

Newsletter Working in partnership to enable adults in Somerset to live a life free from fear, harm or abuse

# Welcome to the 5<sup>th</sup> edition of the Somerset Safeguarding Adults Board (SSAB) newsletter Somerset Case Review highlights important lessons



A report into the death of a Somerset man with a brain injury has highlighted important lessons to be learned by health and social care organisations.

Issue 5, Jun 2017

A serious case review was commissioned by the SSAB following the death of 'Tom' *(pictured left)* who took his own life in 2014, aged 43.

Tom had sustained a traumatic brain injuryin a road traffic accident in his early twenties which left him with physical, cognitive and psychological issues.

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# Somerset Case review (continued)

The <u>independent report</u> was published by the Safeguarding Adults Board on Monday 12 June 2017 and concludes that despite numerous contacts with many health and care professionals and the concerns of family members he was not provided with appropriate support.

It highlights a lack of joined up working across social care, health bodies, and drug and alcohol services. No organisation took a lead role in determining a coordinated, multi-agency response and opportunities to intervene in an integrated way were missed.

The report highlights the invaluable role provided by provided by local brain injury charity, Headway Somerset, which supported Tom for more than 13 years.

It makes recommendations about how services can best support people with multiple and complex needs, including that Tom's case features in multi-agency training and be disseminated beyond Somerset to stimulate debate and improve multi-agency responses. The report also calls for assistance from UK-wide charity Headway – the brain injury association, to which Headway Somerset is affiliated, in achieving these objectives.

In June last year the report's author, Margaret Flynn, presented Tom's case to more than 100 professionals at an SSAB-organised, multi-agency learning event. Headway Somerset, which had provided Tom with valuable support for more than ten years, also contributed to the training.

The SSAB is a statutory partnership including Somerset County Council, Avon & Somerset Constabulary and the Clinical Commissioning Group who work together to protect vulnerable adults from harm.

Our Independent Chairman, Richard Crompton, said: "I would like to speak on behalf of the Board to express my deepest sympathy to Tom's family for their loss. Safeguarding adults is everyone's business and an absolute priority for the Board and its partners, as it should be for everyone, and this review has highlighted a number of areas which require our continued focus and attention.

"The review into Tom's death made a number of recommendations, which the SSAB has fully accepted and will continue to oversee and monitor. I would like to publicly thank Tom's family for their valuable input and involvement in working with both Margaret Flynn and the Board in helping us to identify the lessons to be learnt that will serve to prevent similar circumstances from occurring in Somerset in the future".

Margaret Flynn said: "Tom's brain injury was as unexpected as it was sudden. Yet his family's grief and growing concerns were met with incomprehension. Tom was believed to be making unwise decisions; choosing to breach tenancy agreements; and choosing to abuse substances. Such beliefs compounded his own and his family's distress. Tom's life and death raise questions about the importance of understanding people's pre-brain injured lives and seeing them in terms of support needs. His life mattered. Somerset services acknowledge that they could and should have done better."

The family of Tom issued the following statement: "The review into Tom's death highlighted several shortcomings in the care he received following his traumatic brain injury over 20 years ago.

"During Tom's life we called on multiple agencies to help us to support him. This case review has clearly identified that Tom did not receive the support and help he was entitled to, and nor did we as a family. We thank Margaret Flynn for her dedication in identifying and documenting these issues in a formal manner.

"We would like to thank Headway Somerset for their long term support. We are eternally grateful for all they tried to do for Tom and us as a family. We hope that the safeguarding board will work closely with both Headway Somerset and Headway – the brain injury association to ensure better training for professionals in supporting the long-term rehabilitation needs of individuals with acquired brain injuries in the future."

Peter McCabe, Chief Executive of Headway – the brain injury association, said: "We welcome the acknowledgement that mistakes were made and lessons must be learned, and note the actions that have taken place since the report was completed.

"However, the tragic reality is that Tom, a vulnerable adult, was repeatedly failed by agencies whose responsibility it was to protect and support him.

"As long ago as 2001, the Health Select Committee recommended that health authorities, trusts and local authorities put in place a case management or equivalent system which gives head-injured patients and carers an identifiable guide and advocate through the whole care pathway.

"It also recommended that NHS trusts and Adult Social Care departments should be required to identify named managers with responsibility for coordinating the service and ensuring inter-agency collaboration. Sadly, this important and potentially pivotal report has not been acted upon by successive governments, with local authorities provided with no additional resources or clearly specified objectives.

"Tom was not provided with such support. There was no clearly identified lead to coordinate and oversee an appropriate and comprehensive programme of care and there was insufficient multi-agency collaboration to meet his complex needs.

"It is vital that all local authorities take time to read and fully digest this report and learn the lessons contained within in order to ensure that no other brain injury survivors are similarly let down".

## SSAB Meeting, June 2017

On our June agenda:

- An introduction to the work of SWAN Advocacy from a new Board member, and opportunities for greater joint working in the year ahead
- An update on Law Commission proposals for Deprivation of Liberty Safeguards replacement
- A report from Avon & Somerset Constabulary on new Operation Signature
- A review of information to emerge from a multi-agency county lines briefing
- Consideration of the SSAB's draft Annual Report (2016/17)
- Planning for June's 'Stop Adult Abuse' week (12-15 June 2017)
- Updates from the Board's subgroups.

## **Operation Signature**

Operation Signature is the Constabulary's response to vulnerable victims of fraud. It identifies those victims who are most vulnerable, prevents them from becoming repeat victims, protects them from fraudsters and safeguards them for the future, in some cases turning their lives round. Vulnerable victims can be identified through the various sources of internal reporting, including third party, the victims themselves, through shared intelligence or via partner agencies, including Action Fraud. All vulnerable victims of fraud will receive a visit or telephone call with prevention guidance and support.

This activity will be in tandem with the Banking Protocol, where banks will report to the police customers they believe are victims of fraud. All customer-facing bank staff will be told to look out for specific signs that a client may be the victim of ongoing fraud.



# **An Introduction to County Lines**

On 3 May 2017, multi-agency representatives of the Somerset Safeguarding Children Board, Somerset Safeguarding Adults Board, Safer Somerset Partnership and Health & Wellbeing Board attended a specially-convened briefing on county lines. DCI Ray Hulin, of Avon and Somerset Constabulary, delivered a presentation, and shared case studies and local video footage to inform understanding and awareness of county lines activity within Somerset.

While there is no official definition, county lines activity typically involves a gang (usually made up of young males) from a large urban area travelling to smaller locations (such as a county town) to sell Class A drugs, specifically crack cocaine and heroin. The majority of these gangs function with a degree of affiliation and loyalty. Incidents of violence are common as gangs challenge existing groups from the local area or another county lines enterprise.



Violence, incidents of kidnap, use of weapons, and ruthless debt control prevail as a consequence of county lines markets.

County lines gangs pose a significant threat to vulnerable adults and children, upon whom they rely to conduct and/or facilitate the criminality. Exposure to gang exploitation has the potential to generate emotional and physical harm.

Gang members and those they exploit continue to be transient between urban hubs and county market towns, but with an emerging trend for some to settle within the community in which the market is being established. Rail networks and motorways dominate the travel methods used by county line gangs, as well as taxi firms.

The use of mobile phones/call centres to maintain 'deal lines' between customers in county markets and gang member suppliers remains a key feature; however an amendment to the Digital Economy Bill in January 2017 will compel communications providers to disconnect mobiles/SIM cards/ phone numbers where it is proved they are being used in connection with drug offences.

Links exist with other forms of exploitation, including Child Sexual Exploitation, Modern Slavery, mate crime.

#### Find out more via:

http://www.somersetlive.co.uk/news/somerset-news/county-lines-cuckooing-spice-changing-44154

# What do I do if I have information about drugs in my community?

If you have information about any suspected criminal or suspicious activity in your area, please call police on 101 or report it online at <u>www.avonandsomerset.police.uk</u>

If you don't want to speak to us then call Crimestoppers on 0800 555 111, it is completely anonymous and you could earn yourself a cash reward.

# Stop Adult Abuse Week – June 2017



The Somerset Safeguarding Adults Board was proud to work in partnership with safeguarding boards in Bristol, Bath & North East Somerset, South Gloucestershire and North Somerset to support Stop Adult Abuse Week this month.

The theme for the week is prevention. We can all play a part in helping to spot and prevent abuse, from looking out for vulnerable members of our communities, to supporting friends, families and people we work with if we suspect they are being abused. There are many different forms of abuse, including physical, psychological, emotional, sexual and financial.

Here are some of the signs to look out for:

- Unexplained bruises and injuries
- Subtle changes in behaviour, for example if someone is very subdued, has lost their selfesteem or changes how they act in the presence of a particular person
- If a person begins to isolate themselves and stops seeing friends and family
- Changes in appetite and weight loss or gain
- Unexplained signs of distress, tearfulness or anger
- If someone has possessions go missing, an unexplained lack of money or failure to pay bills this may be a sign of financial abuse
- Being unclean, unkempt or hungry may signal neglect or self-neglect
- Discouraging visits from relatives or friends on a regular basis
- Missed appointments failing to show up at GP appointments or regular meetings
- If someone shows unusual distress at being close to someone, or receiving eprsonal care, this could be a sign of phsycial or sexual abuse.

Abuse can happen to anyone, male or female, at any age and can be carried out by anyone. It can be difficult to find the right way to support people we are worried about, so during the week we focused on different ways people can help, from an introduction to our Nominated Neighbour Scheme which helps support vulnerable members of the community, to tips on how to avoid fraud.



# Avon and Somerset Police launch Nominated Neighbour scheme

Avon and Somerset Police helped to mark Stop Adult Abuse Week with the launch of a scheme to protect elderly and vulnerable residents in the region.

The Nominated Neighbour scheme, which has already been used successfully in some areas of the region and is now being rolled out across the Avon and Somerset policing area, is designed to help protect elderly and vulnerable residents from bogus callers.

The scheme works by a vulnerable resident identifying a trusted neighbour or friend to act as a 'Nominated Neighbour'. Any 'Unknown Callers' at the vulnerable neighbour's door will be directed to their 'Nominated Neighbour' so that their credentials and identification can be checked and verified.

Once the 'Nominated Neighbour' is happy with the caller's identity they will accompany them to their neighbour's house and stay until they have finalised their business and the caller leaves.

Inspector Julie Knight, Local Policing Directorate, Avon and Somerset Police said:

"Older people can be more vulnerable to cons and fraud, doorstep crime, distraction burglary and online/telephone scams. If they have someone they can trust they are more likely to question something, perhaps saving them from a financial con and neighbours can notice if strangers are at their door."

For an information pack on how to nominate or become a nominated neighbour please contact your local neighbourhood policing team or you can download all you need here:

#### Nominated Neighbour (neighbour)

Nominated Neighbour (resident)

Nominated Neighbour (card)





# Stop Adult Abuse Week – June 2017

WORD SEARCH

Κ	W	Х	F	L	Ε	Т	Х	С	V	L	W	М	Α	Κ	W	G	Ζ	L	W
С	F	L	М	Ζ	Υ	М	Р	S	Α	F	Е	G	U	Α	R	D	Ι	Ν	G
Х	0	F	Ν	G	R	Q	L	Ε	Α	С	Ν	V	Κ	S	D	Ε	В	L	Ρ
R	J	Ρ	S	Υ	С	Η	0	L	0	G	Ι	С	Α	L	0	Ρ	J	Т	U
Ε	Α	Х	S	U	W	G	Κ	F	В	Ν	0	Η	Т	Ρ	Α	R	Ρ	М	Х
F	В	Η	0	Α	R	D	Ι	Ν	G	Υ	S	0	Т	W	Ρ	Ε	Т	Ε	W
Ε	Η	S	F	С	В	М	W	Ε	Q	Κ	Ι	Ι	W	F	В	S	Α	E	R
R	A	М	Ε	S	Ρ	S	Α	G	Q	R	W	С	Ε	U	Ν	S	Α	F	Ε
R	Y	Ρ	Ρ	Q	G	S	Ι	L	Ε	Ν	С	Ε	G	Α	V	Ι	Υ	Ε	Τ
Α	Η	L	U	U	D	Т	Υ	Ε	Α	L	Ι	G	Т	Ρ	Ε	0	U	Α	W
L	к	Ρ	Κ	Α	Ε	Ζ	Κ	С	Κ	Х	F	L	Ε	0	0	Ν	S	R	Y
U	Г	0	G	Γ	Η	В	W	Т	J	С	Κ	W	G	L	L	Κ	Т	Q	R
S	С	Κ	М	0	Υ	Ν	М	Ρ	Ι	F	Q	R	Η	Ι	М	S	Ε	W	Ε
Ε	Μ	В	Α	R	R	Α	S	S	М	Ε	Ν	Τ	L	С	V	D	Η	F	F
Κ	W	G	Ζ	Υ	L	Α	Х	С	V	L	W	Μ	Α	Υ	F	L	Ε	Τ	E

Self Neglect	Silence	Hoarding
Depression	Choice	Safeguarding
Embarrassment	Unsafe	Squalor
Fear	Psychological	Policy
Referral		

#### Tips to help professionals ask service users effective questions about financial or other types of abuse.

- 1 Liaise with service staff who support the service user, so they can help you understand what motivates the service user and the terminology to use that they fully understand – e.g. social services instead of local authority.
- 2 Explain the reason for you coming/being there – prepare your introduction using point 1.
- Describe what the safeguarding team is

   a group of people who work for social services and help us to help you keep safe.
- 4 Explain that NOTHING will happen without the service user being involved.

- 5 Use phrases such as 'What do you mean?' or 'Can you tell me a bit more about what that means?' to help form the whole picture.
- 6 Saying 'How does that make you feel?' or 'What do you feel about that?' will help you get to Making Safeguarding Personal and the Duty of Candour under the Care Act.
- 7 Other useful questions are: Do you feel safe? What would you like to (see) change? Who else would you like us to tell?
- 8 Ask the person What would you like to see happen about...?
- 9 To end be honest explain that you may not have the answers now and that you may need to come back and ask more questions. You will contact the person to let them know what will happen next/or has happened.
- **10** Summarise the meeting what is going to happen next, who is going to do what, who the person should speak with if they need to ask questions?

## Scams – are you talking about them enough?

#### **Devon and Somerset Trading Standards**



A Joint Service commissioned by Devon and Somerset County Councils

Devon and Somerset Trading Standards receives hundreds of complaints each year via the Citizens Advice Consumer Service about mass marketing scams ranging from fraudulent prize draws to phoney psychic letters. It is estimated that UK consumers lose up to £3.5 billion per year to a variety of scams that exploit low-cost, mass-marketing techniques to target recipients. These include bogus lotteries, premium-rate prize promotions, psychic mailings and miracle health cures.

We also receive complaints from consumers who are cold called by unscrupulous traders offering their services on the doorstep. The work is often badly done and overpriced. The sums lost by individuals from these scams and rogue traders range from small amounts to tens of thousands of pounds. There are strong indications that the actual number of people affected by scams is far greater than the reported figures.

If you receive a letter, phone call, home visit or email and you are concerned it might be a scam, consider the questions below. If you can answer yes to any of these questions then there is a good chance that someone is trying to scam you.

- 1. Was the offer unsolicited?
- 2. Do I have to respond or agree straight away?
- 3. Do I have to make a purchase to win a prize draw I didn't enter?
- 4. Do I have to ring a premium rate telephone number?
- 5. Do I have to give my bank or credit card details or passwords?
- 6. Is the business reluctant to give their address or contact details?
- 7. Am I being asked to keep it confidential?
- 8. Does it look too good to be true?

Use your common sense, but if any of the above are true, think twice before handing over any money or giving your personal details.

Because scam operators often work from abroad, regularly changing their addresses and conducting business under false names, it can be extremely difficult for authorities to tackle them by conventional enforcement. By far our best weapon against the scammers is to educate, warn and publicise about the prevalence of scams, encouraging all residents to remember the motto – **If it seems too good to be true, it probably is...** 

Scammers play on our hope, promise us the realisation of our financial dreams, and rely on us not talking to one another about it...

In order to raise awareness of scams and stop lining the pockets of unscrupulous scam operators – we need to start talking about it.

If you know of someone in your community who is perhaps a little isolated, or you have relatives or friends who are likely to be targeted by or respond to mass marketing scams, take the time to talk to them. Make sure they are aware of scams and how scam operators work.

If you are concerned about yourself or someone else, you can call the Citizens Advice Consumer Service for free help and practical advice (the details of your complaint will be passed to us) on 03454 040506, as well as the police on 101.

If you are concerned someone is at immediate risk of serious harm always call 999.

# Why do we need to safeguard adults?

• Everyone has the right to live free from harm, fear and abuse

 Abuse can severely affect a person's ability to carry out day to day tasks

Not everyone can protect themselves - there is support available.

### What is self-neglect?

This is when a person does not look after themslves fully. This may be a choice they make, or because they are ill or unable.

It can also be a sign that something else is going wrong in their life.

I DON'T TAKE

MEDICATION

If the self-neglect makes the person unwell, or is impacting on the health and wellbeing of others, it is important to get help.

We need to make sure people are aware of the information and support that is available locally.

Sometimes self-neglect cases can be complex and it can take time for the person to build trust and engage with others; the person may not realise the impact their self-neglect is having on their wellbeing or the impact on others.

### Some adults may be more at risk of selfneglect

Those at greater risk include the elderly, people with physical or sensory impairments, people with learning disabilities, people living with severe illnesses, dementia or confusion, or people living with mental ill health.

## Signs could include:

#### In the home:

- Having no food in the home, or unsuitable food
- Having no heating in cold weather

- Not cleaning their home leading to infestations of insects or other animals
- Not allowing people to make repairs when it is unsafe
- Not allowing important people access e.g. landlord, water, gas or electric workers, health or care workers etc.
- Not disposing of rubbish or hoarding items or animals

#### About the person:

- Not washing or looking after themselves
- Wearing inappropriate, dirty, soiled or torn clothing
- Not having necessary medical aids e.g. glasses, hearing aids, walking frames
- Refusing medication or treatment which leads to ill health
- Refusing to engage with support

#### Safeguarding is everyone's business - There are things you can do to help:

Build relationships - talking to someone and building trust can help them stay connected to their community and can help create enough strength

#### to avoid or overcome self-neglect.

Everyone can play a part - it can be as small as checking on an older neighbour or making time to talk to someone at risk.

# If you are concerned about someone:

Chat with them - find out if there is something simple that could help.

There may be no quick fix - get to know them if you can.

Report to the local authority

If there is an immediate, serious risk to them or others, please call 999.



# **Spotlight on:** Controlling or Coercive Behaviour (Serious Crime Act 2015, s.76)

This relatively new legislation addressed a specific gap in the law relating to Domestic Abuse. This new crime enables **a pattern of behaviour** and the **cumulative impact**, of both criminal and non-criminal behaviour, to be prosecuted.

Coercive control is also referred to in sections 42-46 of the statutory guidance (March 2016) of the Care Act 2014. This means that a local authority's duty to make (or ask to make) safeguarding enquiries and determine what action is needed to protect *an adult at risk* are triggered by *reasonable cause to suspect* that an adult with health and social care needs is experiencing coercive control (where their needs prevent them from protecting themselves) (Cited in the Department of Health (2016) Care Act Statutory Guidance).

Whilst this crime relates to domestic violence, there is a clear distinction in that it does not relate to other relationships that might be referred to as 'safeguarding concerns' such as;

- · Within institutions such as hospitals/care homes
- By care staff working in a person's home
- "New friends"/mate crime
- Bullying at work

In (1982) Susan Schechter wrote about coercive control and its part in abusive relationship/domestic violence. However in recent years Evan Stark expanded this by explaining coercive control as a condition of entrapment that can be hostage like in the harms it can inflict on dignity, liberty, autonomy and personhood as well as physical and psychological integrity".

Another definition by Stark describes it as..."a strategic course of conduct in which violence, sexual coercion, intimidation, isolation and control are used to dominate and exploit a partner and deprive her (him) of basic rights and resources." (RIPFA, 2017)

What both definitions highlight well in their terminology is the seriousness and the way in which this abuse negatively impacts on so many areas of an individual's life. There are other key aspects that must be present for this form of abuse to be considered as coercive control such as **repeatedly** or **continuously**; meaning the victim must have feared violence would have been used against them on more than 2 occasions or it has had a **substantial adverse** effect on their day to day behaviour **and** the alleged perpetrator **must have known** that their **behaviour would have a serious effect on the victim** <u>or</u> the behaviour was such that the **alleged perpetrator** <u>"**ought to have known**</u>" it would have that effect. (Serious Crime Act 2015, s.75).

Practitioners must not underestimate the effect of domestic violence and two or more forms of discrimination and disability. This combination may increase the risk of domestic violence occurring but may also increase the possibility of that person developing care and support needs as a result of abuse.

Coercive and controlling behaviours are not easy to spot; they are not individual acts, but an ongoing, pervasive pattern of behaviour that may appear trivial on the surface, for example, always attending an appointment with their partner, but may add up to form a pattern that limits an individual's freedom. Stark (2009) suggests that victims often find coercive and controlling behaviour the worst part of the abuse and it is the perpetrator's ability to instil fear into their partner that ensures they remain effectively 'trapped' in the relationship (Butterworth, 2017). The Home Office guidance provides a useful list of examples to identify coercion' for example does the perpetrator control channels of communication, is there evidence of shaming tactics, extreme isolation and/or marking (Home Office, 2015).

Frontline practitioners working within Adult Social Care are not 'the investigators' in the strictest sense because this is the role of the police but it is important to know what sort of evidence is required to obtain a successful prosecution. For example phone messages, evidence of assault, abuse over social media and bank records however this is not an exhaustive list. Ultimately it is essential for practitioners to ask the right questions, listen to what is being said, record accurately and support the person at risk of abuse. This will also include helping the individual recognise the behaviour is abusive and signpost them to other agencies who may be able to support them through a recovery process (RIPFA, 2017).

Arguably such guidance is underpinned by the principle 'Making Safeguarding Personal' and should guide the way professionals engage with all those at risk of abuse and/or neglect. In particular those involved in the enquiry must identify what that individual wants to happen and how they want to be supported. Using a strengths based approach it is vital to support the individual to identify things they can change themselves to start rebuilding self-esteem, self-control and self-determination. This may be difficult at first but will gradually influence their sense of 'wellbeing' and control over their own lives.

Finally there is legislation that will help support individuals to flee from coercive and controlling behaviour however to do this all agencies and professionals involved need to have a good understanding of what this behaviour may look like in relationships especially when one is faced with one that appear loving and successful.

#### More information can be sourced from the following:

- Community Care Inform have produced a quick guide to aide professionals identify coercive behaviour in practice that can be found using the following link: Butterworth, K (2017) How to Identify coercive and controlling behaviour: quick guide. <u>Http://adults.ccinform.co.uk/practice-guidance/how/how-to-identify-coercive-and-controllingbehaviour</u>
- Research in Practice for Adults (RIPFA) available from http://coercivecontrol.ripfa.org.uk
- Home Office (2015) Statutory guidance framework: controlling or coercive behaviour in an intimate or family relationship
- Stark, E (2009) Coercive Control: How men entrap women in personal life. Oxford University Press

With special thanks to Wendy Ware, Advanced Practitioner in the Council's Adult Safeguarding Team, for this article

# **Learning Lessons**

#### National

• Brighton & Hove Safeguarding Adults Board SAR: The Brighton & Hove Safeguarding Adults Board commissioned a Safeguarding Adults Review (SAR), following the death of 'X' who was aged 59 years and rough sleeping in the city. The Coroner recorded a verdict of 'misadventure to which self-neglect contributed'. The SAR explored the contact and involvement that X had with statutory and voluntary agencies in the year leading up to their death.

#### X's presenting issues and vulnerability

- had mental health problems
- was transgender
- threatened to harm themself
- had been the victim of abuse
- had a history of violent offending
- was diagnosed with a Personality Disorder and Learning Difficulty
- had a long history of self-harm

X was known to statutory and voluntary services in another county over many years because of their challenging personal and social circumstances. X had a well-documented history of unstable housing due to their inability to access and sustain accommodation. Shortly before their death X moved to Brighton. Initially housed by the Local Authority on a temporary basis X was later given notice to quit. Investigations by the LA Housing Authority found that X had rendered themself intentionally homeless by leaving accommodation in another county and that there was no duty on them to offer housing in Brighton. X left the accommodation in July 2014 and was rough sleeping in the Brighton area where they were supported by staff at a Day Centre, Rough Sleeper and associated Outreach Services. X remained living in the Brighton area until their death although they did return to the other county on at least two occasions and had contact with their previous outreach worker and the police. When asked why X wanted to live in Brighton they cited 'loneliness'. You can read the full report and a briefing for staff via: <a href="http://brightonandhovelscb.org.uk/safeguarding-adults-board/safeguarding-adults-reviews/x-sar-april-2017/">http://brightonandhovelscb.org.uk/safeguarding-adults-board/safeguarding-adults-reviews/x-sar-april-2017/</a>

#### <u>Report criticises care of vulnerable adults after sadistic torture murder</u>

Calls have been made to toughen up the protection given to vulnerable adults following a probe into the sadistic torture murder of a frail ex-charity worker. A serious case review into the killing of Joseph O'Hanlon recommended authorities treat vulnerable adults the same as children at risk of abuse. The Rochdale Borough Safeguarding Adults Board published the findings of the review in March examining the contact and support Joe, 61, had with authorities in the months before his death. He suffered 90 separate injuries in a prolonged assault over several days in his own home last April. The report states police, council, NHS, housing association and charity workers had 128 professional contacts with Joe, who was an alcoholic, in the months before his death after concerns were raised he was being exploited by 'vultures' who were using his flat and stealing his bank cards to take money from his account. But the report said that because Joe was often reluctant to accept help, and regularly failed to turn up for appointments, it made assisting him difficult. The panel made nine recommendations which include ensuring there is an individual professional who can take responsibility reducing abuse, ensuring that key family members are identified and work with authorities, and that measures are put in place to ensure banks and building societies recognise the risk of financial exploitation of vulnerable adults.

#### Local

#### **Somerset Practice Briefing Sheet**

The Safer Somerset Partnership was notified of the suicide of a 57 year old man who allegedly perpetrated domestic abuse against his mother, 84, as a potential Domestic Homicide Review (DHR). A decision was taken to host a joint Safeguarding Adults Board / MARAC Steering Group Review, in place of a formal DHR or SAR (Safeguarding Adults Review).

Last September, a case debrief meeting took place jointly chaired by the Independent Chair of the Safeguarding Adults Board and Chair of the Safer Somerset Partnership. It was attended by professionals from a number of agencies who had had involvement with the family. It sought to identify both good practice and lessons that could be learnt from involvements, in order to strengthen future support offered to families affected by domestic abuse in Somerset.

#### Key considerations for practice arising from the review included:

- Supporting older victims of domestic abuse and situations of familial abuse The case highlights an increasingly commonly identified issue of interfamilial abuse where both parties are adults. Additionally, it emphasises the difficulties older victims of domestic abuse face in having their abusive situation recognised, and appropriate help and support offered
- Working with victims and alleged perpetrators of domestic abuse who also have care needs The case highlights the importance of routinely exploring caring responsibilities of individuals we work with, and supporting individuals to access carer support services or receive a carer assessments
- Recognition and knowledge of domestic abuse and MARACs Identifying, asking and acting on domestic abuse concerns in a timely and appropriate fashion

#### Top tips

- Risk Assess: Complete a Safelives DASH Risk Identification Checklist (RIC) –
- o commonly known as DASH
- Think Family be mindful of any other factors that impact on the individual and/or their families / carers
- $\circ$  Use your professional judgement if you sense something is wrong, act on it
- Use everyday language Note what has been said to you, including the time, date, injuries

#### Think Family – learning from Children's Services



We encourage our readers to have a look at the <u>latest newsletter</u> to be issued by the Somerset Safeguarding Children Board. The latest edition includes information about multi-agency 'One Teams' and Early Help, Children Missing Education and much more.

Their latest Learning Bulletin, <u>'Things</u> <u>You Should Know'</u>, focuses on what we can learn from examples of good practice and includes a recent safeguarding conversation, and a case study providing a family with early help.

# **National News and headlines**

#### June 2017

• <u>Thirteen convicted over Devon care home abuse</u> 13 people have been convicted after an inquiry into 'organised and systematic' abuse at 2 care homes for adults with learning disabilities

#### May 2017

- Victim led to death by teenage drug dealers Busker, 49, frogmarched to his death by teenage 'cuckoo' drug dealers who took over his home and subjected him to sickening abuse
- <u>Gangmasters snare almost 4,000 new UK victims</u> More vulnerable children and adults consigned to a life of misery in the vice trade or doing unpaid labour
- <u>County lines, cuckooing and spice the changing face of drugs in Somerset</u> How urban gangs are flooding Somerset with drugs
- <u>Bank staff will be trained to spot trafficked women under new anti-slavery scheme</u> Bank staff will be taught to spot women forced to sell sex and other trafficking victims who visit branches under a new scheme to combat modern slavery
- <u>Councils lose court battle for more deprivation of liberty funding</u> Judge rejects argument that government failure to increase DoLS funding has created 'unacceptable risk of illegality'
- Quarter of adult social care workforce leaving their jobs each year, reports says Foundation warns pay freezes & poor workforce planning impacting social care staff retention April 2017
- <u>Rescued slaves abandoned as abusers go free</u> An MPs' inquiry says a campaign championed by Theresa May is failing to give enough support to victims of trafficking
- <u>Vulnerable adults bill risks creating more problems than protections</u>
- NHS not doing enough to help police prevent terror attacks warns Met's counterterrorism chief Doctors and health workers are not doing enough to help police prevent terror attacks by mentally ill people who are targeted by extremist recruiters
- <u>Cleaner who swindled £250k from blind veteran JAILED</u> Despicable conwoman who swindled a blind war hero out of £250,000 jailed for five and a half years
- <u>Call blocking will be given to most vulnerable people</u> Elderly and vulnerable people plagued by nuisance phone calls will be given call blocking devices, the PM has announced **March 2017**
- Drivers given taxi licences despite criminal convictions Hundreds of taxi drivers granted licences despite declaring convictions for sex offences, burglary and assault, figures show



# **Training and Development**

It is the responsibility of all organisations to ensure they have a skilled and competent workforce who are able to take on the roles and responsibilities required to protect adults at risk and ensure an appropriate response when adult abuse or neglect does occur. The SSAB does not provide any single or multi-agency training.

Social Care Institute for Excellence: e-learning e-learning: Adult Safeguarding Resource e-learning: Mental Capacity Act Other resources **Unseen Modern Slavery training** Home Office Prevent e-learning Home Office FGM (Female Genital Mutilation) e-learning

**Real Safeguarding Stories** is a learning tool dedicated to raising awareness of safeguarding issues. By telling compelling stories based upon real life events, it helps professionals understand these complex issues. Understanding and relating to these stories is the first step towards individuals and organisations being better able to support those at risk. On this website you will find a series of videos, each exploring different aspects of safeguarding – including child and adult safeguarding, and domestic abuse. These are based on the experiences of professionals working in the field and from interviews with victims of abuse. The videos are then scripted and filmed using actors in a realistic context, with each video supported by guidance to support wider training or awareness activity. Visit:

http://realsafeguardingstories.com/

## Get in touch

If you have any suggestions for future topics or comments about this newsletter, please contact us via:

ssab@somerset.gov.uk

Alternatively call our Business Manager, Niki Shaw, on: 01823 357014

#### If you are worried about a vulnerable adult, don't stay silent

Phone 0300 123 2224 Email adults@somerset.gov.uk

> Or complete the new secure **Professionals e-referral form**

In an emergency always contact the police by dialling 999. If it is not an emergency, dial 101

