

The Work of Our Members

Somerset Council – Adult Social Care

The scale of adult social care and support is vast, affecting the lives of over 10 million adults of all ages in England. People of all ages and with a diverse range of needs draw on care and support in different ways and at different stages of their life; some people will require support throughout their life whilst for others care needs will develop suddenly or gradually. Some people may only use social care for a short period (for example after a hospital stay). Care and support can include ‘personal care’ as well as wider personalised support to enable people to stay independent, safe and well, engaged in their communities and living their lives the way they want.

During 2022/23, Adult Social Care in Somerset:

- Received an average 5,830 contacts per month via our call centre (Somerset Direct) for care and support related advice or activity. The overall resolution rate at first point of contact was 63.7%.
- Had 6,897 open clients in receipt of a Local Authority Adult Social Care service.
- Completed over 8,000 assessments and 6,250 reviews of individuals care and support needs.
- Accepted 45.3% of received safeguarding concerns as requiring a formal safeguarding response (exceeding the 2021/22 national average conversion rate of 29.9%)
- Undertook 738 Safeguarding Enquiries, reducing or removing the identified risk in 92% of cases.
- Supported over 92.7% of individuals aged 65 and over to be discharged back home from hospital each month
- Sourced 21,511 hours' worth of home care for people assessed as requiring care and support at home
- Received 216 independent submissions of stakeholder feedback, of which 179 (83%) rated the overall service received as ‘Good’ or ‘Excellent’.

However, it is a challenging time for local government. Years of austerity and growing demand has reduced the spending power and financial flexibility of all councils. The national cost-of-living crisis has hit the council and partner organisations just as it has local residents. Workforce challenges persist across, and the cost of delivering services has dramatically increased due to rising energy costs, interest rates and increasing numbers of people who need our support. We have less to spend as our challenges grow and at the same time the

challenges our residents face daily also grow. This requires us to be more creative about the way we support people, and to look more broadly at the ways we currently use our expertise and money to see if, in close collaboration with our communities, we can do something better.

Making safeguarding personal and safeguarding adults at risk remain key priorities for Adult Social Care and the wider Council, with our staff continuing to serve as active contributors to the Safeguarding Adults Board and its subgroups. This year's national Adult Social Care Survey (relating to 2021/22) revealed that Somerset scores above the national average of 85.6% for the proportion of service users who say that services have made them feel safe and secure. 89.7% reported feeling safe and secure, with the county ranking 32nd nationally. Somerset also performs strongly in the same measure specific to those aged 65 and over, with 90% saying services have made them feel safe and secure.

In October 2022, the Council welcomed Natalie Green on secondment as our new Safeguarding Adults Board Business Manager and have also secured dedicated business support for the Board with Jen Sharp joining us in March 2023.

In November, we were delighted to see Louise White (our Safeguarding Adults Service Manager) named the overall winner in the Accountability Champion category of the national Safeguarding Adult Board 'We See You – We Hear You' Excellence Awards. Nominations were invited for professionals and teams who had demonstrated an outstanding commitment to safeguarding adults and their families. Louise's success came on the back of her nomination in the national Social Worker of the Year Awards where she was a finalist in the Team Leader of the Year category.

We contributed to national Safeguarding Adults Week (November 2022), supporting a week of webinars and leading a session on 'Elder Abuse'. A total of 779 people attended the lunchtime workshops, with 94% saying the sessions delivered were excellent or very good. Our staff also played a key role in supporting and contributing to the Board's Making Safeguarding Personal Conference in March.

Looking to the future: The new financial year brings a number of changes for us. Somerset Council replaces the four district councils (Mendip, Sedgemoor, Somerset West and Taunton, and South Somerset) and Somerset County Council from April 2023, bringing services, staff and elected members under one umbrella. It will become one of the largest unitary councils in England, will help free up resources,

and its scale will enable innovative approaches to tackling the big challenges faced today. We will have greater opportunity to work alongside our colleagues in housing and planning to support the needs of our communities.

Independent assessments of care at a Local Authority level also commence nationally from April 2023, with the Care Quality Commission given new powers to support greater understanding of the quality of care in a local area/system and provide assurance to the public. Assessments will focus on how Local Authorities discharge their duties under Part 1 of the Care Act (2014) and will focus on 4 overarching themes: How local authorities work with people; How local authorities provide support; How local authorities ensure safety within the system; and Leadership. Self-assessment work is underway to prepare for this new layer of scrutiny, supporting the development of associated improvement plans. The 'Ensuring Safety' element aligns closely to the work and effectiveness of the Safeguarding Adults Board, and we will ensure the Independent Chair and Board members are kept well informed of, and engaged with, progress and activity.

Our operational adult social care service is currently undergoing a restructuring exercise, designed to ensure the service is fit for the future to meet and respond to current and future service demand (including our being able to address the assessment and reviews backlogs affecting Councils across the country). It aligns to the ambitions of our new [Adult Social Care Strategy for 2023-26](#). Social care is an essential part of the fabric of our society. At its best, it enables and transforms lives. It supports people to live the lives they want to lead, where they want to live them. There is enormous potential for social care to help people stay healthy, happy and independent through scaling up our preventative, person-centred, strengths-based approaches and working collaboratively to do so. This is what we hope to harness and achieve through our strategy.



**Somerset
Council**



Adult Social Care Strategy

2023 - 2026

To live in the place we call home, with the people and things we love, in communities where we look out for one another, doing what matters to us.

In Somerset, we want people to live healthy and independent lives, supported by thriving and connected communities, with timely and easy access to high quality and efficient support when they need it.

Our strategy sets out how we will work to deliver our vision in partnership to ensure we deliver the right kind of care and support for our communities and the best possible outcomes within



NHS Somerset Integrated Care Board (ICB)

Our key aim for safeguarding adults is ensuring that the Somerset NHS ICB and its commissioned providers (our NHS trusts, GP practices and other health services) protect the rights of adults to live free from abuse and neglect; and work in partnership with other agencies in a way that supports adults in making choices and having control about how they want to live. We provide strategic leadership to enable the NHS in Somerset to collaborate with all other partners of the Somerset Safeguarding Adults Board.

The ICB safeguarding adult team structure incorporates the statutory roles of Designated (and Deputy) Designated Nurse, Named GP, and administrative staff. There is a separate safeguarding provision available specifically for the ICB Continuing Health Care (CHC) team as set out later in this report.

The main responsibilities of the ICB Safeguarding Adults team are to:

- Enable the ICB to seek assurance from its commissioned services that they are delivering a comprehensive and effective safeguarding service and are compliant with statutory duties, guidance, and policy.
- Work with NHS hospitals, community services and other commissioned providers and monitor how they support adults who need safeguarding, including how they work with other agencies. We collaborate with our partners and key partners in the system for example the Council and police.
- Promote the welfare of adults at risk of abuse and neglect through working together with organisations via the Somerset Safeguarding Adults Board and the Safer Somerset Partnership.
- Set out the expectations in relation to Safeguarding Adults for services commissioned by Somerset ICB

- Monitor and obtain assurance regarding the adequacy and quality of the safeguarding adults arrangements for services commissioned by Somerset ICB. This is done in a number of ways which includes data collection, a review of annual safeguarding reports, assurance visits and providing attendance at our Trusts' safeguarding committees.

The Named GP for Safeguarding Adults post has been vacant since quarter 2 2020 /21, and we continue to face ongoing recruitment challenges due to the unprecedented demand still being experienced by Primary Care. We have therefore reviewed this role and are now recruiting to a new Named Professional for Safeguarding in Primary Care. The Designated Nurse for Safeguarding Adults and deputy have worked closely with other safeguarding colleagues within the ICB to ensure GP practices still have access to advice and support about people living in complex circumstances whilst this gap remains. We also continue to offer targeted support, advice and training to primary care organisations that have been identified as requiring additional support, along with seeking assurance of the safety and effectiveness of their safeguarding adults' arrangements. We also have a newly appointed MCA & DoLs Lead to provide strategic oversight and support to the Somerset Heath system with the application of the Mental Capacity Act and Deprivation of Liberties Safeguards (DoLS).

Mandatory safeguarding adults training has been provided by the safeguarding team through the GP Safeguarding Leads training day which is held three times a year. We further support colleagues working in GP practices to maintain their safeguarding knowledge by providing an ongoing rolling programme of best practice meetings and supervision plus production of a ICB Safeguard newsletter and informative bulletins with current updates and resources providing useful and educational signposting. Despite the significant ongoing demands placed on primary care the above sessions continue to be well attended; demonstrating commitment across GP practices to provide effective support to adults who need safeguarding.

Despite the significant additional pressures on our Trusts during the recovery phase of the pandemic the ICB Safeguarding team continue, remotely and face to face, to provide a safeguarding advice and support service to staff working in the trusts. They have also been able to continue to share monthly data to provide us with assurance about their safeguarding adults responsibilities. The ICB Safeguarding Adults team have prioritised the need to support acute, community, and primary care services together with partners across the system in the most meaningful way possible. Maintenance of statutory safeguarding adult's functions and provisions have continued as outlined in the Care Act (2014) and the NHS Safeguarding and Accountability Framework (2019). Somerset ICB has continued to receive assurance that commissioned services are meeting their statutory responsibility to safeguard and promote the health and wellbeing of adults at risk of / experiencing harm / abuse.

The ICB have continued to be an active partner in the work of the Safeguarding Adults Board, providing representation at all Somerset Safeguarding Adults Board meetings, Executive Group meetings and all four subgroups. We have also taken an active role in

Safeguarding Adults Reviews and Domestic Homicide reviews; supporting the commissioning, report development and publication progressed throughout this year.

The ICB Safeguarding Adults team completed or contributed to a number of pieces of work to enable colleagues in health and social care to apply the principles of adults safeguarding and the Mental Capacity Act. Some examples are provided below;

- Supported in production of and participation in online webinars on Professional Curiosity and Elder Abuse as part of National Safeguarding Adults week.
- Supported and contributed to the planning of a SSAB Conference on Self Neglect.
- Secured funding and implemented process to improve information flow re high and medium domestic abuse notifications from police to primary care.
- Supported the Local Authority in procurement of Integrated Domestic Abuse Services, which included new statutory responsibilities under the Domestic Abuse Act 2021.
- Updated the safeguarding schedules for NHS Somerset contracts to specifically reference and include statutory duties in relation to the Domestic Abuse Act 2021.
- Contributed to Court of Protection Complex cases.
- Contributed to Information Sharing Meeting for Complex patients.
- Community Trigger Application Process representing health.
- Host commissioning support to Private Hospitals.
- Contributed to Section 42s with clinical oversight.
- Worked closely with the ICB's Quality improvement lead for Safeguarding in relation to key learning from reviews, including DHRs, SARs and LeDeR.
- Contributed to onsite Health input to a residential area where there had been possible exploitation of overseas workers.
- The team have been involved in a Whole service concern of alleged organisational abuse and carried out of hours support to gain assurance and provide support to partner agencies.

There has been a significant amount of work completed by the ICB Safeguarding Adults Team in anticipation for the implementation of the Liberty Protection Safeguards (LPS – replacement to DoLS framework). We have led the health system on input into the public consultation, provided representation on both the National LPS Clinical Reference Group and the countywide LPS Joint Implementation

Group. The (indefinite) postponement of the implementation of the LPS framework has been received with great disappointment. However, a new direction to improve knowledge and education of the MCA and a collaborative approach to improvement of the existing DOLS will continue to be prioritised by the ICB to ensure legal frameworks are used to optimise the protection of those who are at risk of harm.

The [statutory guidance on the Serious Violence \(SV\) Duty](#) was published Dec 2022 and the SV Duty was implemented January 2023. There is a requirement placed on Chief Officers of ICBs (as a specified authority) to work together with others to prevent and reduce serious violence. The SV Duty does not require the creation of new multi-agency structures, so local and regional existing local structures are being utilised to look at how we can / will comply with the requirements of the Duty- through the Safer Somerset Partnership Board and Avon & Somerset Strategic Serious Violence Reduction Board which the ICB safeguarding team attend.

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The ICB safeguarding team are meeting with regional ICB leads to develop a health system response to the Serious Violence Duty- including proposed funding streams and determining what new work will be required of ICBs. These statutory duties are an integral part of the work plan of the multi-agency Somerset ICS strategic safeguarding steering group.

On July the 1st 2023 we became an ICB. We have worked with key health and social care partners to identify key principles and priorities for Safeguarding across the lifespan with the potential for streamlining and reducing duplication and development of joint resources. Work moving forwards is focused on ensuring that safeguarding adults is embedded within the Somerset Integrated Care System with a plan to undertake regular review of the health safeguarding system resource with a focus on increasing resilience of staff and future proofing the service (recruitment and retention, career pathways, development opportunities).

The Work of the CHC Continuing Healthcare, Safeguarding, Quality and Court of Protection Team.

The Team continue to focus on developing preventative initiatives that improve the quality-of-care delivery for individuals in Somerset with the aim of reducing the number of substantiated safeguarding incidents that occur for people fully funded by CHC and the wider Somerset population.

We have undertaken 8 Section 42 enquires on behalf of Somerset Council representing a 25 % reduction in referrals to the team. A further 4 CHC enquiries have been undertaken, this quality process is used when the threshold for safeguarding has not been met and is a proactive approach to address concerns about quality/practice standards. CHC enquiries align with Somerset Council, Service Quality feedback form (SQF) and both enquiries are supported by the joint Contract, Quality and Risk management policy.

We have continued to develop the Quality Assurance Framework (QAF) in conjunction with Somerset Councils Quality team, working with providers to drive up quarterly submissions across all three QAFs to now regularly achieving between 70—98 % compliance with returns. The key performance indicators can act as early warning system for changes in the quality-of-care delivery and allows us to coordinate Somerset services set up to support care providers with focussed intervention.

Following a learning review undertaken by Somerset ICB (then CCG) in 2022 into the management of a person with a Prolonged Disorder of Consciousness (PDOC) the CHC Safeguarding Quality and COP team facilitated a Somerset wide learning event which focussed on the implementation of the Mental Capacity Act for people with PDOC.

The CHC team introduced Mental Capacity Act training as mandatory this year and acted as a pilot team for a Somerset wide quality Improvement project. The training has been matched to the MCA competency framework and the team is currently 85 % compliant. The CHC team is now embarking on a 12-month project to achieve a competency sign off process for all clinical colleagues.

CHC have continued to ensure that those individuals who are deprived of their liberty in their own homes, and whose care arrangements have required judicial oversight by the Court of Protection, have benefitted from the intended safeguards this legal process affords.



Avon and Somerset Constabulary National Vulnerability Update

The grip, governance and leadership around vulnerability continues to develop and strengthen to further improve our force response. The governance structure has developed to include regular quarterly meetings at both strategic and tactical levels and quarterly reporting to our Confidence and Legitimacy Committee, and the PCC's Governance and Scrutiny Board. The content of the report is focussed on the priority National Vulnerability Action Plan actions as identified through the last self-assessment process, as well as progress updates on ongoing work and performance deep-dives into several of the vulnerability themes each time, covering all within each 12-month period.

In the last 12 months there has been a review and refresh of the leads for the themes with some staff moving into new positions which has enabled an assessment of the capacity for each theme. This has resulted in growth in the leadership of the DA theme and the introduction of a deputy to the force lead for overall vulnerability being introduced as well to improve capacity.

In the last few months, we have developed a joint Vulnerability and VAWG delivery plan of priority actions and activities that we intend to complete within the year. These have been mapped to both the NVAP and VAWG Delivery plan as well as the Police and Crime Plan and several other national plans. Visibility of this is provided to all leads through Qlik which allows the plan to be filtered on any individual action of the NVAP and of the other plans so that activity linked to each action is clearly shown.

Through the vulnerability working groups several cross-theme work packages have been identified and work put in place to progress them. These include a review of Scrutiny Panels, a review of Protection and Civil Orders and scrutiny of the risk assessments we use. These pieces of work are all ongoing and relatively long term but will be reported on in due course with recommendations for improvements that will benefit everyone.

The innovative and ground-breaking work being done by Project and Operation Bluestone as a national pathfinder force for Operation Soteria has underpinned the development of a new National Operating Model for rape investigation which will be launched imminently. As well as supporting improved service and performance in that specific area, the NOM will provide a benchmark and model for improved investigative standards across other types of vulnerability. The aim is to translate learning from this area across all vulnerability themes to maximise the benefits of this learning.

Our recent HMICFRS PEEL inspection found us to be adequate in the area of protecting vulnerable people. Associated with this is a specific area for improvement (AFI) which will focus some further activity specifically around the supervision of risk assessments and how we deal with Domestic Violence Disclosure Scheme requests. Other AFIs from other parts of the inspection will also cross over into vulnerability and drive further work, specifically ensuring a record is made when a victim withdraws their support and whether an evidence led prosecution is considered, which is one of our identified priority NVAP actions.

Training

Recognising the need to support our Officer in understanding and recognising Adults at Risk a SWAY briefing was produced in January 2023. This bite-sized training briefing was sent out to all Inspectors to be shared with Sergeants to organise team and/or individual viewings and so the exact number of viewings is unavailable.

This included the following:

- Audio Introduction from Force Lead for adults at risk D/Supt Lisa Simpson.
- “Who is an adult at risk?” as defined by the 2014 Care Act.
- What is meant by care and support needs? Including The National Eligibility Criteria for those with care and support needs and steps to meet the threshold.
- Recognising the signs that someone might be an adult at risk... Detailing a repeat caller well known to police. Designed to show the victim being dealt with by an officer when they were clearly unable to respond how the officer expected them to. Highlighting what the victim found difficult and how officers’ interaction on attendance could be improved.
- Lack of capacity does NOT mean lack of investigative opportunities. Explanation of What is capacity, including an audio clip from our Mental Health Coordinator Insp Jon Owen.
- How are assumptions about capacity adversely impacting outcomes? Including a link to CPS guidance dealing with suspects and defendants with mental health conditions and disorders.
- The Victim’s Voice. Are you listening? Can you hear? Who can help?
- Professional curiosity. Is the capacity and communication skill to explore and understand what is happening, rather than making assumptions or accepting initial explanations.

Dementia Safeguarding Scheme

A bespoke Dementia Safeguarding scheme to help safeguard people living with dementia is now into its eighth year!

The scheme, has four distinct strands:

- Near Field Communication (NFC) enabled devices allocation (wristbands, hang tags, lanyards with glow in the dark cards)
- Dementia Safeguarding Scheme registration (also known as the Herbert Protocol) via our website
- GPS pendant allocation
- A support group available on Facebook, called 'Avon and Somerset Dementia Forum'

Thanks to charitable funding, 2,000 free 'wearable tech' NFC assistance devices were made available through the scheme from 2020 and over 2,000 have since been allocated through individual applications and to groups.

Over 1,000 people have signed up to the on-line Herbert protocol which means that police have instant access to crucial information such as former addresses and places frequented (along with a photo) if they are reporting missing.

Since 2020 we have secured almost **£18,000 of external funding** to buy **GPS tracking devices** along with **NFC assistance device** for people with dementia who are at risk of becoming a missing person.

This funding has come from a combination of donations from Wessex Water, Bristol Water and Western Power.

The 30 GPS trackers have been supplied by Somerset-based company, MindMe and will be allocated through referrals from our three specialist Missing Person Coordinators.

Current data shows that the **GPS tracking devices have a 96% success rate** at preventing the wearing becoming a missing person and the **NFC devices have a 93% success rate** and preventing the wearing becoming a missing person.

Inspector Stuart King established the bespoke scheme in 2015 and has been able to assist other Police forces and organisations across England, Wales, Scotland and Northern Ireland as well as internationally establish a similar scheme safeguarding people living with Dementia.

National and International Recognition (Awards)

1. In October 2022 Avon and Somerset Police were **recognised by the Bristol Dementia Action Alliance and awarded Silver Status as a Proud Dementia Aware Organisation.**
 2. In March 2023 Avon and Somerset Police were **recognised by HMICFRS in the PEEL report for good working practice** with partners to protecting vulnerable people living with dementia.
 3. In April 2023 Avon and Somerset Police were the **Winner of the National Alzheimer's Society Awards for being the Largest Dementia Friendly Business nationally.**
 4. Also in April 2023 at the same awards Inspector Stuart King was joint **Winner of the National Alzheimer's Society Awards for his Research and Innovation into Dementia** as recognition for his work in establishing and running the Dementia Safeguarding Scheme since 2015 and assisting other forces and organisations to adopt the same scheme.
 5. In May 2023 Avon and Somerset Police was the **Winner of the RDID Best RFID/IOT (other industry)** at the prestigious RFID Live trade awards in the USA for their use of GPS and NFC technology to protect and safeguard people living with Dementia.
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Safeguarding is at the core of SWAN's advocacy practice. It is discussed at every team meeting and all SWAN advocates complete mandatory safeguarding training. Additional in-house safeguarding training ensures that all advocates understand their responsibilities regarding reporting safeguarding in Somerset. At the beginning of this year SWAN attended the Somerset Safeguarding Conference to present a workshop on the importance of independent advocacy within safeguarding adults processes. The workshop was attended by several professionals and at least one carer. This time provided us with a great opportunity for discussion and questions from the audience to our advocacy qualified managers which we felt was positive. In addition to our workshop, SWAN provided a 'stall' in the main area all day at which information, conversation and handouts were accessed well by the conference attendees. Feedback was given to us that the advocacy presence was extremely helpful.

During this time period, we have supported 59 clients referred to us for safeguarding issues, across all age ranges. The referrals are from community settings, hospitals and care homes. We have supported a number of clients referred for safeguarding for issues around self-neglect. A member of staff has attended training on hoarding with the expectation that this will be cascaded to the wider advocacy team. We support our clients during S 42 enquiries to ensure they are fully included in the process. We work with MDTs to ensure our clients are represented and their voice is heard. We continue to be a mechanism for making safeguarding personal.



At Somerset Care we value our involvement in the Somerset Safeguarding Adults Board and have used this multi-agency learning to drive organisational improvement through our own safeguarding committee. This committee meets bi-monthly to discuss internal and external safeguarding incidents, identify opportunities for improvement and agree actions to address any issues found. Membership of our safeguarding committee ensures representation from the diverse range of services that comprise Somerset Care and draws on the knowledge and experience of individuals within those services, ensuring those at the front line are able to contribute to and influence improvements at service and organisational level. Learning from this meeting is disseminated to services through formal notifications via Radar - our Compliance system - through our intranet 'Connect' and via weekly update and news bulletins.

The safeguarding meeting also has a reporting line to the Board of Directors via the bi – monthly Quality Committee which is attended by members of the Board as well as non-executive Board Members. The Board Quality Committee is a formal subcommittee of the Board and is chaired by a non- executive member.

The Board have oversight at both a high level and more detailed level for significant events and incidents and trends which provides assurance on learning and that appropriate actions have been taken as a result. Improvement and embedding in practice from such actions is then assessed by the Quality Team and Area Managers both by reviewing written data and observational episodes or 'targeted inspections.

Each service also reviews their safeguarding events at their monthly Governance meeting. Events are discussed to assess points of good practice as well as points which require improvement in an open meeting where all team members are invited to attend. The outcome is recorded on a template within Radar and actions set linked to this. This ensures progress against each action can be monitored and assessed for effectiveness.

At an organisational level, all Section 42 notifications and investigations are reviewed prior to submission by the Head of Governance for assurance that the Investigation is robust, that actions identified are appropriate and that identified improvements or recommendations are disseminated across the Organisation for wider learning.

During the last 12 months, work has continued with several projects which have now become embedded in practice:

Listening to our Customers

The 'Always' event for Customer engagement to find out what they think about the service we provide is now well and truly embedded in practice and is something many customers have said they value and look forward to. These are facilitated by the Quality Team and held as face-to-face sessions within each Residential service bi-annually. The basis is to enable Customers to tell us what improvements they want to see rather than us as an organisation telling them what we are going to do and to enable them to be part of the solution, thereby enabling co-creation of improvements based on what matters to them. We are committed to undertaking these events every 6 months so that progress on suggested improvements can be assessed as well as moving onto the next set of improvements our customers have identified. This has empowered, in many cases, the customers to be more involved in the management of the services with the creation, in several services, of 'Resident Champion' who may gather views of fellow residents on a monthly basis, meet with the manager as spokesperson or take the lead in contacting external stakeholders to gain support for projects. Many services have also involved their customers in the interview process for potential new staff, with their views on suitability being of equal importance.

Whilst Family and Friends are also invited to these events, many have said they find the timings difficult as they are held in the daytime. We are planning to expand our current schedule to include 'Teams' events specifically for Family and Friends which can be held out of hours and which we hope will enable more people to have their say – particularly important for those whose family member may have neurological impairment.

We revised our Complaints Policy and replaced it with a Customer Feedback Policy and Procedure which encompasses compliments, informal and formal complaints and is based upon several national frameworks - 'Principles of Good Complaint Handling' as published by the Parliamentary Health Service Ombudsman (PHSO), the Local Government and Social Care Ombudsman, 'The Good Practice Standards for Complaints Handling' published by The Patients Association, 'Regulation 16: Receiving and acting on complaints', Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, 'Making Complaints Count', Complaints Standards Framework (NHS). We utilised

the 'I' statements to reflect what the Customer could expect to happen when they gave feedback and the 'We' statement to outline what we would do in response to feedback. We also created a Customer Charter in leaflet form which outlines these expectations and commitments so that customers could hold us to account if we failed to deliver.

Systems

The rollout of 'Nourish' our electronic care planning system to our Residential settings is now complete and has the benefit of being able to be updated via handheld phone sets making recording timelier. Customers can be involved in the daily records as the system has the facility for them to speak into it which is then translated into text. As alerts and interventions are set up for each individual customer, this means that there is less risk of a customer missing or being late for an interaction such as repositioning or monitoring at night for example. The system also allows quick access to specific conditions, comorbidities, or specific needs that customers may have which enables prompt recognition and action in the event of suspected deterioration. As documents can be added to each individual customers record - for example TEP's, DNACPR, advanced care plan or POA - this ensures the information is immediately available in an emergency and that the wishes of the customer are carried out as they have specified as well as reducing the need for paper files.

Training

Staff have benefited from additional Mental Capacity Act (MCA) and Dol's Training with Chris Hamilton and we have been invited to join the MCA Subgroup which he chairs. We look forward to being involved in the group going forwards and to implementing any recommendations that may arise.

20 staff attended the Somerset Safeguarding Adults Board conference in Bridgwater and found the session's informative and useful. This has prompted a review of our current training provision especially around dementia awareness and our methods of delivery. Staff were asked for their views on training content and delivery as part of this process. Most of the training was being delivered via online modules on our training platform 'The Hub' but some staff were finding it difficult to reconcile this training with 'real life' events. As a result, more face-to-face training has been implemented both from the training team but also led by managers 'in house'. A recent example was an aim to improve dementia awareness in a residential service by using a regular monthly 'socialise and learn' session to watch a film 'The Father' as a team – whilst enjoying a pizza (the social element) and then discussing the effect the film had on people and how they could relate what they had seen and felt to their own residents. The staff really engaged with the process, felt they had learnt a lot without really trying and have been able to translate this into their everyday practice. This approach has been agreed as an extremely beneficial method and will be rolled out across the organisation.

The Quality Team have developed a learning resource to help staff improve their responses when investigating an incident or complaint. This includes a step-by-step explanation of how to conduct a thorough investigation, what tools and resources could be used, how to record the information, how to draw a conclusion and how to set appropriate actions. In addition, face to face support in managing an investigation from the start through to the conclusion and action setting has been implemented which is aimed at upskilling staff and improving the content of the learning outcome from the investigation.

Dissemination of External and Internal Learning

A process has been implemented to effectively source and disseminate learning. This includes learning from SSAB case studies, CQC and ICB case studies and HSE notifications. A notification with the learning or case study is sent via Radar, added to a 'Shared Learning page on our Intranet 'Connect' and saved as a document on Radar in a 'Good Practice Resources' file - this ensures we have a copy held for future reference should staff wish to review or for new staff who may not have seen the original notification. These again are discussed at Governance at Service Level, at the Safeguarding committee meeting and at the Board attended Quality meeting.

The SAR 'Mrs L' (SSAB) for example led us to review our processes for the transfer of residents from one home to another which resulted in an update of our Admission and Discharge policy and the creation of a discharge checklist to be completed and to accompany the resident to their next residence. In terms of the SAR 'Susan' (SSAB) this led to a greater awareness of potentially coercive behaviour from relatives within our community services and as a result of this information being shared, an increase in the number of safeguarding's relating to this type of abuse was seen.

CQC learnings have included 'Promoting Sexual Safety', 'Caring for people at risk of choking', 'Capacity and consent' and whilst none have had any direct impact on our current processes, they have provided food for discussion and raised awareness.

Internal learning has resulted from incidents that have occurred within the services and case studies have been created following a robust investigation into the incident. A template has been created to capture a brief outline of the event, any contributory factors, what the root cause of the incident was and recommendations to reduce the risk of recurrence. To increase the number of shared learnings to disseminate across the organisation we have implemented a requirement for each service to produce a case study each quarter from an investigation they have undertaken for onward sharing. The intention is for these to be either from a significant event where an injury has been caused or where a theme is noted – for example the same service user or staff member is involved in multiple events.

Staff support

'Speak Up' Champions continue to provide an important service to colleagues, offering an option for reporting any issues or concerns. Since it was set up, there have been some important issues raised with implications for Safeguarding and 'Speak Up' Champions have been able to pass on concerns for investigations where colleagues did not feel confident to speak up to their manager themselves. 'Speak Up' Champions have also visited a number of services to hold a Speak Up Pop Up café, encouraging colleagues to share their concerns and talk about the positive things that are happening in their service and sharing ideas for improvements.

Our recent annual staff survey has shown a significant improvement in the positive responses to the question 'I feel comfortable to speak up and challenge the way things are being done'. Positive responses have risen from 61.7% in 2021 to 71.2% in April 2023. This shows a continuing improvement in our promotion of a culture where people feel confident to speak up and report issues of concern, including safeguarding concerns.



Devon & Somerset Fire and Rescue Service

- Devon and Somerset Fire and Rescue Service have a new Designated Safeguarding Lead, Caleb Stevens. Caleb brings a huge amount of knowledge and experience having come from an education background and now provide a strategic focus on the organisation. This has now led to our Safeguarding Strategic board being set up. This board has all the heads of department with the DSFRS and is chaired by the Chief Fire Officer, this meeting holds all to account and is able move the service forward under strategic direction for all matters relating to safeguarding.
- Devon & Somerset Fire & Rescue Service's (DSFRS) Safeguarding Team's main area of work focuses on the safeguarding of adults and children at risk whom our staff encounter out in the community whilst undertaking their duties. This could include those whose behaviours pose a fire risk in the home, those experiencing abuse or neglect, or those who are in need of extra support in their daily lives, to name a few.
- Our Safeguarding Team work closely with firefighters who raise referrals for vulnerable individuals who they come into contact with at operational incidents.

- The Safeguarding Team continue to work hard, triaging and processing referrals that are received from operational staff following incidents, home safety technicians when they are undertaking Home Safety Visits and through some of our engagement with young people through Cadet Sessions and Fire Safety Intervention programme.
- DSFRS team are also working really closely with the Home Safety Technicians and ensuring they adopt a person-centred approach to their Home Safety Visits. We are also encouraging them to have a professional curiosity. We have adapted our internal safeguarding referral form to ensure that the voice of the individual is captured and have a clear area where information around consent is provided. This ensures when we are making referrals through to Adult Social Care our referrals contain sufficient and relevant information.
- DSFRS have an extensive network of partnerships including social care, housing providers, care agencies, Police and other local authorities across the two counties. We work with our partners on a daily basis to share information of vulnerable people to ensure they have the opportunity to access the care and support they require.
- We are now able to explore the option of providing additional bespoke equipment during our Home Safety Visits whereby a particular risk has been identified, for example air fryers that are a safer alternative to chip pan fryers.
- Our Safeguarding Team also attend multiagency meetings to highlight fire safety concerns that individuals have shown and offer advice as to how to best reduce these risks.
- DSFRS are currently reviewing the safeguarding training that we provide for the organisation. This will cover different levels of training for staff in every department, from firefighters to admin support staff. Although the level of training will differ depending on each role, we believe everyone in our organisation should have a fundamental understanding of the importance of safeguarding and what it is that the Safeguarding Team do. This helps us to ensure that safeguarding is embedded within the organisation and helps raise the profile of safeguarding within the organisation.
- DSFRS's Safeguarding Team are also currently working on creating a communications plan to broadcast important safeguarding messages to those members of staff who need to be made aware. We are working closely with our Communications Team to look at improving how we liaise with on-call firefighters who aren't necessarily always on station and what platforms we can utilise to best engage with our staff. As part of the plan, we will also be looking at how we share our partners' messages with the wider public, for example drawing attention to national awareness campaigns and using our social media platforms to highlight current safeguarding-related trends and issues. We welcome any feedback if you feel that we could be working better with your organisation to achieve this.
- DSFRS Safeguarding team have realigned roles to specialise in specific areas relating to safeguarding including Modern Slavery, Domestic Violence, Hate Crime. In addition to this the team have established links with Modern Slavery Partnerships and will share

information at the earliest opportunity around any issues relating to Modern Slavery that might be identified within fire service activities with partner agencies to ensure the safeguarding of vulnerable adults.

- DSFRS safeguarding team have implemented monthly group supervision sessions to provide an opportunity for the team to discuss any complex cases. This ensures a level of quality assurance in addition to supporting reflective practice.
- DSFRS Safeguarding Officers are taking on attending board meetings and they have been allocated geographically, this will provide consistent attendance at board meetings and mean that the information can then be disseminated to the team.
- Many of the referrals will contain information around fire risks and the team will liaise with partner agencies and attend multi agency meetings when required to highlight fire risks.
- DSFRS have developed monthly internal fatal fire and near miss meetings to review and discuss significant near miss / fatal fires opportunities to review processes and any learning or areas for improvement. This helps to imbed learning through the service.
- Within the DSFRS we have Our Firesetter Intervention Programme is for children and young people up to the age of 18. During the programme, we will: help them understand and manage the thoughts and feelings that lead them to start and play with fires and teach them about the effect that starting fires can have on themselves and others. The sessions are tailored to meet the needs of the child or young person. We design them for their age and any particular concerns or behaviours. Sessions are run by our dedicated team of Firesetter Advisors. Our approach is about education and guidance to bring about a change in behaviour; it is not to shock or frighten.



Healthwatch Somerset is pleased to be a member of the Somerset Safeguarding Adults Board and the Performance and Quality Assurance subgroup. We exist to speak up for local people on health and social care, to make sure that services in the county reflect the needs of the people and communities they serve. As an independent organisation belonging to the SSAB means that we can bring an impartial perspective to the Board. The first in person SSAB conference since the pandemic took place in March in Bridgwater and we took a stand to promote the work of Healthwatch which enabled us to reach a new audience. Finally, we were delighted to be asked to be a part of the stakeholder panel who were involved in recruiting a new independent Chair to the Board and we would like to welcome Professor Michael Preston-Shoot to Somerset and look forward to working with him and the Board on their exciting plans for the future.

Somerset County Council – Public Health

The Somerset Council Public Health Team provide and commission a range of public health services, and safeguarding both children and adults continues to be an essential part of delivery.

All our commissioned services are managed through a 'Clinical Governance assurance process': using a standardised report template on clinical effectiveness, safeguarding and patient safety, and patient, public experience. Reports are reviewed quarterly by the external Somerset Public Health Clinical Governance assurance panel.

We routinely engage in the following activities:

- Receive and cascade adults safeguarding board newsletters and these are cascaded to our services and issues/actions reviewed as part of contract monitoring.
- All our team members who have client or commissioning responsibilities have undertaken adult safeguarding training appropriate to their role.
- Public health are supporting the establishment of an integrated health protection function to enable clearer multiagency support for more vulnerable groups.
- Our commissioned services take part in the SC Safeguarding Audit tool annually.
- The Adults Safeguarding lead for Public Health, Rachel Handley, attends the Somerset Safeguarding Adults Board and the ICS Safeguarding Steering Group and contributes to the development of the Safeguarding Adults Strategy.

A summary of our safeguarding across our main commissioned services is given in the following table. For more detail on any of the services please contact us at publichealth@somerset.gov.uk with the title 'Safeguarding adults lead'.

Service Title	Function of service	Staff safeguarding training	Reporting routes Assurance that these are adequate	Involvement in strategic safeguarding	Other training, support and quality assurance this year	Numbers of cases reported April 22- March 23
Public Health Nursing Service (Health Visiting and School Nursing)	Internal service, providing universal support for children aged 0-19 and their parents/carers to safeguard and identify and address needs at the earliest opportunity. The team assess the wellbeing of the whole family through the family health needs assessment, monitoring the growth and development of infants, children, and screening, supporting and signposting parents	Mandatory Level 3 Childrens training 92% completion rate. Safeguarding Adults Training 90% completion rate	The service has a daily duty line in which all professional enquiries, domestic abuse notifications, A&E, SWAST and safeguarding requests are triaged and responded to. Internal Performance and quality review Quarterly reports to the PH clinical governance panel	Somerset Safeguarding Childrens Board <ul style="list-style-type: none"> Health subgroup Q&P ICS joint safeguarding steering group Somerset Connect steering group	Named nurse & safeguarding team for adults and children. Provide: <ul style="list-style-type: none"> 3 monthly supervision, ad Hoc support and advice quality assurance 6 weekly line management supervision Weekly attendance from consistent MARAC representative. MARAC researcher in post for PHN	Referrals April 22- March 23: Adult Social Care: 0 Domestic Abuse: 15 SIDAS 21 MARAC 16 PREVENT 0 FGM 0

	with specific health and social issues					
Stronger Communities Team	The team provide support and oversight of the coronavirus helpline and volunteers, the Armed Forces Covenant, support to the Voluntary and Community Sector and the Central Volunteer Team	Adult safeguarding e-learning (and associated resource links) is a key element of the Volunteer e-learning suite, which also includes other adult related content (Awareness of Mental Health, Dementia and Learning Disabilities, oral health and Making Every Contact Count.) Completing this training is a requirement for several volunteer roles, optional on others and available to all volunteers.			Developing reporting system to be able to review uptake of safeguarding training more robustly	

<p>Somerset Drug and Alcohol Service (SDAS)</p>	<p>Commissioned service offers support to adults, young people and their family and friends across Somerset who are experiencing difficulties around substance misuse</p>	<p>The service offers Level 1 Safeguarding Awareness e-learning (88% staff completions), Safeguarding Level 2 (59% staff completions), Children and YP Level 3 (51% staff completions), which is role specific, Domestic abuse F2F (42% staff completions), Domestic abuse e-learning (51% staff completions), Prevent (65% staff completions) and County Lines (71% staff completions) e learning. New staff attend Safeguarding Induction, led by the Safeguarding</p>	<p>Discussed in daily staff Flash Meeting and in weekly Team Meeting. Safeguarding concerns are discussed with our designated safeguarding leads East and West of the county and the YP and families safeguarding lead. Safeguarding Leads attend a monthly Safeguarding Meeting chaired by the Safeguarding Manager. Vulnerable clients are discussed, good practice shared</p>	<p>Domestic Abuse Board and are part of relevant Domestic Homicide Reviews, Safeguarding Adult Reviews, Suicide Prevention Partnership Forum, MARAC, SDAS Midwifery meeting with complex care midwives from YDH & MPH, Nelsons Trust Vulnerable Women’s meeting, One Teams, Combined Health Safeguarding Children and Adults meeting, TOPAZ, Dorset Youth at Risk Panel, WST, Sedgemoor, Mendip, and South Somerset Priorities meetings</p>	<p>Audits are carried out monthly by all line managers, ensuring all safeguarding concerns are being flagged, managed and processes are being followed. Actions are set, discussed, and followed up in staff monthly supervisions. SDAS have signed up to the new MARAC protocol and the Safeguarding Leads/manager attend MARAC weekly for the duration of the meeting.</p>	<p>From April 2022 to date, a total of 54 safeguarding referrals have been made in relation to adult safeguarding. MARAC – 16 SIDAS – 23 ASC – 24 SARSAS – 1 We have seen an increase in the number of referrals but see this as staff being better at identifying and escalating risks.</p>
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		Manager includes MARAC, SIDAS, Adult and Children Safeguarding and how to complete a safeguarding referral. Required to complete safeguarding competency during the first 6 months.	along with any new safeguarding initiatives, which are then communicated to staff via team meeting.			
Somerset-Wide Integrated Sexual Health Service (SWISH)	SWISH provides open access for testing and treatment of sexually transmitted infections (STIs), contraception and prevention services. The service provides clinics across the county, access to online STI testing and a targeted outreach team (TOT) working with adults with a higher risk of acquiring STIs and	All staff have safeguarding training and monthly safeguarding supervision facilitated by TOT.	TOT have monthly meetings, and quarterly meetings with external partners. SWISH provide a quarterly safeguarding report for contract monitoring this is also shared with the SC Clinical	Involvement in TOPAZ / Strategy meetings when required.	The service is supported by the SFT Safeguarding Team	In 2022-2023: 66 Vulnerable Adult Templates completed; 27 referrals made to TOT, 9 new referrals / discussions with the SFT Safeguarding Team 2 required multi agency discussions Referrals from:

	<p>HIV, unplanned pregnancies and unsafe sexual relationships. This includes The Nelson's Trust, homelessness outreach team, Somerset Drug and Alcohol Service, Mental Health community support teams.</p>		<p>Governance Assurance Panel.</p>			<p>SARC=105 Homeless/NFA = 60 PAUSE = 11</p>



Somerset NHS Foundation Trust

Somerset NHS Foundation Trust runs a number of health services across the county of Somerset; services include one acute hospital (Musgrove Park Hospital in Taunton), thirteen Community Hospitals, community services including district nursing, and a range of mental health and learning disability services. We believe that the broad range of services that we offer within one organisation puts us in a better position to provide mental and physical health services for the population of Somerset, helping people to enjoy healthier lives with improved equitable access to the specialist care and treatment they need, when they need it.

Within our Trust we are privileged to work with over 10,500 colleagues who deliver or support our patient services. From therapists to nurses, doctors, researchers, scientists, porters, cleaners, kitchen staff, accountants, those who teach and the receptionists who welcome our patients, the contribution of all of our colleagues is invaluable.

Trust's Safeguarding Service

The Trust's Safeguarding Service is facilitated by a colleague structure that encompasses a wide range of experience, knowledge, expertise, and professional backgrounds, which greatly enhances the advice that we offer to all Trust colleagues. In addition to adults at risk, the Safeguarding Service covers maternity, safeguarding children, domestic abuse and Multi- Agency Risk Assessment Conferences (MARAC), mental capacity and Deprivation of Liberty Safeguards, Multi- Agency Public Protection Arrangements (MAPPA), PREVENT (safeguarding people from the risk of radicalisation), plus a contracted team who provide a safeguarding children service to Public Health Nursing. We have clear policy and procedures in place that provide guidance to colleagues wishing to report a safeguarding concern.

The Safeguarding Service Duty Team provides a single point of contact for colleagues to access for advice on all elements of both adult and child related safeguarding concerns. We recognise safeguarding is complex and can be personally challenging. Therefore, working together in partnership across our own agency and with external agencies, in a way that supports adults in making choices and having

control about how they want to live is key in protecting individuals from harm. The Trust's Safeguarding Service participates in Care Act (2014) S42 Safeguarding Enquiries, Channel Panel, Safeguarding Adult Reviews and Domestic Homicide Reviews as required; the learning from which is disseminated to Trust colleagues via several means.

Safeguarding Adults

Our key aim for safeguarding adults is to ensure all Trust colleagues are aware of their responsibility and duty of care to safeguard those with whom we work, who may be suffering from or at risk of abuse, exploitation or neglect (including self-neglect). The Trust's Safeguarding Service is committed to safeguarding individuals in our care, across the lifespan including unborn babies, children, young people and adults, employing a 'Think Child, Think Parent, Think Family' approach. The effective safeguarding of adults at risk relies upon the multi-agency procedures for protecting adults who are at risk from abuse or neglect. Wherever possible the adult will be involved in decisions about reporting a Safeguarding concern.

Impact of service: Throughout the last financial year the Trust's Safeguarding Service have supported colleagues with 4764 safeguarding adult contacts/enquiries, which is approximately a 7.98% increase on the previous financial year. This is in addition to the contacts received into our duty team single point of contact for safeguarding children concerns. The Trust also made 439 safeguarding adult referrals to the Local Authority covering all elements of safeguarding adults related work; this is an increase of 112.91% on the previous year.

Safeguarding Training: Despite the ongoing impact of the pandemic across the Trust on colleagues' time and availability, we have continued to support colleagues to maintain their safeguarding knowledge by providing safeguarding adults Level 3 training via the virtual platform of Teams, in addition to the E-Learning for Health safeguarding adult level 1 and level 2 modules and a local processes e-learning module. All Trust colleagues are mapped to a level of training commensurate to their roles and responsibilities and in line with the Royal College of Nursing, Adult Safeguarding: Roles and Competencies for Health Care Staff (First edition: August 2018): intercollegiate document. Training compliance rates continues to be impacted by the high demands of patient care upon colleagues' time, meaning they have less time available to be released to undertake training.

Multi-Agency Collaboration

The Trusts Safeguarding Service recognises that safeguarding cannot be done in isolation. It is only truly effective when we work collaboratively and restoratively with our partner agencies to 'Think Family' and protect all those at risk of harm, abuse, or neglect. We are

focused on developing evidenced based approaches to safeguarding practice that balances the rights and choices of an individual, with the Trust duties to act in their best interest to protect people from harm.

The Trust's Safeguarding Service provides representation at a number of safeguarding related forums including Multi-Agency Risk Assessment Conference (domestic abuse), Domestic Abuse Board, Channel Panel (Prevent), Somerset Safeguarding Adults Board and related sub-groups, Prevent Board and regional Prevent and Safeguarding Adults network meetings.

Accountability / Assurance

The Trust's Safeguarding Committee holds the Safeguarding Service to account in relation to our duties and responsibilities in all areas of Safeguarding, including our Policy requirements, Local Action Plans, training compliance rates and Safeguarding Service development. The committee continues to meet quarterly and has external representation and challenge provided by the Integrated Care Board (ICB).

The Trust's safeguarding adult training compliance rates are shared with the Safeguarding Committee, the ICB and with the Somerset Safeguarding Adults Board Quality Assurance Sub-group.

The Trust is required to submit quarterly Prevent data to the NHSE Prevent Data Collections Team via NHS Digital. The Trust shares the Prevent data with the ICB as a means of assurance. The data includes training statistics and number of Prevent referrals made by the Trust.

The Somerset Safeguarding Adults Board and Safer Somerset Partnership hold the Trust to account in relation to actions resulting from recommendations arising for Safeguarding Adults Reviews (SAR) and Domestic Homicide Reviews (DHR)

Liberty Protection Safeguards (LPS)

In 2022-23 a new service for Liberty Protection Safeguards (LPS) was developed and implemented to provide LPS and mental capacity advice and support across both Somerset NHS Foundation Trust and Yeovil District Hospital. This new team is led by a newly recruited Mental Capacity Act, DoLS and Liberty Protection Safeguards Lead which replaced the previous Deprivation of Liberty (DOLs) and Mental Capacity Act Lead posts in both Trusts. The LPS lead is supported by a deputy and an administrator, with plans in place to recruit additional LPS officer posts once the LPS implementation date became clear.

However, on 5 April 2023 the Department of Health and Social Care announced the implementation of the Liberty Protection Safeguards (LPS), the Mental Capacity (Amendment) Act 2019, will be delayed "beyond the life of this Parliament" (therefore likely beyond Autumn 2024). With this development the Trust has taken the decision to maintain the Mental Capacity Act, DoLS and Liberty Protection

Safeguards Lead, Deputy and administrative posts, but refrain from recruiting LPS officer posts. It is recognised that despite the ‘delay’ of LPS implementation, the Trust and patient care still greatly benefits from having a specialist team for Mental Capacity and Deprivation of Liberty Safeguards (DoLs); this service will therefore be reviewed in 2023-24 and retained, ensuring that it reflects current legislation.

Looking forward

From April 2023 Somerset NHS Foundation Trust merged with Yeovil District Hospital Foundation Trust establishing a single, county-wide health care provider delivering joined up community health, mental health, learning disability and acute care. These services include two acute hospitals (Musgrove Park Hospital in Taunton, Yeovil Hospital in Yeovil), thirteen Community Hospitals across the County of Somerset, community services including district nursing, a range of mental health and learning disability services and Symphony Healthcare Services which runs a quarter of GP practices in the county.

Our new Trust values of Kindness, Respect and Teamwork, have been developed with contributions from over 900 colleagues throughout different areas of the Trust. The result of the consultations and forums with colleagues is the following values framework:

Respect	Kindness	Teamwork
Honesty Integrity Equity Civility	Compassion Positivity Understanding Appreciation	Support Collaboration Listening Trust

Within the Trusts Safeguarding Service we will have a unique opportunity for enhancing the safeguarding offer we provide to our 13,000+ colleagues, which in turn will benefit the patients in our care through ensuring adult abuse is recognised, responded to and reported in a timely manner to ensure the safety of our patients, their families and the public of Somerset.



Board Effectiveness

The Trust's Safeguarding Committee met quarterly and worked to a defined reporting schedule. The Committee functioned with an integrated membership and provided an oversight to all strands of the Integrated Safeguarding Service remit. Areas the Committee continues to work towards include:

- Safeguarding risk register
- Outcomes auditing
- Dashboard use and reporting
- Monitoring Compliance and effectiveness

The Trust Head of Safeguarding represented the Trust at the following Board and panel meetings:

- Somerset Safeguarding Adults Board and associated sub-groups
- Somerset Domestic Abuse Board
- Southwest Safeguarding in Health Network Meeting
- Southwest Prevent Network Meetings
- Safer Somerset Partnership Board

Prevention

The Trust board acknowledges their responsibility for safeguarding vulnerable individuals. The Trust have invested in a Trust-wide safeguarding service through the development of a dedicated team. The safeguarding team composition during this reporting period:-

- Deputy Director Safeguarding (providing oversight of safeguarding teams in YDH and Somerset FT)
- Head of Safeguarding / Named Nurse Safeguarding Children
- Named Doctor Safeguarding Children
- Named Midwife Safeguarding Children
- Deputy Named Nurse for Safeguarding Children

- Domestic Abuse Coordinator
- Learning Disability and safeguarding adults' practitioner
- X 2 safeguarding adult practitioners
- Safeguarding team administrator.

Trust staff during this reporting period have continued to identify any issues of a safeguarding nature and this is reflected in the number of alerts and contacts being raised from various hospital departments. During this reporting period, 771 safeguarding enquiries for adult patients have been made to the Trust's safeguarding team, compared to 342 for the previous reporting year. This lower figure reflected the patient flow during the pandemic period. The breakdown of the 771 contacts to the safeguarding team is as follows:-

- Adult safeguarding concerns 46.8%
- Domestic abuse 26.6%
- Learning Disability 26.7%,

This reflects the consistent raised awareness of safeguarding within the organisation.

Training

Due to the pending merger with Somerset NHS Foundation Trust in April 2023, the safeguarding adults training at YDH has been reviewed and remapped in quarter 4, to ensure training compliance is in line with the Royal College Nursing (RCN) Adult Safeguarding: Roles and Competencies for Health Care Staff Intercollegiate Document and to ensure consistency in training across both Trusts. Training compliance is reported to Somerset Integrated Care Board (ICB) and to the Trusts' Safeguarding Committee.

Domestic Abuse and Violence

The safeguarding team, which includes the Domestic Abuse Coordinator (DAC), continued to provide a quality response for victims of Domestic Abuse, sexual violence and Honour Based Violence. This involved the review any of the Domestic Abuse enquiries/incidents and when possible, the DAC would liaise with the patient directly if they were still in a hospital department to help facilitate a response appropriate to their needs. This would include referrals to Somerset Integrated Domestic Abuse Service (SIDAS) and or referral to Multi-Agency Risk Assessment Conference (MARAC)

205 Domestic abuse enquiries/concerns were raised with the safeguarding team during this reporting period (compared to 171 the previous reporting year). 20 of these cases were referred to MARAC or other community support agencies.

The DAC works in partnership with the Trust Dementia team and Safeguarding Adult practitioners in cases where dementia has been identified as a lead factor in some domestic abuse cases. Within the organisation, we have noted a continuing trend in the number of

elderly patients disclosing domestic abuse due to the behavioural changes occurring in their partners due to Dementia and or other medical changes.

Section 42 Reviews

During the reporting period the organisation had received 5 requests for a section 42 review to be undertaken in respect of patient care whilst in this hospital. The common theme for all of the reviews undertaken was in respect of poor communication both verbal and written between Trust staff, families and care agencies. Lack of robust information particularly at point of discharge appears to be a primary concern.

The Trust ensures that learning from reviews are published and shared with staff through Trust newsletters, safeguarding quarterly newsletter and the on the safeguarding team page on the Trust intranet.

Making Safeguarding Personal

- The Learning Disability Practitioner continues to develop and maintain links with carers and community agencies.
- During this reporting period, the Learning Disability Practitioner received 205 enquiries for patients with learning disabilities.
- All members of the team encourage staff members to 'listen to the patients voice' and document the patient's wishes and feelings in respect of their care needs and future planning
- Mental capacity assessment process is strongly embedded in practice. During this reporting period 518 DOLs applications were made from this Trust; this is a slight increase in activity compared to the previous year of 492. Reassuringly this demonstrates a sustained compliance and understanding of the process by staff for the requirements of DoLS.
- As a Trust we continue to fully support the Safeguarding Boards 'Think Family' approach
- The amalgamated Children and Adult safeguarding team has continued to strengthen our 'Think Family' response within the Trust to identified safeguarding issues.

Amalgamation of YDH and Somerset FT safeguarding teams (SFT)

Yeovil District Hospital and Somerset NHS Foundation Trusts are scheduled to merge in April 2023. Prior to this merger the two Trust's safeguarding services set a target date to merge prior to this date and was realised on 1st November 2022. The anticipated changes to the service had been widely advertised to Trust staff, with the most noticeable change being that there is now a more robust single point of contact for the Trusts' Safeguarding Service, rather than staff contacting individual team members.

Part of the process of preparation for the merger was a review of respective processes, policy and training that had been undertaken by the head of safeguarding (YDH) and the lead for safeguarding adults (SFT) alongside the SFT Safeguarding Learning and Development lead and where applicable changes to the mapped training matrix to ensure that there is unified approach to safeguarding.

This reports any action taken over the last 12 months to improve our safeguarding commitments.



Creating communities,
empowering lives

Attendance at board and sub-group:

- We have added Somerset and Surrey to our adult services board group meetings following our expansion into new area's. We now sit on four adult board groups.
- Attend our fire safety group, sit on LA sub-groups for housing, self- neglect and exploitation.

We hope to include BCP in future membership and have been invited to attend meetings coming up. We are committed to support our partners where possible but particularly where we have large housing stock. We are aware of how big an impact housing has on safeguarding both adults and children.

Training:

- We have just paid for accredited training to be produced for all our visiting housing staff. Other staff have access to a simpler 'awareness' e-learning. This means that everyone in our company can understand and report concerns either directly to services or through 'triage' which is responded to every working day.

We are also rolling out training for our staff as we have a new system, so cases can be recorded and monitored securely.

We are looking to train 'champions' within our teams to be able to support the demands of the enquiries that come through our many teams.

Audit:

An internal audit was undertaken, and we have actioned advice received:

- To include Modern Slavery Procedure as reference in the Policy.
- To include the new champion roles in our procedure.
- To show a clear difference to 'welfare' concerns and 'property' concerns as we have two campaigns under our 'See something, say something' title.
- To evidence that our referrals are stored securely and access restricted.

Future:

We are looking at setting up a new internal steering group (this ended with partnership and restructure of departments) to ensure the right people can look at priorities and lessons learned. Our new champions will attend these alongside safeguarding leads and senior managers. We have a new post that is able to dedicate more time to safeguarding as we expand.



Golden Lane Housing
building futures

GLH's approach to keeping tenants safe from abuse

- Golden Lane Housing strives for a world where people with a learning disability and autism have the right support and opportunities to live fulfilled and successful lives in an environment, they feel proud and safe to call their home. Ensuring the ongoing wellbeing and safety of tenants continues to be of paramount importance and forms the very foundations of our service delivery. At Golden Lane Housing we know that when organisations work effectively

together to understand the needs of individuals with concerned curiosity, we deepen our understanding of tenants' aspirations. We know what good multi-agency work looks like and we also know what good support looks like and when we align the various components, we can ensure great outcomes are achieved. Our safeguarding approach is just one key area of our work to help ensure tenants remain safe and happy in their homes and where there is a concern, it is dealt with quickly and where possible, tenants remain in charge throughout.

- Housing Officers continue to take a pragmatic and person-centred approach in keeping in regular contact with tenants the organisation deems to be most at risk of abuse. In fact, there have been 5,038 separate housing management cases logged during this last year, demonstrating robust contact between Golden Lane Housing's Housing Officers and tenants, their families and support providers. We are proud that our colleagues recognise that data protection is not a barrier to sharing information and that when sensitive information is shared proportionately, we are assured that decisions are sound.
- Our approach to safeguarding was robustly tested during a three-day expert review completed by The Ann Craft Trust in July 22. The review paid particular attention to how we have embedded; Making Safeguarding Personal, organisational learning, record keeping and capacity, with key recommendations being drawn from the findings. The Ann Craft Trust commented on the excellent work that Golden Lane Housing delivers in helping to keep tenants safe from abuse and is considered to be a leading provider of housing in this regard.

The difference we continue to make at Golden Lane Housing

- During financial year 2022/23, Golden Lane Housing supported tenants with 96 'low level' safeguarding concerns. 6 of these escalated and became a formal 'concern' raised to the local authority. A further 69 'concerns' (a total of

75) were raised formally to 35 different Local Authority Safeguarding Boards – an increase in the number raised when compared to last year's figure of 61.

- The largest proportion of the emotional abuse alerts were due to incompatibility issues between tenants living in shared properties with 25% relating to tenants who are alleged to have been the perpetrator of abuse towards other tenants in cluster style accommodation, where altercations are taking place in communal areas and where tenants are alleged to have been perpetrators of abuse towards support staff.
- 60% of the physical abuse alerts were in relation to tenants physically assaulting support staff, of which the majority did not have capacity to understand the consequences of their actions.
- The majority of self-neglect cases relate to tenants not engaging with their support team and as a result of this, their general health and wellbeing has deteriorated. The statistics also include hoarding concerns, rent arrears and tenants unable to keep their home in a safe and tidy condition.

Outcomes for tenants

- Our safeguarding approach enables tenants to achieve outcomes that are important to them. Monthly recording and monitoring of our safeguarding KPIs help our Housing Officers to establish and record what they wish to achieve by way of outcomes and how best we are therefore able to support tenants. Where possible, we will always include the tenant throughout the process. Where the tenant does not have capacity, we will work with those that understand the needs of the tenant and will advocate on the tenant's behalf.

- Of the 75 concerns raised, 31(41%) were deemed by the Local Authority as meeting the 'section 42 enquiry'. For those cases that were deemed as not meeting the threshold, Housing Officers will continue to work with the Social Worker / duty team until they are satisfied with the outcome achieved. 54% of the concerns raised resulted in tenants either being able to remain in their own home safely with additional support or supported to move to more appropriate accommodation where their needs could be better met. The remaining 46% have enquiries that are ongoing with Housing Officers working proactively with key professionals to help bring about a resolution that meets the needs of the tenants. For this reason, it can take on average 6 months to close down a concern.

Safeguarding e-learning module launched

- We have been working closely with learning development colleagues to produce an e-learning module specific to the needs of colleagues working in housing. We are delighted to have been able to launch a bespoke e-learning module in February 23 aimed at the needs of housing colleagues in recognising the key indicators of abuse.

Further development of our partnership work

- As a member of Somerset's Safeguarding Adults Board, we enjoyed attending their annual safeguarding conference in February to support group discussions surrounding safer cultures and the role of Court of Protection in ensuring victims of abuse are supported to be able to remain in their home.

- **Support to our colleagues**

We have a wonderful team of housing management colleagues who work with tenants on their safeguarding concerns daily and we must not lose sight of the support our colleagues need when dealing with complex and upsetting concerns. We have already introduced de-briefing sessions for colleagues to share and learn from, however we will undertake some further work during the year to ensure that our support and supervision to

colleagues is outstanding and enables them to reflect on their approaches and share ideas to further improve our service delivery.



- Significant increases in reported Neglect, Self-Neglect, Physical and Sexual Abuse, also Exploitation and a slight decrease in reported Domestic Abuse: **441** cases raised in **21-22** with an increase of 29% in **22-23** total cases raised **624** cases.
- New Scie (<https://www.scie.org.uk/> Social Care Institute for Excellence) training has been rolled out across Leadership Teams and now part of Greenhouse for new staff and refresher training, helps to increase the workforce understanding of types of abuse and how to recognise them.
- Increased reporting across all Local Authority areas other than Devon, where a notable decrease of 22% can be seen which could be linked to the decrease in reporting from Neighbourhoods overall of 30%, with a reduction in the Devon area from the previous year of 37%.
- Significant increase of 56% in cases being raised by IMS and in cases being raised by Supported with 43% which could be attributed to targeted awareness raising within these teams during 22-23 to ensure they report when concerns are recognised. The taking in house for IMS in the North also provided opportunities to brief incoming staff of expectations for Safeguarding reporting which can be seen in an increase in reporting for the Bristol area in particular.

Local Authority 21-22	Count of Local Authority	Local Authority 22-23	Count of Local Authority	Increase	Decrease
BANES (Bath & North East Somerset)	8	BANES (Bath & North East Somerset)	10	20%	
Bristol	33	Bristol	61	46%	
Cornwall	170	Cornwall	278	39%	

Devon	123	Devon	96		22%
Gloucester	2	Gloucester	1		50%
North Somerset	18	North Somerset	15		17%
Plymouth	39	Plymouth	73	47%	
Somerset	41	Somerset	47	13%	
South Gloucestershire	3	South Gloucestershire	5	40%	
Torbay and South Devon	4	Torbay and South Devon	38	89%	
Total	441		624	29%	



Get more from life

Discovery Learning Disability Support exists to support people with a learning disability and/or autistic people to lead a fulfilling life, whether they are relatively independent or have more complex needs. We are determined that the people we support should be able to make their own choices and gain more control over their lives. To enable this, we draw on a wide range of best practice approaches and our involvement in the Somerset Safeguarding Adults Board and learning drawn from this valuable multi-agency collaborative presents a welcome opportunity to further inform Organisational policy and practice. More than this, it is a ready reminder of our responsibility to promote the human rights and wellbeing of the people we support, whilst considering how to stop people coming to harm by learning from the difficulties experienced by others. Making safeguarding personal can invariably be more of a challenge when supporting individuals who

may not communicate with words, or who are not able to make certain decisions for themselves, therefore, we have paid much attention in the last year on increasing peoples circles of support, furthered our partnership working with families and refocused our Managers on the importance of truly understanding the persons desired outcome when a safeguarding referral is made. In addition, we have made great strides towards ensuring that the person, or those who know them best, is satisfied with the outcome achieved through safeguarding, with the introduction of a new module within our accident and incident reporting system, helping to achieve a better monitoring oversight in this regard.

Discovery, which is a subsidiary of the Dimensions UK group, holds a place on the 'parent' Organisations safeguarding panel, which is independently Chaired and directly reportable to the Dimensions Group and Discovery subsidiary Boards. The Safeguarding Panel reviews safeguarding incidents in order to embed learning across the organisation. Alan Critchley, Independent Chair of the Safeguarding Panel is a Safeguarding specialist having chaired, managed and independently reviewed safeguarding boards. The membership of our Safeguarding panel draws contribution from senior leaders, family representatives and is informed by individuals with lived experience. Each meeting ensures that matters are escalated to Boards if or where required and key messages, informed by learning, are disseminated across the Organisation. In October 2022, Discovery were very proud to be invited to the Groups Safeguarding summit, where we were encouraged to share how we had achieved quality improvements and embedded this in practice, over the course of the last two years.

To inform safeguarding within our Organisation, Discovery has established Better Practice Group (BPG) meetings, which are held monthly and attended by all frontline leaders. The purpose of the meeting is to share learning and experiences based on what is going well and to identify areas of concern, in order to inform practice improvement and/or develop strategies; always with prevention in mind. We have been thrilled by the support we have received from other SSAB partner Organisations who have contributed to focused sessions, including more recently representatives of adult social care and safeguarding teams, who facilitated a discussion about the Mental Capacity Act and supporting decision making. The concept of Never Events is well embedded into the way we work at Discovery and the BPG meetings shine a helpful light on 'near miss' never events, to again inform practice. Never Events derives from the NHS and describes events that are:

- Clearly identifiable and measurable
- Can result in death or significant disability and
- Can usually be avoided if everyone acts appropriately and follows established procedures.

Other areas of focus within the Better Practice Group meetings in the last year include;

Compassionate Leadership

It is evident that the pandemic has had a far reaching impact not only on the health and wellbeing of the people we support, but also our colleagues. As we began to live with the what is generally described as the 'new normal' it became clear that we needed to focus time and attention on the health and wellbeing of our colleagues as after all, if they are not in a good place themselves, then they would be less likely to present their best selves when supporting others to live a good life. Compassion is not only proven to improve workplace culture, but by cultivating a compassionate environment, we have better opportunity to reduce hardship and increase relationships based on trust and openness; fine attributes in advancing an open and just safeguarding culture. Being sensitive to the well-being of others and noticing any change in their behaviour is one of the important elements of a compassionate Organisation.

Our frontline managers were surveyed in order to ascertain what key attributes they displayed when considering how compassionate they were, both to themselves and to those they lead. It was apparent that being compassionate to themselves was an area for them to work on, with 51% of respondents confirming that they never, rarely or only sometimes have time to be kind to themselves. Perhaps unsurprisingly, research has found that it can be more difficult to show empathy, a fundamental ingredient for compassion, when there is work overload or where the individual themselves is under stress. By focusing our attention in this area, we have been able to provide coaching support for leaders to model cultural values that supports compassion, raise awareness about the importance of compassion and how this can not only support a psychologically safe work place, but also has the benefit of increased personal satisfaction and reward.

Closed cultures

Following the dreadful stories that emerged from Worlton Hall and other similarly harrowing events, which drew media attention to the darker side of adult social care, Discovery revisited earlier work we had pioneered during 2021 on behalf of the wider Organisation, in respect of closed cultures. We were also delighted to have the opportunity to facilitate a breakout session, entitled 'closed cultures, not in my establishment' at this year's SSAB Conference.

Beyond the provision of training and resources, including a helpful 'checklist to avoid closed cultures' which has been presented to all frontline managers and cascaded to their teams, we have also developed a 'team dynamic' training session, which is available to all of our locality teams as an opportunity for them to:

- Get to know themselves better and achieve an understanding of their key drivers
- Understand each other's strengths and weaknesses
- Reach collective commitment on how to 'be' with each other through the production of a team one page profile
- Explore and resolve any conflict that exists within the team

- Design outcomes for the people they support in order to unify the team behind common goals and remind them of why they do what they do.

The training has resulted in some wonderful stories of strength-based practice and helped support teams to revisit why they do what they do from a vocational perspective, recommitting their intentions in the form of team pledges. Invariably and without apology, we have seen a small number of colleagues leave the Organisation as they were not able to commit to the shared purpose and beliefs of the team, but what we have found, without exception in those instances, is that the teams have gone on to achieve better outcomes for the people we support and colleagues report a much happier and open work environment.

'I find the BPG meetings very useful as we discuss lessons learned, which we are then able to share within our team meetings so we can all learn from them and improve the support we provide to the people we support.' Discovery Locality Manager