding Personal pilot project.
- Bolton held a Making Research Count Conference on 20 June 2014 on Self Neglect which was hosted by Michael Preston –Shoot, a leading researcher in this field.

2.5 Early Intervention and Prevention

The strategic objectives of this subgroup:

- People will know how to recognise abuse and what to do about it.
- Organisations in Bolton will reduce the risk of abuse, by helping people live independently and safely in their own homes and in touch with others.
- Improving early Intervention and Prevention in Bolton.
- Referrals People do not fall through the net and are not passed from pillar to post between safeguarding, personalisation, community safety and community support services.

What the sub-group has achieved prior to 31 March 2015:

The group is now established and has membership from the following organisations: Community Housing Services, Strategic Housing, Fortalice, Bolton Community Homes Partnership (BCH), Bolton CVS, Arch Initiatives, Adult Services, Bolton at Home, Greater Manchester Fire and Rescue (GMF&R), Greater Manchester West Health Foundation (GMW), Public Health, Bolton College, Community Safety and GM Police (GMP). The following bullet points summarise the collective progress:

- A joint Review of the Multi-Agency Panel Safeguarding Adults (MAP-SA) is ongoing. The report for this is going to Board in September 2015.
- Bolton Community Homes Partners signed up to GMF&R Home Safety Checks Protocol.
- There is an ongoing project aimed at adults at risk called 'Feeling Safe in Public Places' and involves visiting public places and commenting on safety.
- Identifying best practice in dealing with hoarding / self-neglect at home. An event is planned with Liverpool Housing Trust for early June 2015.
- Greater Manchester Police Early Intervention Team which is a pilot for Domestic Abuse cases remains in situ. Data evaluation is on-going in order to identify if this initiative has been successful, in which case consideration will be given to rolling this out to other client groups.
- Raising the profile of Adult Safeguarding new on-line procedure via: Community Voluntary Service team meetings / newsletter, presentation to BCH Partnership. Planned presentation to the Inter Agency Forum.
- Community Voluntary Service has now made it a condition of grant funding that groups working with adults at risk have a safeguarding policy in place.

2.6 Mental Capacity

The strategic objectives of this sub-group:

- Where mental capacity cannot be presumed in relation to adults who need care or support services, mental capacity is formally assessed and subsequent decisions are reached in line with the Mental Capacity Act.
- Audit the number of referrals made to Independent Mental Capacity
 Advocates (IMCA) and ascertain if referrals are appropriate and are always
 made if required. (Some of this information will be obtained via other systems
 already being developed, that is individual agency audits and peer audits).
- Deprivation of Liberty Safeguards (DoLS) practice is in line with national requirements.
- The number of people who are assessed as lacking the mental capacity to make decisions about their safety and who have representation in the safeguarding process (from an advocate, friend or family member) is audited and any required improvement plans are implemented.
- A workforce who is fully training in the Mental Capacity Act.

What the sub-group has achieved prior to 31 March 2015:

- Review of MCA form. New form has been rolled out to practitioners and can be found in the new online safeguarding procedures.
- A Multiagency Audit was completed to try to understand the baseline of the legal knowledge and application amongst practitioners throughout the Borough. Results showed that training, application and documentation of capacity assessments and Best Interest meetings were very variable. This then went on to inform practice and commission an external trainer to provide more in depth training on MCA which will take place from July 2015.

- Oversight of the Transforming Care (Winterbourne) task and finish group (returning a small group of Bolton residents in 24 hour supported accommodation back to Bolton - more details of this will be captured in the Adult Social Care section).
- MCA policy has been replaced by a chapter on MCA and DoLS in the new online procedures. This was launched in February 2015.
- Funding secured by Clinical Commissioning Group to complete training to G.P's on MCA over a 12 month period.
- Review of Policies on MCA, Challenging behaviour and Restraint amongst agencies.
- Review of House of Lords guidance on Mental Capacity Act, and response from House of Commons.

Deprivation of Liberty Safeguards (DoLs) update;

- 515 DoLS applications have been received between April 2014 and March 2015. 54 of these were not granted. A large percentage of this number will be because they were no longer required i.e. the person left hospital before they could be assessed or they regained capacity.
- A DoLS task and finish group was developed to consider practice following the Cheshire West ruling. A Briefing Information update was signed off by Bolton Council, Greater Manchester West Mental Health Foundation Trust and Bolton Foundation Trust and circulated throughout Bolton agencies and Private care Homes.
- New DoLS paperwork was received in January 2015 from the Department of Health to improve the process.
- In March 2015 the situation in relation to progress with DOLS remains difficult. Both internal and external assessors are being used but both are beyond capacity. The DOLS Acting Manager continues to work with admin in increasing throughput although a large backlog of work has been identified. A spread sheet has been developed with Adult Social Care to assist with the task and additional administration support has been identified.

2.7 Learning Lessons

The strategic objectives of the sub-group:

- To improve the partnerships response to safeguarding adult cases through learning from Safeguarding Adult Reviews to prevent future abuse or neglect.
- Develop and maintain effective systems to share learning from any Safeguarding Adult Reviews occurring both locally and nationally.
- Develop a culture of learning and improvement across the partnership and with people.

What the sub-group has achieved prior to 31 March 2015:

There have been no serious care reviews (SCRs), now known as Safeguarding Adult Reviews post April 2015, within this period however the sub-group has continued to meet on a regular basis. There was a decision to hold a multi-agency workshop on a

case where there were concerns about an older person's level of capacity and selfneglect who died, this did not meet the criteria for a Serious Case Review but lessons could learnt. The sub-group have overseen this piece of work and made a number of recommendations to be implemented; the sub group is overseeing the action plan that was drawn up. The key recommendations were:

- The development of a policy on self-neglect
- A review of Multi-Agency Panel Safeguarding Adults (MAP-SA) to include high risk self-neglect cases
- Further training across partner agencies on MCA.

In readiness for the implementation of the Care Act 2014 in April 2015, the policy on Serious Case Reviews (Safeguarding Adult Reviews) was refreshed. Revised referral forms were implemented.

3. Partner agency achievements and organisational statements

3.1 Bolton Council - Adult Services

During 2014/15 Adult Social Care has continued to develop practice in relation to safeguarding and Mental Capacity across our social work teams, in our own provider services and in our work with external providers through our commissioning and contracting teams.

Following the Department of Health report "Transforming Care: A national response to Winterbourne View Hospital" in December 2012 work via the Winterbourne task and finish group has continued in Bolton to develop suitable resources within the borough of Bolton with the aim of bringing back a cohort of 21 people currently placed outside of Bolton. The Local Authority and the Clinical Commissioning Group, with input from colleagues in Housing, are working in partnership to develop a range of local services which will facilitate a return to the area of those people who remain in out-of-borough services, both hospital and residential. It is envisaged that the first phase of these services will be operational by June 2015 and will focus on the following four specialist areas:

- Grouped, self-contained individual supported tenancies for five adults who have learning disabilities, autism and complex needs.
- Grouped self-contained individual accommodation in registered care with nursing for six adults with learning disabilities who are at risk of offending.
- Grouped self-contained individual supported tenancies for adults with learning disabilities who are at risk of offending.
- Grouped self-contained individual supported tenancies for adults with learning disabilities who have complex needs associated with attachment and self-harm, and who may have had experiences of abuse and/or neglect.

The contracts were tendered and external providers were identified in early 2015. Accommodation has been identified for the first cohort of individuals and is in the process of being renovated. Further accommodation has yet to be identified. The new data recording and analysis arrangements for safeguarding, the Safeguarding Adults Return, which was first introduced during 2013-14, has

improved aspects of data protection, but further work needs to be undertaken to analyse and further understand trends in the information that is being collected. There are plans to employ a number of data analysts within the next year to support with this area of work.

Our commissioning approach has continued to work collaboratively with providers in the difficult economic environment and significant changes in the health sector. We involve providers constructively in the development of safeguarding practice and they have access to the appropriate local authority training courses.

Contract management undertaken by the council means that safeguarding issues are responded to quickly and proportionately to the risks. Procurement activity ensures a robust evaluation of providers' safeguarding policies and practice and ensures they are prepared to meet Bolton's standards.

The Council established a Quality Assurance and Improvement Team in January 2014. The Team are working to develop processes which assure the Department of the quality of the care the Council delivers and commissions and to promote activity which improves the quality of services. The activity is centred around developing good governance, adopting standards for some of our key services, holding providers of care to account, ensuring our workforce is supported to deliver effective QA, putting in place tools to help the Department to learn and improve, improving the Department's intelligence about the quality of services, making customer experiences count and facilitating a shift in culture where achieving outstanding quality is seen as everyone's business.

Our 'Making Research Count' partnership with University of Central Lancashire and there has continued to be a particular focus on the difficult issue of Self-Neglect. In June 2014 at the Annual Safeguarding Conference practitioners across partner agencies in Bolton were given the opportunity to find out about the new vision for Bolton. Various presentations were given on the work of the Safeguarding Adult Board and a further presentation was given by Michael Preston-Shoot from the University of Bedfordshire, on messages from research in adult safeguarding, particularly around self-neglect.

Between November 2014 and January 2015 a pilot project entitled Making Safeguarding Personal (MSP) was trialled within 6 different social work teams. Two champions were identified from each team and these workers were asked to use a specific toolkit to assist with this pilot project. MSP seeks to shift the emphasis of safeguarding investigations to a person centred approach which puts the service user's outcomes at the heart of the process. Following an MSP process means giving staff time to discuss with service user's what their desired outcome is. The outcome they want could be anything and potentially a lot different from traditional views of what a successful safeguarding outcome is. Following the conclusion of this project an action plan has been drawn up which identifies how MSP will be rolled out across all adult social care from 1 October 2015. Consideration will then be given as to how this can be rolled out to partner agencies next year.

Throughout 2014/2015 adult social care has been working hard in readiness for the implementation of the Care Act 2014. Extensive training has been offered to staff in

preparation of this and adult social care has also seen the development of the Early Intervention Team. Staff have also seen the launch of the new multi-agency online safeguarding procedures on 10th February 2015.

3.2 Bolton Council - Strategic Housing Services

This report covers the work undertaken by the Housing Sector in Bolton towards Adult Safeguarding. This includes; Strategic Housing Services, Community Housing Services (CHS) and the Bolton Community Homes Partnership (BCH):

- BCH Board which consists of Chief Executives and Directors from individual BCH partner organisations heard a presentation from the Adult Safeguarding Lead and the Chair of the Early Intervention and Prevention Subgroup to improve understanding of Safeguarding, The Care Act, Governance arrangements and where housing links in. Partners also signed up to a commitment ensuring the safeguarding of children and adults at risk in Bolton.
- BCH Core Group which consists of regional / neighbourhood managers heard a
 presentation on the Care Act and the developing Safeguarding agenda in Bolton
 and discussed the role housing partners can play.
- Individual BCH Partners deliver their own in house training on Safeguarding at induction stage for new starters and also refresher training for all staff. They also have procedures in place should a safeguarding issue arise.
- Links to Multi-Agency Adult Safeguarding Procedure now on BCH Website
- CHS staff trained on Programme Challenger human trafficking and modern day exploitation.
- Care & repair referrals carried out when vulnerable people have been identified
 with regards to grants. A number of these have resulted from complaints being
 received about individual properties in disrepair or causing a nuisance and
 investigations have led to help and support being offered to protect and improve
 the standard of living.
- Visits to overcrowded properties, often occupied by migrants, some of which have been let by individuals who have then sub-let and exploited people for money in poor unsafe conditions, which is also sometimes linked to employment so control over individuals is increased.
- Rogue landlord activity in Halliwell & Crompton
- ACIS training on housing and health for a variety vulnerable groups including asylum seekers, refugees etc.
- Joint visits and referrals from health visitors who have concerns regarding people they have met and their accommodation.
- Joint visit with police and other services which has uncovered human trafficking
- Visits to properties in the Halliwell area have identified concerns over forced labour which are currently under investigation
- Various referrals and joint working with social services and problem adults (and children) who are suffering from mental health issues which affects their ability to

stop in properties for long periods e.g. constant belief that housing conditions are causing a vast array of health issues, despite these properties being in good order

 Help for Single Homeless Project is progressing – this work will deliver a Making Every Adult Matter (MEAM)

•

- Approach to dealing with the most vulnerable Single Homeless People. The
 project involves targeting the most vulnerable and directing additional resources
 aimed at working with this group to tackle their needs.
- Cascading the new Adult Safeguarding policies through team meetings.
- STARS Team shadowing CHS staff to understand issues regarding housing.
- Introduction of a new homeless protocol between CHS and Bolton Hospital A&E to ensure clients homeless issues are planned for and acted upon prior to discharge.
- Bolton at Home delivering community safety advice via mobile units in the community and schools. Implementing additional ASB powers to protect the community.
- Mental Health Link work now taking place in hospital regarding homeless prevention
- Housing partners meet as a Housing Safeguarding subgroup to share updates and progress across the housing partnership.

3.3 Bolton NHS Clinical Commissioning Group (CCG)

This is the high level view of what we have achieved over the last 12 months for adults. The specialist safeguarding adult lead role has been incorporated to the Designated Adult Safeguarding Manager (DASM) role in line with the Care Act. The DASM is the Mental Care Assessment (MCA) and Prevent lead.

The DASM is a member of the following groups and attends regularly:

- Professional advisor to the Safeguarding Adult Board.
- Safeguarding adult subgroups.
- Safeguarding Adult Executive Group to the Adult Safeguarding Board.
- Channel Panel.
- Multi-Agency Panel Safeguarding Adult.
- Bolton Integrated Safeguarding Comminute.
- Care home intelligence form for health and social care.
- Safeguarding CCG Greater Manchester adult network.
- Safeguarding Local Authority Greater Manchester adult network.
- Harm Free panel at Bolton Foundation Trus.t

The DASM has delivered on:

- Mental Capacity Assessment, Prevent and safeguarding training to CCG staff, nursing homes and General Practitioner.
- A CCG safeguarding training policy is in place.
- CCG MCA policy.
- Contributes to service contracts and specifications and advises commissioners, NHS England and public health on safeguarding matters.

There is senior representation at the Bolton Safeguarding Adult Board and Health &Wellbeing Board:

 CCG Chief Officer CO provided assurance to Bolton Safeguarding Children Board regarding health contribution and membership.

3.4 Bolton Community and Voluntary Services

- Bolton CVS has up to date Safeguarding policies and a designated Safeguarding Officer.
- Representation at Prevention & Early Intervention subgroup and Workforce Development Sub-group – this includes commenting on the new procedures and practices from a voluntary sector perspective.
- Adapting Adult Safeguarding Training for the Voluntary and Community Sector which will become part of The CVS Stronger Together Training programme. This will be advertised to The Voluntary and Community Sector via our database of over 1,000 contacts. We also discuss safeguarding issues where relevant as part of the existing training programme offer.
- Disseminating information on the new online procedures to Bolton CVS staff via the staff team meeting.
- Group Development/Training when working with groups on a one to one basis we advise re best practice regarding safeguarding and policy development.
- Small grants programme It is a condition of grant funding that groups working with vulnerable adults have a safeguarding policy.
- Working with Bolton Council to develop appropriate guidance for the voluntary sector in relation to Adult Safeguarding.
- Working with key partners, particularly through our existing framework of forums and networks, for example, The Health, Care and Well Being Forum, Our Preventative Services Group and The Equality Target Action Group, to raise awareness of Adult Safeguarding within The Voluntary and Community Sector

3.5 Bolton NHS Foundation Trust

Bolton NHS Foundation Trust has appointed a new Lead Nurse for Safeguarding Adults – Sandra Crompton - also responsible for implementation of the Mental Capacity Act and Deprivation of Liberty Safeguards.

The Trust has revised all training provision for Safeguarding Adults and implemented an action plan to improve implementation and awareness of the legislation in respect of the Mental Capacity Act.

All new staff to the Trust are given face to face, mandatory Safeguarding training to ensure staff appreciate their duty of care and legal responsibility in respect of Safeguarding regardless of grade or position.

The Trust has been a counter signatory to the Bolton Safeguarding Adults Policy and is in the process of disseminating to all Trust Staff.

In the past 12 months the Trust has imposed 174 Urgent Authorisations for Deprivation of Liberty Safeguards with 1:3 being for non-Bolton residents. There has been a recorded 127 Safeguarding Alerts.

All Trust Safeguarding Policies are being reviewed to ensure 'Care Act' compliance. The Trust is actively promoting multi- agency partnership working with a view to developing and sharing best practice and actively participating in strategy meetings in response to Safeguarding Alerts.

The Director of Nursing has established a new Safeguarding Committee which meets bi-monthly and includes representation from all Divisions within the Trust.

3.6 Bolton College

- Bolton College has developed a prevent radicalisation Action Plan in response to statutory guidance issued under section 25 of the Counter Terrorism and Security Act.
- Bolton College Safeguarding Team, students mentors, managers and Learning Development mentors and governors are all trained and being trained on preventing radicalisation.
- Bolton College Ofsted Inspection in March 2015 stated "The safeguarding arrangements for learners are good; learners feel and are very safe. The well-trained and highly effective learner support team is expert in identifying and supporting the most vulnerable learners. High numbers of learners confidently self-disclose and subsequent good support provided for them by tutors enables them to remain in learning successfully. Systems and processes to recruit staff are rigorous and follow guidelines to ensure that they take all the necessary precautions regarding safe recruitment". And "Through effective partnerships with external organisations, such as the police, staff and managers have developed a thorough awareness of and responded well to issues of national

concern, such as the potential risk to learners of radicalisation, and ensure good protection for vulnerable learners".

3.7 Greater Manchester Fire Service Bolton Division (GMFRS)

The number of Home Safety visits for Persons at Increased Risk of Fire has increased to 633 in this time period. GMFRS have made 234 internal referrals, 91 self-referrals have been made and 308 referrals have been received from partner agencies.

The delivery of Safeguarding Awareness Training was completed early 2014 to all Community Safety Teams and Operational Crews in Bolton Borough.

GMFRS internal general Safeguarding training (e-learning) was completed in 2014/15 by all staff. This was split into 4 modules - during the training learners would acquire a greater understanding of what safeguarding is, understand GMFRS' Safeguarding Policy and Procedure and receive information on what further support is available.

GMFRS Safeguarding is very much a prevention led process, it aligns to our Person at Increased Risk (Fire) model. There are a large number of people in the Bolton area who meet our at increased risk criteria (2014/15 performance data above) but who do not meet the "Threshold Decisions" of the guidance in that they are not, or do not appear to be, victims of abuse or harm from others. GMFRS considers that the level of vulnerability/risk due to individual circumstances gives cause for concern and as such continues to work closely with partners/key agencies to ensure that the risk is minimised where it can be.

Background information on Persons at Increased Risk (Fire):

People aged between 41-90 accounted for 87% of all accidental and 63% of all non-accidental fatal fires in the North West during the last 3 years. The most at risk age group being between 71-90 where contributory factors included:

Poor Housing/Living Conditions Reduced Mobility Sensory Impairment Mental Capacity Medication Social Isolation Smoking

Contributory factors relating to accidental and non-accidental fire fatalities are generally very similar and identify the person most at risk from fire in the North West Region to be over 41, living alone, who may be living with some form of disability, be taking prescribed medication, smokes and regularly consumes alcohol. They will also most probably be known, or had contact with, an organisation that provides support and/or care. 48% of all fire fatalities in the NW Region had received a Home Safety Check from a Fire and Rescue Service. People over the age of 60 accounted for 64% of all accidental fire fatalities but they only represent 22.8% of the population

and people over the age of 80 accounted for 27% of all fire fatalities although they only represent 4.5% of the population in the NW Region. This data has been extracted from the Learning from Fatal Fire Incidents Report 2014.

Community Risk Intervention Team (CRIT);

GMFRS has launched a new service to provide responses to high volume, low priority incidents who will also expand and deliver prevention and protection activity. The introduction of the new Community Risk Intervention Team (CRIT) will meet a range of objectives set by GMFRS, North West Ambulance Service, Greater Manchester Police, Directors of Public Health, Clinical Commissioning Groups and Health & Social Care departments of the Local Authority areas across Greater Manchester. The CRIT will deliver pro-active, targeted risk reduction campaigns 365 days a year and will respond to incidents using vehicles containing risk reduction and lifesaving equipment that will allow individuals to receive a faster and more holistic service that will reduce the potential for harm and risk.

Bolton's CRIT will be based at one of the 4 fire stations in the Borough and is currently scheduled to be operational during the second half of 2015

3.8 Greater Manchester Police Bolton Division

During 2014/15 the intervention project was completed on the Bolton Division with great success. They identified repeat demand, tackling issues and problems through early intervention and signposting to the most appropriate agency or service.

This work has continued on the Bolton Division with the development of Complex Dependencies and Vulnerability Team working in conjunction with other agencies such as Family First identifying those at most risk. The work conducted by the intervention team, continues to be progressed, developed and supported by the Bolton Division resulting in the project receiving Government funding and with this the inception of 'STRIVE' which is being introduced force wide based on the Bolton model.

The on-going work has seen a reduction in demand for the division and the vulnerable adult team ensuring that those at high risk of harm and exploitation identified at an early stage and receive the intervention and support required to reduce the risk.

In recognising this success, the police definition of vulnerability has been reviewed and amended in order that it reflects the work already undertaken. This definition has been trialled with the force and will soon be implemented on the Bolton division.

The Vulnerable Adult Team in conjunction with partners recognised that the effectiveness of MAP-SA needed to be reviewed. Although in its current format MAP-SA reviews those individuals with high dependencies with a view to intervention, there is an opportunity to encourage further engagement from agencies, set action plans, identify a service that is best placed to have responsibility for that individual and assess the effectiveness of the intervention and if the risk has reduced.

There is on-going training on the Bolton Division and within the vulnerable adult team with the introduction of new legislation involving offences of ill-treatment or wilful neglect through the Criminal Justice and Courts Act 2015.

The legislation is brand new and has yet to be tested within the criminal justice system. The legislation is more effective providing powers to the police to prosecute individuals and services. This legislation provides greater protection to those who are vulnerable and recognises the short falls in the previous offences.

The Bolton Division and Vulnerable Adult Team are committed to the Public Service Hub that is due to commence this autumn. This will provide the infrastructure for a multi-agency team to work more effectively and efficiently providing a better service for the customer, reducing demand, utilising the most appropriate service and tackling and preventing the problems through greater information sharing.

This year has seen a number of positive results for the Bolton Division, Public Protection Investigation Unit and partner agencies which has ultimately provided a better service for all concerned.

3.9 Greater Manchester West Mental Health Trust (GMW) - Bolton Directorate

- 91% of staff are up to date with the appropriate level of safeguarding training.
- A review of level one training in GMW has been undertaken to ensure Care Act compliance.
- Safeguarding Leads have undertaken 'Prevent training'.
- The new appointment of the Local Security Management Specialists for GMW has registered for Prevent training.
- Participation in Adult Social Care quality case file audit.
- Member of Bolton Integrated Safeguarding Committee.
- New PARIS IT system to be implemented after April 2015. Safeguarding requirements discussed and supported the development of PARIS.
- Representation from GMW at Board level, Executive safeguarding group and all sub-groups.
- Representation from GMW at MAPSA, MAPPPA, MARAC and Channel.

3.10 North West Ambulance Service NHS Trust (NWAS)

A number of high profile national investigations have resulted in an update to safeguarding procedures and training to ensure that adults and children who are at risk or victims of exploitation and radicalisation are also safeguarded.

Achievements

CQC pilot standards

The Trust took part in the CQC pilot assessments of Ambulance Service NHS Trusts. The result is that a number of standards have been developed for Ambulance Services and good assurance was received in relation to safeguarding arrangements.

Engagement with Safeguarding Boards

The Trust has a named contact for each of the 46 Safeguarding Boards across the North West. This strengthens working together and information sharing

relationships and is reflected in the increased number of Serious Case Reviews, Safeguarding Adult Reviews and Domestic Homicide Reviews. Staff also access multi-agency training and share learning and expertise with their peers.

Frequent caller Project and vulnerable people.

The safeguarding and frequent caller teams are regularly identifying and sharing information to enable a joined up approach to ensure vulnerable people are afforded the assessment and care they require in accordance with their wishes. When appropriate they are protected from harm or abuse and a significant amount of valuable patient data is now shared to ensure the best outcomes for these patients. This also includes sharing concerns in relation to nursing and Care Homes.

• Update of the safeguarding Vulnerable Persons Policy and Procedures A significant amount of work has been done to update the Policy and associated procedures. These now include the principles of adult safeguarding and pathways are included for victims of Child Sexual Exploitation (CSE), Female Genital Mutilation (FGM) and the radicalisation of vulnerable people (PREVENT).

PREVENT awareness and training

Over 75% of all NWAS staff have received WRAP 3 training which is the 'Workshop to Raise Awareness of PREVENT- part of the government's anti-terrorism strategy. WRAP is included within mandatory training for all staff and compliance with this national requirement continues to increase monthly.

3.11 Cheshire & Greater Manchester Community Rehabilitation Company (CRC)

The Cheshire & Greater Manchester Community Rehabilitation Company (CRC) came into being on 1st June 2014, following the changes to Probation Services brought about by the Ministry of Justice's Transforming Rehabilitation programme. Former Probation Trusts were dissolved, and separated into a National Probation Service, and 21 CRCs. In February the CRC came into the ownership of Interserve Justice, under a new contract with the Minister of Justice. The contract clearly sets out our responsibilities under the Care Act, which we take very seriously.

The Cheshire & Greater Manchester CRC will manage a caseload of approximately 9,000 offenders across the two counties, with approximately 700 offenders managed in Bolton at any time. Since coming into being in June, we have been able to do some analysis of our caseload. Approximately 29% of the CRC caseload in Bolton known Domestic Abuse perpetrators, and around 15% are be Female offenders, many of whom are vulnerable and at risk of Domestic Abuse. Therefore interventions for Domestic Violence (DV) perpetrators will become a large part of our work, and working alongside other agencies in Bolton to roll out the DV strategy will be important.

Approximately 5% of our caseload are assessed as having learning difficulties or disabilities, although we believe this is under-reported. We are therefore committed to working alongside Safeguarding Adults Boards in Cheshire and Greater Manchester, in order to ensure potential victims are safeguarded, as well as ensuring that those vulnerable adults within our caseload receive an effective and appropriate service. We have been a pilot area for the Ministry of Justice's Learning disability project, in conjunction with Calderstones, and this has involved training our

staff in Learning Disability awareness and use of an approved screening tool. We will also in 2015-16 work towards accreditation by the National Autistic Society, the only CRC in the UK to do so.

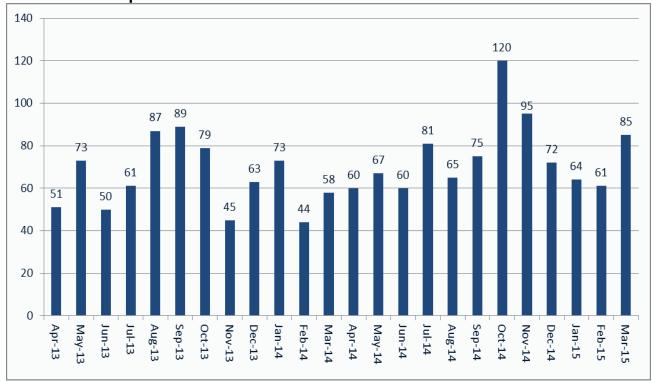
We have achieved the following in our first 9 months of operation. We have: Identified a lead Senior Manager for Safeguarding who has completed our Safeguarding procedures and practice directions.

- Established mechanisms to link into Adult Safeguarding Serious case reviews, and also Domestic Homicide reviews. We also have mechanisms to spread the learning from local reviews throughout the CRC.
- Completed further training for staff in Domestic Violence awareness, and practice with Domestic Violence perpetrators.
- Reviewed our suite of interventions with Domestic violence perpetrators, and introduced the Building Better Relationships programme across Greater Manchester and Cheshire.
- Contributed to commissioning women's centres / projects in all Boroughs
 across Greater Manchester, in order that Female offenders have access to
 high quality services which need their needs, which can reduce their
 vulnerability and strengthen their families. We are leading a piece of work to
 scope out the viability of setting up a Women's centre in Bolton, where the
 needs of vulnerable women could be better catered for.

4. Safeguarding activity in 2014/15 and what this means

4.1 Safeguarding activity in Bolton – Safeguarding Alerts (referrals to Adult Social Care of concerns/allegations of abuse)

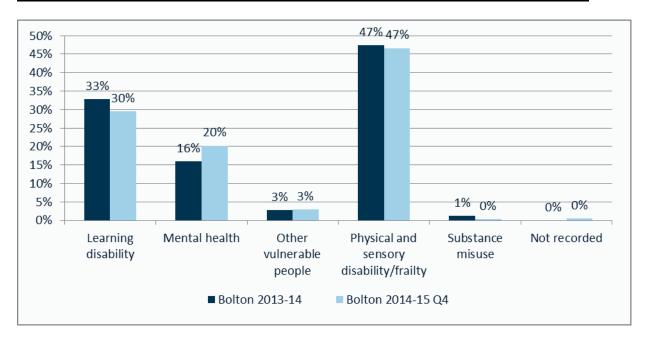
Number of alerts per month



As shown in the above chart, Bolton's rate of new safeguarding alerts fluctuated throughout 2013-14, ranging between 44 and 89 alerts per month with an average monthly rate of 64. Activity in 2014-5 saw an increase with a range of alerts between 60 and 120, with an average monthly rate of 75.

Overall over the year the number of alerts went up by 17% compared to the previous year. This increase is attributable to increased Safeguarding training and the general awareness raising, and improved reporting with the electronic systems.

4.1.2 Primary Client Group (The main presenting need of the person at risk)



The distribution of alerts relating to different primary clients groups was very similar to last year, but with an increase in alerts relating to mental health, with a corresponding reduction in the number of alerts concerning people with learning disabilities. The increase in Mental Health is attributed to improve data reporting and increased awareness.

4.1.3 Source of alert

By Soil								
Source	Quarter 1	Quarter 2	Quarter 3	Quarter 4	1st April - 31st March			
Anonymous	4	2	0	2	8			
Care Quality Commission	0	1	15	3	19			
Council professional	23	26	26	20	95			
Friend / Relative / Neighbour	32	31	33	18	114			
Health professional	16	31	57	41	145			
Housing	6	5	3	2	16			
Member of the public	0	1	2	0	3			
Other	7	8	9	18	42			
Police or probation service	4	6	10	10	30			
Provider Staff	92	102	126	88	408			
Self Referral	3	7	6	6	22			
Not Recorded	0	1	0	2	3			
Grand Total	187	221	287	210	905			

		By Source
Source	Bolton 2013-14	Bolton 2014-15 Q4
	Percentage	Percentage
Anonymous	2%	1%
Care Quality Commission	0%	2%
Council professional	18%	10%
Friend / Relative / Neighbour	12%	13%
Health professional	12%	16%
Housing	3%	2%
Member of the public	1%	0%
Other	6%	5%
Police or probation service	4%	3%
Provider Staff	39%	45%
Self Referral	3%	2%
Not Recorded	0%	0%
Grand Total	100%	100%

The information above shows a breakdown of the source of safeguarding alert, with nearly half of all alerts coming from provider staff, a significant proportion of these alerts relate to clinical incidents rather than incidents of abuse. The Board has requested that further work is completed to support the understanding of Safeguarding and thresholds.

Following this, the most alerts have come from friends, relatives or neighbours and professionals working either in the Council or in a Health setting. More health professionals have been raised alerts this year. The rate of alerts coming from both housing and members of the public is low and the Executive Group have discussed the importance of monitoring this with a view to increasing awareness via a public campaign later in this year.

4.2 Safeguarding Referrals (Alerts where a decision has been taken to undertake a Safeguarding Investigations/Enquiry are known as referrals)

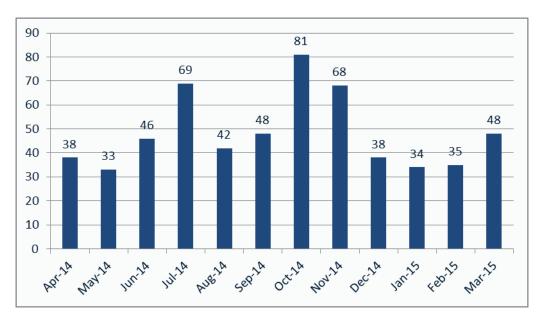
Progress has been made in establishing new procedures for responding to specific safeguarding concerns. In 2013/4 Bolton recorded a relatively low number of completed safeguarding referrals in comparison with other similar North West authorities, this position has been addressed this year, with new processes in place and data/recording issues addressed. The overall number of safeguarding referrals rose throughout the year to 580 by the end of 2014/15, compared with 379 the previous year – a 53% increase this year.

Previously, Bolton had been identified as an outlier for both the overall rate of referrals along with the rate of concluded referrals, per 100,000 of the population and it was anticipated that they would rise this year as processes, recording and awareness increased.

The performance indicator which tracks the rate of concluded referrals will continue to be monitored as part of the Adult Services performance framework, allowing us to

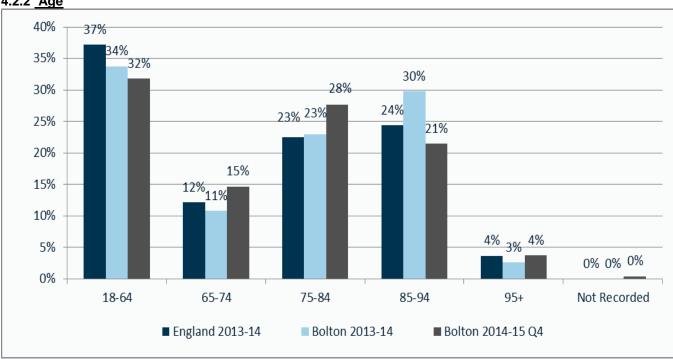
compare performance with North West authorities. This benchmarking information is expected to be made available later in the year.

4.2.1 Number of referrals per month

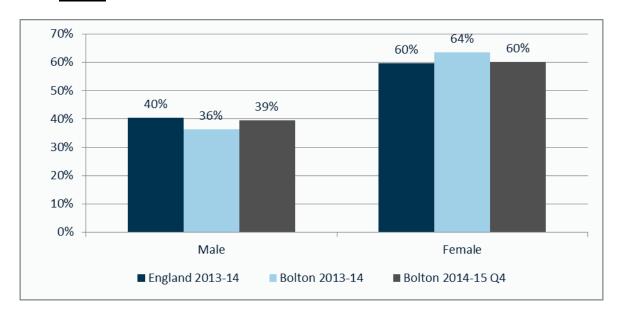


Referrals peaked in October 2014 but this figure is attributable to concerns identified within a large care home setting in Bolton. Following a detailed multi-agency response these concerns are being overseen through a strategic multiagency monitoring group and improvements are being made.



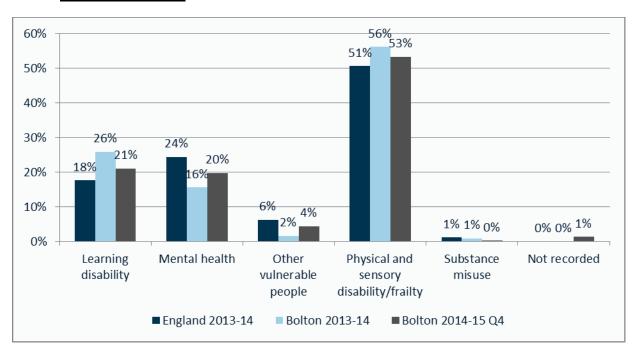


4.2.3 Gender



There has been no significant change to age or gender or primary client type compared to either 2013/14 figures or the National England averages.

4.2.4 Primary Client Type



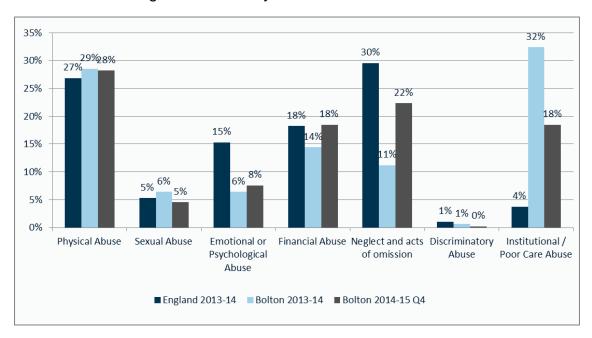
The proportion of referrals concerning the various different client groups more closely resembles national averages than previously.

4.3 Concluded investigations

There were 461 concluded referrals in 2014/15 – this fits in with forecasts and is a significant increase on 312 for last year.

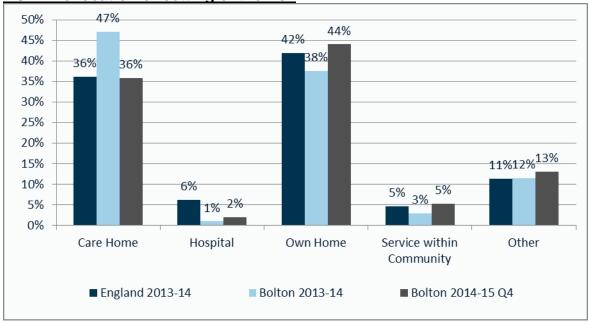
4.3.1 The type of abuse or risk

Concluded investigations in the period 1st April 2014 to 31st March 2015 compared to Bolton 2013/14 and England 2013/14 by:



There is some significant variation in the type of abuse when compared with last year; particularly the institutional or poor care abuse category which has reduced from 32% to 18%. A large increase in the proportion of neglect and acts of omission is also noted. Generally what we see here is a move closer to the national average proportions for the type of abuse or risk (2013/14) and improved reporting in relation to the specific categories.

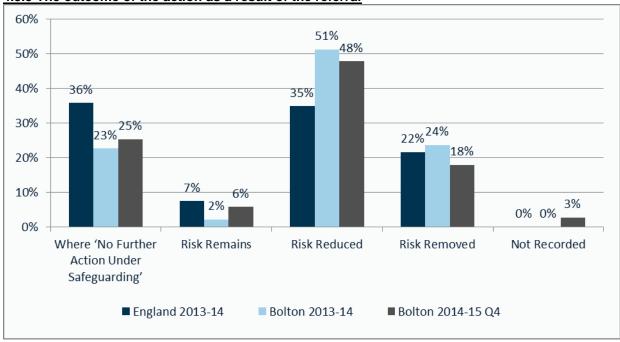
4.3.2 The location or setting of the risk



Again we see local data showing Bolton moving closer to national proportions in relation to the location or setting of the risk.

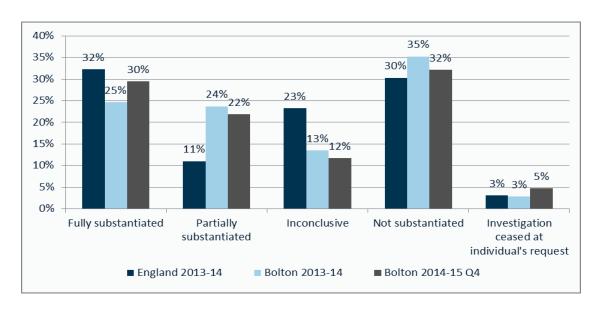
Almost half of all abuse took place within people's own homes with the percentage of abuse occurring in care homes going down. Because of the increase in referrals this year compared with last year, this means that there are a larger number of referrals overall, particularly from people living in their own home. The development of safeguarding training within partner agencies and within provider organisations who provide support people at home is likely to have contributed to the increase in these numbers.





Bolton is well below national averages where "no further action" has been the outcome of the safeguarding enquiry and has a higher percentage (51%) where risk is reduced compared to 2013/14 figures and the national average. This would suggest that practitioners are proactive in reducing risks and identifying safeguarding actions which result in reducing the risk for the adult post enquiry.

4.3.4 The status at the conclusion of the referral



Over half (52%) of all cases were either partially or fully substantiated, which is a minor increase when compared to 2013-14 and is 10% above the national average.

4.3.5 Outcome for the perpetrator

By the outcome for the perpetrator						
Outcome for Perpetrator	Quarter 1	Quarter 2	Quarter 3	Quarter 4	1st April - 31st March	
Action under Mental Health Act	1	1	0	0	2	
Community Care Assessment	1	3	0	0	4	
Continued Monitoring	17	41	12	15	85	
Counselling, Training or Treatment	1	7	2	1	11	
Criminal Prosecution or Formal Caution	0	2	1	1	4	
Disciplinary Action	4	8	5	1	18	
Exoneration	0	1	2	1	4	
Management of Access to Vulnerable Adult	4	5	3	0	12	
No Further Action	37	58	51	58	204	
Not known	17	16	7	7	47	
Police Action	2	1	3	3	9	
Referal to registration body	0	0	16	0	16	
Referral to Pova list or Independent SG Authority	0	1	0	0	1	
Removal from Property or Service	5	3	3	2	13	
Training	4	10	10	7	31	
Grand Total	93	157	115	96	461	

By the	outcome for th	e perpetrator
Outcome for Perpetrator	Bolton 2013-14	Bolton 2014-15 Q4
	Percentage	Percentage
Action by Contract Compliance	1%	0%
Action under Mental Health Act	1%	0%
Community Care Assessment	1%	1%
Continued Monitoring	15%	18%
Counselling, Training or Treatment	3%	2%
Criminal Prosecution or Formal Caution	0%	1%
Disciplinary Action	8%	4%
Exoneration	1%	1%
Management of Access to Vulnerable Adult	5%	3%
No Further Action	39%	44%
Not known	5%	10%
Police Action	3%	2%
Referal to registration body	0%	3%
Referral to Pova list or Independent SG Authority	0%	0%
Removal from Property or Service	6%	3%
Training	13%	7%
TOTAL	100%	100%

See below explanation following the data in relation to outcomes for vulnerable adults.

4.3.6 Outcome for the vulnerable adult

By the outco	ome for the vul	nerable adult
Outcome for Vulnerable Adult	Bolton 2013-14	Bolton 2014-15 Q4
	Percentage	Percentage
Application to change Appointeeship	0%	1%
Application to Court of Protection	0%	0%
Community Care Assessment and Services	4%	3%
Guardianship or use of Mental Health Act	1%	0%
Increased Monitoring	32%	29%
Increased or moved to different Care	9%	4%
Management of access to Finances	2%	2%
No Further Action	38%	48%
Other	6%	9%
Referral to Advocacy Scheme	0%	1%
Referral to Counselling or Training	1%	0%
Removal from property or Service of victim	0%	1%
Restriction/management of access to alleged perpetrator	2%	1%
Review of Self Directed Support	4%	2%
TOTAL	100%	100%

Further work has been undertaken by the Board to consider the high percentage of "no further action" for both the alleged perpetrator and the Adult at risk in order to understand if there was a recording error or if it relates to low level incidents being taken into safeguarding that should not have been dealt with under the safeguarding process. This review has identified a training need for the professional undertaking the safeguarding enquires to identify and record appropriate outcomes.

A large number of the cases were either outcomed with 'not determined' or 'not substantiated' (26 out of the 40 cases in total) and only 12 out of the 40 were either 'substantiated' or 'partially substantiated' which again may account for the high number of 'no further actions' as the chosen outcome.

Further work will be undertaken over the next year to continue to understand these figures in order to consider what actions need to be undertaken to address this high percentage of "No Further Action" for both the perpetrator and the vulnerable adult.

4.4 Deprivation of Liberty Safeguards (DoLS)

The DOLS regulations were enacted to ensure that incapacitated adults are not deprived of their liberty without the safeguards of a process of authorisation under the control of the local authority. DOLS arrangements had been in place since 2007, but a Supreme Court judgement set a new threshold which was both more prescriptive and lower than that formerly used by clinicians and institutions.

This led to a marked increase in the number of DoLS assessments undertaken by the Local Authority and an increase in the associated resources to undertake them. The Safeguarding Adults Board prioritised the monitoring of this change in law and Bolton applied the new judgement to all new cases and case reviews and developed a plan to assess all people who may now fall under the requirement prioritising cases based on impact to the individual.

There were 550 applications in 2014/15, compared with 94 for the whole of 2013/14. This is a five-fold increase on the previous year and this rate is expected to increase even further once all outstanding applications have been signed off by the supervisory body.

A law commission review of the Mental Capacity Act 2005 has had its terms of reference altered to include a review of the DOLS arrangements; but this is not due to be translated into new law until 2017 at the earliest, with a consultation running until November 2015.

4.1 Applications and Outcomes for DOLS Authorisations in the period 1st April 2014 - 31st March 2015

	Applications and Outcomes - Numbers and Percentages						
				Application Outcomes			
Quarter	Month	Total Applications		Authorisations Granted		Authorisations Not Granted	
		Number		Number	Percentage	Number	Percentage
	April	6		5	83%	1	17%
Quarter 1	May	18		15	83%	2	11%
	June	28		22	79%	4	14%
	July	35		28	80%	6	17%
Quarter 2	August	31		26	84%	2	6%
	September	41		31	76%	8	20%
	October	48		42	88%	2	4%
Quarter 3	November	41		30	73%	5	12%
	December	38		25	66%	8	21%
	January	73		62	85%	9	12%
Quarter 4	February	84		63	75%	18	24%
	March	77		62	81%	11	14%
TOTAL		499		411	80%	76	14%

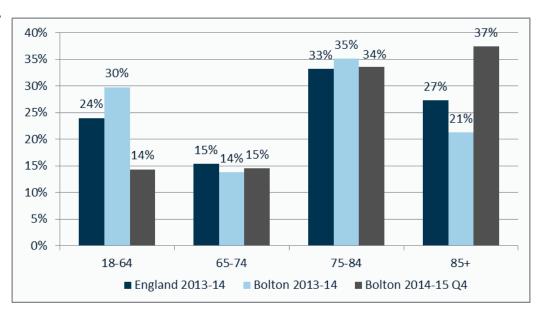
N.B 12 applications were withdrawn.

The DoL information demonstration an increased demand throughout 2014/5, this is in response to the Cheshire West judgement with a significant proportion of applications being authorized.

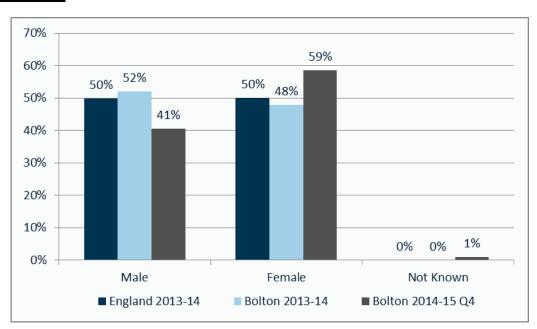
4.4.2 Applications

DoLS Applications in the period 1st April 2014 to 31st March 2015 compared to Bolton 2013/14 and England 2013/14 by:

Age



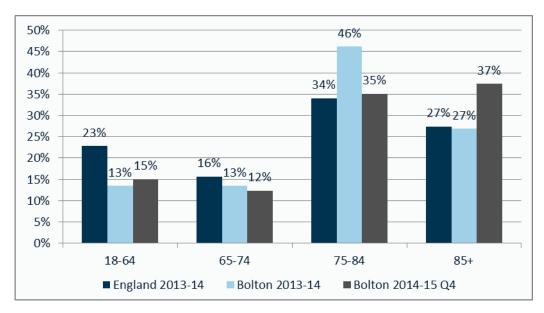
4.4.3 Gender



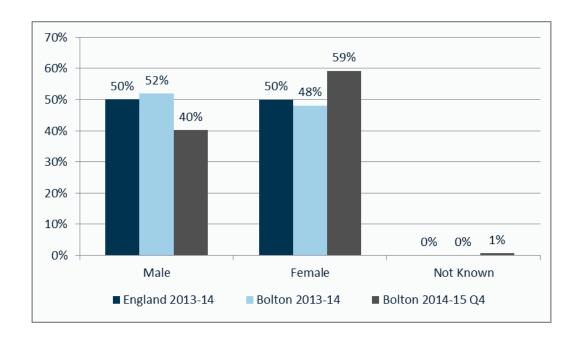
Age comparisons with last year's Bolton applications show a rise in the number of applications for age 85+ and a fall for age 18-64. This mirrors and goes beyond the main difference in age profiles nationally last year - we need to wait to see how Bolton compares with England 2014/15 when those figures are published.

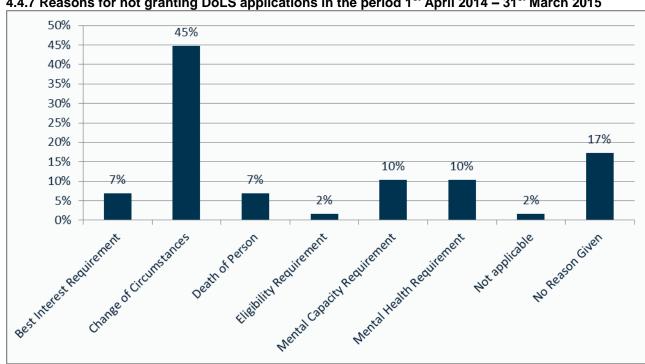
4.4.4 Authorisations
DoLS Applications Granted in the period 1st April 2014 to 31st March 2015 compared to Bolton 2013/14 and England 2013/14 by:

4.4.5 Age



4.4.6 Gender





4.4.7 Reasons for not granting DoLS applications in the period 1st April 2014 – 31st March 2015

The above chart shows that the primary reason for DoLS applications not being granted is due to a change of circumstances (45%). A fifth of applications are not granted due to mental health or mental capacity requirements and 17% of applications are not granted with no reason given.

5. The Future - Making Safeguarding Personal

The Adult Safeguarding Board's new structure and subgroups are becoming well established, placing us in a good position to move forward to develop the adult safeguarding agenda and raise its profile. Professionals, community groups and local people all have a role to play in protecting the adults at risk and they need to be sufficiently informed of the issues to be able to prevent, identify or raise any concerns about abuse or neglect.

As the Safeguarding Adult Board is placed on a statutory footing with the implementation of the Care Act in April 2015, an important part of the Board's work over the next year will be to make sure that the new on line safeguarding procedures that were launched in February 2015 are embedded in the practice of workers from within adult social care and all partner agencies. The workforce development training programme and the co-ordination and delivery of the communication plan will be an important part of achieving this.

The Board itself has been preparing to become a statutory body in April 2015 when it will be required by law to be in place and perform certain functions and duties as outlined in the Care Act 2014.

We want safeguarding in Bolton to be person-centred, not process driven. We need to safeguard individuals in a way that supports them in making choices and having control over their lives. This means to make sure that service users have a positive

experience of safeguarding and are listened to and consulted throughout about the outcomes they want to achieve.

A major challenge in the last year has been maintain a strong and cohesive approach to safeguarding across services, which are facing reductions in financial resources and fundamental organisational changes (particularly in the NHS).

Despite the considerable challenges, all organisations involved with the Board have continued to prioritise adult safeguarding and ensure a good level of service.

6. Appendices

6.1 Workforce Development Plan (hyperlink)

Bolton Local Safeguarding Adults Board Workforce Plan 2013-2015

6.2 Useful Contacts

Bolton Council

If anyone needs to report a safeguarding adults concern Monday to Friday 8.45-5pm except Bank Holidays they should ring Adult Social Care - Short Term and Reablement Team (STAR)

- South STAR 01204 337000 if the adult lives in the following post code areas: BL3, BL4, BL5, and M--
- North STAR 01204 333410 if the adult lives in the following post code areas: BL1 BL2, BL6, BL7
- We also have an e mail address for non-urgent queries safeguardingadults@bolton.gov.uk
- Any urgent/emergency concern outside of the above hours contact Out of Hours Duty Team telephone 01204 337777

Greater Manchester Police

Emergencies - always dial **999** in an emergency where there is **danger to life, or a crime is in progress.** This number is available 24 hours 7 days a week. From a mobile please dial **999 or 112.**

Non-emergencies - please dial **101**, this is available 24 hours, 7 days a week. A non-emergency is where police attendance is required, to report a crime or to report other incident.

6.3 Guidance and further links

Making Safeguarding Personal

Adult Safeguarding - Social Care Institute for Excellence

Safeguarding People - Care Quality Commission

7. Glossary

Abuse

A violation of an individual's human and civil rights by any other person or persons and may be:

- A single act or repeated acts
- An act of neglect or a failure to act
- Multiple acts for example, an adult at risk may be neglected and also being financially abused

Adult Social Care Outcomes Framework (ASCOF)

The Adult Social Care Outcomes Framework (ASCOF) measures how well care and support services achieve the outcomes that matter most to people, from information gathered from local authorities around the country.

Alert

A concern that an adult at risk is or may be a victim of abuse or neglect. An alert may be a result of a disclosure, an incident, or other signs or indicators.

Anti-Social behaviour

Behaviour by a person or persons which causes or is likely to cause harassment, alarm or distress to one or more persons not of the same household as the person

Care Act 2014

The Care Act consolidates and modernises the framework of social care law, for adults and sets out duties relating to promoting well-being, prevention, information, assessment and on care costs. The Act places on a statutory footing some of the safeguarding obligations that were previously only located in guidance. This Act became law and was implemented in April 2015.

Deprivation of Liberty Safeguards (DoLS)

The Deprivation of Liberty Safeguards (DoLS) is part of the Mental Capacity Act 2005. They aim to make sure that people in care homes and hospitals are looked after in a way that does not inappropriately restrict their freedom. The safeguards should ensure that a care home or hospital only deprives someone of their liberty in a safe and correct way, and that this is only done when it is in the best interests of the person and there is no other way to look after them.

Domestic violence

Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members.

Hate crime

An incident that is perceived by the victim, or any other person, to be racist, homophobic, transphobic or due to a person's religion, belief, gender identity or disability. This definition is based on the perception of the victim or anyone else and

is not reliant on evidence. In addition, it includes incidents that do not constitute a criminal offence.

Mental capacity

Mental capacity in the context of adult safeguarding is the ability of a person to:

- Understand the implications of their situation
- Take action themselves to prevent abuse
- Participate to the fullest extent possible in decision making about interventions involving them, be they life-changing events or everyday matters

Neglect (and Acts of Omission)

Neglect includes ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.

Primary client group is the category that an adult has been categorised under for assessment. The categories are Physical disability, Mental health needs, Learning disability, Substance misuse; and Other vulnerable people

Referral - Safeguarding Referral

A referral is defined as a report of risk of potential abuse, harm or neglect which leads to investigation under the safeguarding process.

Safeguarding

Safeguarding captures notions of both 'promoting welfare' and 'protecting from harm or abuse'. Adult safeguarding work is therefore concerned with preventing abuse and neglect, and promoting good practice when responding to specific concerns. The definition of adult safeguarding has broadened from concern for vulnerable adults receiving community care services, to cover adults in vulnerable situations arising from a range of causes and circumstances, including those who have never had contact with, or need of care services.

Safeguarding Adults Return

The Safeguarding Adults Return is a new collection of statistical tables that have been designed as a successor to the Abuse of Vulnerable Adults (AVA) Return, gathering information about Safeguarding Referrals from council with responsibility for adult social care.

Self-neglect

Self-neglect can be described as

- Persistent inattention to personal hygiene and/or environment
- Repeated refusal of services which can reasonably be expected to improve quality of life
- Self-endangerment through the manifestation of unsafe behaviours

Adult at Risk

A person over the age of 18 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.

Appendix 2





Bolton Safeguarding Adults Vision & Strategic Plan 2015 -2018

Introduction

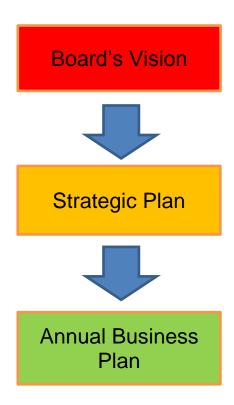
Bolton's Safeguarding Adults Partnership is a statutory function under the Care Act 2014. It is made up of statutory and non-statutory partners working together, with a shared vision, to safeguard adults from abuse and to protect the rights of citizens under the Mental Capacity Act. The work of the Partnership is led by Bolton's Safeguarding Adults Board and is undertaken by a number of sub-groups on behalf of the Board.

This document sets out the Board's Vision and its 3 year Strategic Plan towards realising that vision. Each provides direction and continuity to the Annual Business Plan, ensuring that the achievements of the Board are built upon each year and actions are focused on the Board's overall priorities and objectives.

Practice within adult safeguarding is continually evolving as a result of both local and national developments in policy, legislation, safeguarding adult reviews and inquires. Any identified actions will be incorporated into the Board's Business Plan which will be reviewed annually

This report includes:

- Bolton's Safeguarding Adults Board's Vision.
- 3 year Strategic Plan.
- 2015-2016 Annual Business Plan.



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4	Quality Assurance and Performance Sub-group	6
5	Workforce Development Sub-group	7
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1. Our Vision - Bolton Safeguarding Adults Board

The Board's vision sets out the overarching aims for the partnership:

People should be able to live a life free from harm, abuse and exploitation.

The Board's statement of purpose that underpins this vision is to:

To help and protect adults who have needs for care and support, who are experiencing or are at risk of abuse or neglect and as a result of their needs are unable to protect themselves from abuse or neglect. This is whether or not the adult is having their needs met or they meet the local authority's eligibility criteria for care and support services.

The core purpose of the Board is to protect adults at risk, but to also have a key responsibility to promote the wider agendas of safeguarding and prevention through ensuring safeguarding is everybody's responsibility in our organisations and communities. To achieve this we need a coordinated and timely response to reports of abuse and a need to create a community where abuse is not tolerated and people can speak out.

The Board has endeavoured to work to the following strategic principles in all its developments to achieve the vision and adhere to its statement of purpose;

- **Principle 1 Empowerment** taking a person-centred approach, whereby users feel involved and informed, and their consent is sought when making decisions and actions to safeguard.
- **Principle 2 Protection** it is everybody's responsibility to act upon suspicions of abuse to ensure that adults at risk are afforded protection in law.
- **Principle 3- Prevention** it is better to take action before harm occurs and prevention should be the primary goal. Everyone has a role from organisations to members of the public and communities.
- **Principle 4 Proportionality** ensuring outcomes are appropriate for the individual and responses to allegations of abuse are proportionate to the risk and nature of allegation.
- Principle 5 Partnership agencies and communities should work together
 to respond effectively and share information appropriately ensuring the
 individual is involved.
- **Principle 6 Accountability** all agencies have a clear role and should be transparent and accountable for decisions that are made.

2. Strategic Plan

The Board shall be known as 'Bolton Safeguarding Adults Board' and will operate as an executive board of statutory and non-statutory partners, hereafter known as the BSAB or the Board. To carry out its responsibilities effectively the Board shall be composed of senior officers nominated by each member agency. Members of the Board should have the necessary authority to commit their organisation and its finances to the work of the Board.

Members of the 'Executive Safeguarding Group' (formally Operations Board) will be asked to undertake more operational duties in line with strategic decisions made at the Board. This group will report to the Board and support the work of the multiagency subgroups.

The Board has developed 7 work streams to carry forward Bolton's Vision and Strategic Principles into 2018.

The work streams are:

- Governance, Leadership and Partnership
- Quality Assurance and Performance
- Workforce Development
- Early intervention and prevention
- Mental Capacity
- Learning Lessons
- Communication and Community Engagement

These work streams are delivered through subgroups and have a diverse multiagency representation. Some task and finish groups will be developed outside of these subgroups to address specific areas of work/development.

3. Governance, Leadership and Partnership

The strategic objectives of this task and finish group:

- Effective working relationships between members of the Board need to be sustained and developed, ensuring appropriate representation, membership and links to wider networks/Boards are embedded.
- A clear governance structure that is Care Act 2014 compliant.
- All policies and procedures are up to date and compliant with the relevant legislation and guidance.
- Strategic links and key shared work streams have been identified and included as relevant to the Board Business Plan. For example, shared agendas relating to:
 - Bolton's Children's Safeguarding Board.
 - Bolton's Community Safety Partnership.
 - Health and Wellbeing Board.
- There are a range of policy, procedures and guidance in place that provide a framework within which organisations can work together effectively to respond

to abuse and neglect. They will reflect developments in national guidance and legislation, as well as national/regional/local learning, and consider new approaches to safeguarding. For example - Making Safeguarding Personal.

Where are we now?

Senior representatives of partner agencies actively contribute to the Board which is overseen by the Director of Children's and Adult Services. The Board has a three year Strategic Plan, a detailed Annual Business Plan, Annual Reports, and a series of sub-groups tasked with taking forward the various work streams of the Board. The Board will be seeking to appoint an independent chair and lay person as key strands to its developments over the coming year.

There is positive and widespread engagement across statutory and non-statutory organisations with the Board, supported by an Annual Board Development Day. There is, however, an identified need to further explore the development of integrated and joint working agendas.

Governance, Leadership and Partnership will endeavour to ensure through the Annual Business Plan and other governance arrangements that the governance, leadership and partnerships aims are kept under continuous review, ensuring that Board is working effectively towards achieving its Vision, Strategic Aims and Objectives. Annually, this includes:

- Reviewing the constitution, membership, joint working and engagement of member organisations within the Board and its various sub-groups, to ensure the Board's Vision and Strategic Plan can be realised.
- Reviewing the Board governance arrangements in accordance with any published guidance or legislation
- Reviewing Board achievements against the Business Plan.
- Support the Executive Safeguarding Group to develop a new Business Plan each year, taking into account emerging priorities and the Strategic Plan.
- Reviewing whether additional expertise, representation or links are required in order to facilitate the Board's Business Plan and effective safeguarding practice.
- Support the Board to undertake a self-assessment against the ADASS principles.
- Produce the Board's Annual Report.

4. Quality Assurance and Performance Sub-group

The strategic objectives of this sub-group:

- We will know if we are making a difference.
- We will be confident that our response to safeguarding is effective and consistent.
- Measures and processes effectively capture the outcomes of safeguarding adults work in Bolton (such as improved levels of safety, improved sense of

- wellbeing, reduced levels of risk, successful achievement of outcomes desired by adults at risk).
- There is consistent recording and reporting of safeguarding information across partner organisations in Bolton, enabling the sharing of intelligence at both a strategic and operational level.

Where we are now?

The sub-group has looked at new ways of capturing information about the quality of the safeguarding process. A pilot project to capture service user outcomes - Making Safeguarding Personal - has been completed. The project tested a new way of working which places the service user's outcomes at the heart of the safeguarding process. Once evaluated, it is planned to roll out and embed this practice in the safeguarding adult process across agencies.

A Safeguarding Investigation Audit Tool has been developed and tested. The information obtained through audits will give the Board a greater understanding of how effective and consistent we are at responding to safeguarding concerns. The information will allow the Board to identify training requirements for practitioners where practice needs to be improved and how to move towards peer audits.

Quarterly Performance Reports have been made available to the Board that highlight safeguarding activity, trends and concerns. These will be improved further to ensure the information is useful in informing the Board about what is happening and where the partnerships priorities should be focused.

The Quality Assurance and Performance sub-group responsibilities are to:

- Develop and implement a strategy to measure and improve the quality and performance of safeguarding activity in the Borough.
- Effectively capture the outcomes of safeguarding adults work in Bolton, such as improved levels of safety, improved sense of well-being, reduced levels of risk and successful achievement of outcomes desired by adults at risk.
- Define meaningful quantitative and qualitative measures to evaluate the quality of our response to safeguarding, evaluate impact of safeguarding activity and track improvement.
- Develop performance reporting systems including a dashboard of key performance information for the Board
- Create a safeguarding provider intelligence report which pulls together information from a number of sources together with analysis, key findings and recommendations.
- Analyse all safeguarding information and identify key themes, areas of risk and opportunities for the Board.
- Review local intelligence to identify risk areas and areas for improvement.
- Establish ways of obtaining customer experience and ensuring the customer experience is central to the Board's work to develop standards, processes and policies.
- Establish safeguarding standards and the means for measuring.

- Develop a policy on Safeguarding Thresholds to support partner agencies with decision making around when to make a safeguarding referral.
- Ensure that there is consistent recording and reporting of safeguarding information across partner organisations in Bolton, enabling sharing of intelligence at both strategic and operational level.
- The group's plan includes developing the work of the new Multi-Agency Safeguarding Intelligence Forum which aims to share intelligence regarding issues of concern within provider agencies and agree an approach to address any concerns identified.

The Quality Assurance sub-group includes senior representatives from partner organisations; and, is supported by other individuals and organisations if the need is identified.

5. Workforce Development

The strategic objectives of this sub-group:

- We will have a skilled, knowledgeable and confident workforce.
- Robust multiagency training is available to agencies.
- The workforce development plan incorporates local/regional and national policy, procedures and learning, and meets the needs of stakeholders involved in the safeguarding process.

Where we are now?

The Workforce Development Sub-group has continued to make available a variety of multi-agency training courses over the past 12 months as part of a rolling programme. This programme of training has been developed to respond to identified need within Adult Social Care and partner agencies within Bolton. In addition to this, support has been offered to some partner agencies; Bolton College and Bolton at Home so that they are now in a position to use their own staff to provide low level training provision within their organisations.

The Workforce Development plan is reviewed every two years. Course programmes are added to or adapted regularly according to developments in policy, procedures and guidance, identified needs and feedback from course participants. Individual member organisation training programmes reflect agreed course content to ensure consistency of provision. The introduction of Bolton's Safeguarding Policy and Procedures on 10 February 2015 and the Care Act 2014 require course materials to be updated.

The Workforce Development Sub-group's responsibilities are:

- To ensure there is a programme of safeguarding multi-agency training available for all levels of staff so that they understand and are confident in their roles and responsibilities.
- To ensure there is a range of specialist training to support key roles and processes and in response to lessons learned, serious case reviews and new legislation.
- To deliver the annual safeguarding conference.

- To commission a multi-agency training programme calendar.
- Following the audit being undertaken by the MCA Sub-group identify what Mental Capacity Training (MCA) training needs to be developed and to whom.
- To ensure all training being provided within the Borough of Bolton is delivering consistent messages to the staff groups and is Care Act 2014 compliant.
- To develop a new training programme to incorporate new legislation from the Care Act 2014 and the new safeguarding procedures.

The Workforce Development Sub-group includes senior representatives from partner organisations and is supported by other individuals and organisations if the need is identified.

6. Early Intervention and Prevention

The strategic objectives of this subgroup:

- People will know how to recognise abuse and what to do about it.
- Organisations in Bolton will reduce the risk of abuse, by helping people live independently and safely in their own homes and in touch with others.
- Improving early Intervention and Prevention in Bolton.
- Referrals People do not fall through the net and are not passed from service to service between safeguarding, personalisation, community safety and community support services.

Where we are now?

This subgroup has a very committed membership. It represents a good range of organisations in Bolton who are keen to prevent adults at risk becoming a safeguarding concern. However given the broad remit of the sub-group at times it has been difficult to identify clear objectives.

More recently the sub-group has supported the development of a draft thresholds policy and similarly will be supporting the work of the development of a policy around self-neglect.

A task and finish group identified from the membership of this subgroup have been involved in evaluating the Multi-Agency Panel – Safeguarding Adults (MAP-SA). This panel has been running for a number of years and it was agreed that the work of the panel needed to be evaluated to determine its effectiveness and to make a decision as to whether or not the panel should continue in its current form if the criteria/process needs to be changed.

The Early Intervention and Prevention Sub-group responsibilities are:

- Review MAP-SA and consider re-launch.
- Develop partnerships and improve communications to develop consistent and improved approach to Safeguarding in Bolton.
- Develop a Prevention Strategy.
- Ensure community safety pathways are understood within safeguarding and used effectively e.g. domestic abuse, anti-social behaviour.
- Work with vulnerable/voluntary groups to improve community safety.

- Will support partner agencies to undertake and initiatives to prevent adult safeguarding.
- Support partner agencies to deal more effectively with homeless issues in Bolton.

The Early Intervention and Prevention sub-group includes senior representatives from partner organisations and is supported by other individuals and organisations if the need is identified.

7. Mental Capacity

The strategic objectives of this sub-group:

- Where mental capacity cannot be presumed in relation to adults who need care or support services, mental capacity is formally assessed and subsequent decisions are reached in line with the Mental Capacity Act.
- Audit the number of referrals made to Independent Mental Capacity
 Advocates (IMCA) and ascertain if referrals are appropriate and are always
 made if required. (Some of this information will be obtained via other systems
 already being developed, that is individual agency audits and peer audits).
- Deprivation of Liberty Safeguards (DoLS) practice is in line with national requirements.
- The number of people who are assessed as lacking the mental capacity to make decisions about their safety and who have representation in the safeguarding process (from an advocate, friend or family member) is audited and any required improvement plans are implemented.
- A workforce who is fully training in the Mental Capacity Act.

Where we are now?

In line with this new strategy the membership of the sub-group has been reviewed and its terms of reference have been refreshed. Over the past 12 months there has been some baseline auditing across agencies to ascertain how confident staff feel undertaking Mental Capacity Assessments in their everyday practice. This has included benchmarking current activity with partner organisations around the MCA training being offered to workers in individual agencies.

The sub-group has sought assurance from the partner agencies that Mental Capacity Policies are relevant and up-to-date. This has been confirmed for Greater Manchester West Mental Health Trust, Bolton Foundation Trust, Greater Manchester Ambulance Service and the Greater Manchester Fire Service.

The Transforming Care (Winterbourne View) Strategic Joint Governance Group meets on a monthly basis to oversee the implementation of Bolton's action plan in response to Winterbourne which, since May 2014, has seen a further four Bolton residents discharged from hospital settings outside the borough to community based services.

The Local Authority and CCG, with input from colleagues in Housing, are working in partnership to develop a range of local services which will facilitate a return to the

area of those people who remain in out-of-borough services, both hospital and residential.

Bolton Foundation Trust and GMW have an up-to-date Restraint and Restrictive Practice Policy. The policy for Adult Social Care is currently being refreshed. A briefing paper by a task focused sub-group on Deprivation of Liberty was produced in June 2014 and was circulated through Bolton Council, Bolton Foundation Trust and Greater Manchester West Mental Health Trust. An additional 10 Mental Health Assessors have been commissioned locally to assist with Deprivation of Liberty authorisations. Three dedicated Best Interest Assessors have been appointed within Bolton Council specifically to undertake this work within the Residential and Nursing Homes of Bolton in response to Cheshire West Judgement.

The Mental Capacity Sub-group responsibilities are to:

- Develop a system to evidence compliance with MCA. e.g. Capacity Assessments, Best Interest meetings, IMCA Referrals.
- Revise MCA Multi-Agency policy.
- Develop Restraint Policy.
- To assess current activity of Education and Training of MCA in each organisation and identify training needs for the Workforce sub-group to take forward.
- Ensure delivery of MCA Training across agencies.
- To oversee the process with regard to ensuring that clients in Bolton who may be liable for DoLS is adhered to. This includes keeping up to date with the National Guidance.
- Winterbourne Task and Finish Group.

The Mental Capacity Sub-group includes senior representatives from partner organisation and is supported by other individuals and organisations if the need is identified. The group meets every 6-8 weeks.

8. Learning Lessons

The strategic objectives of the sub-group:

- To improve the partnerships response to safeguarding adult cases through learning from Safeguarding Adult Reviews to prevent future abuse or neglect.
- Develop and maintain effective systems to share learning from any Safeguarding Adult Reviews occurring both locally and nationally.
- Develop a culture of learning and improvement across the partnership and with people.

Where we are now?

The sub-group meets regularly, and the membership and terms of reference have been refreshed and agreed. The sub-group has identified a case that did not meet the criteria for a Serious Case Review, but benefitted from a multi-agency workshop to consider 'lessons learned' to assist the partnerships strategic approach to self neglect and safeguarding.

The workshop identified key recommendations accepted by the Board in March 2015. This has resulted in the development of an action plan which will now be implemented and overseen by the subgroup to review high risk cases where individuals are non-concordat with care, professionals understanding of Mental Capacity.

In readiness for the Care Act 2014 Bolton's Serious Case Review Policy has been reviewed and has been replaced with a new Safeguarding Adults Policy in April 2015 and referral pathways are under revision. In addition, other key avenues to identify learning from Serious incidents, Intelligence forum, Coroners regulation 28s is under development to broaden the partnerships ability to have an open culture of continuous improvement and learning.

The Learning Lessons sub-group responsibilities are to:

- Identify and screen referrals for those cases which meet the criteria for a Safeguarding Adult Review.
- Identify those cases where lessons can be learned but which do not meet the criteria for Serious Case Review.
- Identify any themes or trends within the referral cohort to support local learning.
- Consider any themes or issues from National Safeguarding Adult Reviews that may further improve the quality and impact of safeguarding in Bolton.
- Establish a multi-agency sub-group to consider referrals; oversee panels where needed and report on actions.
- Consider linkages with the Quality Assurance Group, other forums to develop continuous learning from cases
- Develop links with Children's Safeguarding Board and the Be Safe partnership in relation to Children's Serious case reviews and Domestic Homicide reviews.
- Developing different models of practice to Learning Lessons.

The Learning Lessons Sub-Group includes senior representatives from partner organisations and is supported by other individuals and organisations if the need is identified.

9. Communication and Community Engagement

The strategic objectives of the task and finish group:

- Develop systems and resources to improve public awareness of the types of abuse and risks of harm presented to adults at risk in the Borough of Bolton.
- Provide detailed information and advice to the public about services/support groups available in the Borough of Bolton
- Adults who have experienced, or are at risk of, abuse and neglect shape and influence the development of safeguarding services.

Where are we now?

This is a new sub-group and is in the process of being developed to be operational in April 2015.

The key activities of this sub-group are to:

- Develop of a communication plan for the Board.
- Improve the Safeguarding Adult Board brand, public information and develop a Bolton Safeguarding Adult Board website.
- Increase public awareness of safeguarding, signs and symptoms.
- Engagement with the voluntary sector, to support them to promote public awareness in relation to access to information and notification of safeguarding.
- To promote the referral route to the public and agencies for safeguarding enquires



Bolton Safeguarding Adults Strategic Business Plan

April 2015 – March 2016

Progress Rating key:

White	Green	Blue	Amber	Red
Unable to	Progress towards	Milestone	Timescale not met	Milestone delayed
commence;	milestone	achieved		by more than 3
Awaiting other	/timescale on			board dates
action	track/or achieved			

Business Plan April 2015-2016

1. Governance, Leadership and Pa	rtnership			
Action	By whom	Target timescale	Progress rating	Notes
1.1 Review membership of the Executive and Operation's Board and get members to sign up to the constitution.	Board Manager	By 1 st April 2015		This has been signed off by most partner agencies. The GMFRS have made a decision not to sign any constitutions, NWAS, Bolton FT, Probation and CRC signed constitution is still outstanding.
1.2 Review membership of all the subgroups and draw up/refresh terms of reference.	Board Manager	May 2015	Completed	This action has been completed.
1.3 Review the Boards' achievements against its Business plan	Board Manager	Sept 2015 Dec 2016 March 2016		This business plan will be reviewed at each Board meeting and any actions out of timescale will be brought to the Board's attention.
1.4 Devise a new Business Plan for 2016-2017	Board Manager	Jan 2016		This will be developed towards the end of the year as the current business plan has only just started.
1.5 Development of the Board's policies, procedures and guidance to be Care Act compliant.	Board Manager	June 2015	Completed	The Board's policy on Safeguarding Adult Reviews has been refreshed and any new policies developed by the Board will be care act compliant. The new online safeguarding policy was updated to become Care Act compliant on 11 May 2015.
1.6 Development of board policy on self neglect, thresholds, large scale investigations	Board Manager	September 2016		A draft thresholds policy and policy has been developed and is out for consultation. This will come back to the Board for sign off in September 2015. A draft policy on self-neglect is will be circulated in June and will come back to the panel for sign off in September 2015. The chapter on large scale investigations in the on-line policy has been updated and will go in the next updates for tri.x in September 2015.
1.7 Produce Annual Report.	Board Manager	October 2015		This report is before the Board for sign off on 8 th September 2015.
1.8 Support the Board to undertake a self-assessment against the ADASS principles.	Board Manager	April 2016		This action will be undertaken later on in the year and is yet to start.

2. Quality Assurance and Performance Sub-group				
Action	Target timescale	Progress rating	Notes	
2.1 Start collecting and measuring service user outcomes by implementing Making Safeguarding Personal	August 2015		The changes that need to be made to systems and forms have been identified and the amendments have been requested so that we can start collecting this information. Briefings will be going out to staff in September 2015 with a view to this new approach being adopted by workers in October 2015.	
2.2 Develop and implement a mechanism for checking multi-agency adoption of the online safeguarding policy	June 2015		Partner agencies have been asked to assure the Board how they intend to role out the new policy to workers. Some assurances are still outstanding. In September 2015 Partner agencies will be asked for an update to assure the Board that these actions have been implemented. Further work needs to be undertaken to develop a mechanism for checking implementation across all agencies.	
2.3 Identify key indicators of success so we know what's good and how we are doing.	August 2015		This consideration is in its early stages but will be developed over the next few months are reported back to the Board at the September 2015 meeting.	
2.4 Develop and implement a case peer audit framework across partner agencies	March 2016		This action has yet to be started.	
2.5 Develop and refine our performance reporting and knowledge creation processes so we have good information on which to make decisions.	December 2015		This work is on-going and each quarter the performance information the Board collects is being reviewed and analysed in order to inform practice. There is a proposal going to the Board in September 2015.	
2.6 Develop multi-agency intelligence gathering processes so that we know what difference we are making across the partnership	December 2015		The Intelligence forum meets quarterly and this allows information to be shared between agencies. Further consideration will be given as to how this process can be further developed.	
2.7 Establish and annual "listening" process so that we know the experience of service users	March 2016		This action has yet to be started.	
2.8 Develop and test an assessment tool/process to monitor the quality of the Board	March 2016		This action has yet to be started.	

Action	Target timescale	Progress rating	Notes
3.2 Develop new workforce Development Action Plan 2015 - 2018	April 2015	Completed	This has been completed and is in situ.
 3.3 Review all current and future courses currently being provided to staff and make sure that the courses are: Care Act compliant Incorporate the new Safeguarding Policy Making Safeguarding Personal MSP 	June 2015 June 2015 September 2015		Good progress is being made in this area and a series of meetings have been arranged with partner agencies to review courses currently on offer to meet these timescales.
Identify new areas of training need and develop courses to reflect this.	Ongoing		Several areas have been identified as a training need including MSP, MCA, Chairing meetings and interviewing skills. These are being developed as modular courses and will be rolled out to staff over the next 12 months
3.5 To deliver an Annual Safeguarding Conference	March 2016		This will take place next March but consideration is being given by the Workforce subgroup around organising a half day conference in October/November 2015 to launch MSP, and the two new policies on thresholds and self-neglect.
Following the audit which is being undertaken by the MCA Sub-group to develop an MCA/DoLS workforce development programme.	June 2015		An external provider has been identified and booked to offer training on MCA from now until the end of the year. Plus, 7 staff across agencies have been identified to undertake a training for trainers course in August 2015 so that these workers can offer in house training on MCA on an on-going basis to staff throughout the year.

Action	Target timescale	Progress rating	Notes
4.1 Review Multi-Agency Panel – Safeguarding Adults (MAPSA). Make recommendations for development. Implement findings.	Complete review - September 2015 Implement findings – April 2016		The initial review of MAP-SA has taken place and partner agencies are now being consulted on the findings. The Board will be asked to consider the recommendations at the next Board meeting.
4.2 Joint working with the Community Safety Partnership in order to deliver the relevant objectives in the Be Safe Community Partnership Strategic Plan 2015-2017	Ongoing throughout the year		The Be Safe Community Partnership Strategic Plan has just been developed which details joint actions for the partnership. The SAB Manager attends the CSP meetings and will report back/consult the Board on any specific actions as they are identified.
4.3 Develop a Prevention Strategy for Bolton	December 2015		A small task and finish group has been identified to undertake this piece of work.
4.4 Sign up Housing partners to the Home Safety Checks protocol	September 2015		The protocol has been developed and work is been undertaken to get all members signed up to this protocol by September 2015.
4.5 Identify a group of service users (physical and learning disabilities) to visit key venues in Bolton and comment on 'How safe do you feel?'	April 2016		The purpose of this initiative has been identified, currently engaging service users to undertake the visits
4.6 Engage the voluntary and community sector and Housing partners in joint working with regard Adult Safeguarding	December 2015		Discussions with the CVS Care and Wellbeing Forum and Bolton's Inter – Agency Forum to identify joint working opportunities. Presentation to BCH Board and sign up from partners
			to a Safeguarding Statement of Commitment
4.7 With regard to Self-Neglect / Hoarding in own home. Consider best practice and develop Bolton Approach	September 2016		EI&P group to meet Liverpool Housing Trust to identify best practice

Action	Target Timescale	Progress rating	Notes
5.1 Refresh Bolton Council's Policy on Managing Challenging Behaviour and Restraint	September 2015		This is out as a draft document for consultation to members of the sub-group.
5.2 Refresh Bolton Council's Policy on MCA (and DoLS)	September 2015		A piece of work is being undertaken by one of the sub- group members to consider if the Council's policy on MCA needs to be refreshed of if the chapter in the new safeguarding policy is sufficient.
5.3 To continue to work towards the agreed action plan in relation to making sure that adults in Bolton who may need a DoLS assessment receive one in a timely manner (Task and Finish Group)	Ongoing through the year		This group is on task with this but the amber progress rating reflects the number of DoLS still outstanding for the Council
5.4 Develop a system to evidence compliance with MCA e.g. Capacity Assessments, Best Interest Meetings, IMCA Referrals.	April 2016		This action will be picked up by the sub-group later on in the year.
5.5 Winterbourne Project to continue with its work to return Bolton residents back to Bolton (Task and Finish Group)	First Phase June 2015		There was a delay due to not being able to identify a suitable provider for one of the projects. This has now been resolved and service users have been identified to move into the accommodation.
5.6 To assess current activity of Education and Training of MCA in each organisation and identify training needs for the Workforce sub-group to take forward.	May 2015	Completed	The sub-group has completed this piece of work and are now clear what is on offer regarding MCA training within each organisation. It is clear that all agencies have identified this as a training need and this has been fed back to the workforce sub-group.

Action	Target Timescale	Progress rating	Notes
6.1 Refresh the Safeguarding Adult Review Policy	April 2015	Completed	Completed and approved in readiness for 1 st April. Uploaded to website.
6.2 Developing referrals pathways and tools.	October 2015	Completed	Revised referral tools completed, cascade of referral pathway and dissemination of new policy under development.
6.3 Developing different models of practice to Learning Lessons.	September 2015	Completed	New approach tested through case example not meeting SAR criteria. Further work to be completed over the year.
6.4 Develop linkages to Quality assurance and consideration of cases through Serious untoward incidents, coroner regulation 28 notices.	March 2016		On track initial work commenced.

7. Communication and Community Engagement			
Action	Timescale	Progress Rating	Achieved
7.0 Create the Safeguarding Adult Board website and improve the Safeguarding Adult Board brand.	June 2015		The branding will be put to the Board in June 2015. The layout and the design of the website has been put to the web team. Once the branding has been agreed then the website can be actioned by the Board. Still awaiting final agreement on the branding.
7.1 Engagement with the voluntary sector to support them to promote the public awareness, access to information, notification of safeguarding	Ongoing throughout the year		An article has been written for Jumbo and a presentation by the SAB manager will be made at the CVS next forum. Janet Ramsden (Workforce sub-group) is meeting with CVS to support with training and to make sure that any training offered is Care Act compliant.
7.3 Develop Single point of access for safeguarding referrals (Separate Task and Finish Subgroup)	October 2015		This is being led by Sue Unsworth – Head of Service for Adult Social Care.
7.4 Develop of a communication plan for the Board	July 2015		This has been completed and is on the agenda for the board on 9 th June 2015. This will come back to the Board in December 2015.

7.5 To promote the referral route to the public and agencies for safeguarding enquires	April 2016	Once the branding for the Board has been agreed then consideration for running a public campaign to promote the Board and Safeguarding will be developed for later on in the year.
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