North East Lincolnshire
Safeguarding Adults Board
Annual Report
2018/2019
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Foreword</strong></td>
<td>3</td>
</tr>
<tr>
<td><strong>1. Background and Local Context</strong></td>
<td>4</td>
</tr>
<tr>
<td>1.1 North East Lincolnshire Safeguarding Adults Board (NELSAB)</td>
<td></td>
</tr>
<tr>
<td><strong>2. Structure and Governance</strong></td>
<td>5</td>
</tr>
<tr>
<td>2.1 NELSAB Structure, Framework and Membership</td>
<td></td>
</tr>
<tr>
<td>2.2 Chairing arrangements and interface with children’s safeguarding</td>
<td></td>
</tr>
<tr>
<td><strong>3. Priorities 2018/2019 and Resulting Action</strong></td>
<td>7</td>
</tr>
<tr>
<td><strong>4. SAB Members’ Contribution to Safeguarding</strong></td>
<td>10</td>
</tr>
<tr>
<td>4.1 Director of Adult Services (DASS)</td>
<td></td>
</tr>
<tr>
<td>4.2 NEL Clinical Commissioning Group (CCG)</td>
<td></td>
</tr>
<tr>
<td>4.3 Humberside Police</td>
<td></td>
</tr>
<tr>
<td>4.4 Adult Mental Health Services (NAviGO)</td>
<td></td>
</tr>
<tr>
<td>4.5 Health (NLaG)</td>
<td></td>
</tr>
<tr>
<td>4.6 National Probation Service (NPS)</td>
<td></td>
</tr>
<tr>
<td>4.7 Community Rehabilitation Company (CRC)</td>
<td></td>
</tr>
<tr>
<td>4.8 focus Independent Social Work Practice</td>
<td></td>
</tr>
<tr>
<td>4.9 Healthwatch</td>
<td></td>
</tr>
<tr>
<td>4.10 NHS England</td>
<td></td>
</tr>
<tr>
<td><strong>5. Work Group Activity</strong></td>
<td>20</td>
</tr>
<tr>
<td>5.1 SAR,SILP and Good Practice Group</td>
<td></td>
</tr>
<tr>
<td>5.2 Learning and Workforce Development Group</td>
<td></td>
</tr>
<tr>
<td>5.3 Communications and Engagement Group</td>
<td></td>
</tr>
<tr>
<td>5.4 Quality Assurance and Performance Group</td>
<td></td>
</tr>
<tr>
<td>5.5 Provider Forum</td>
<td></td>
</tr>
<tr>
<td>5.6 Mental Capacity Act / Deprivation of Liberty Safeguards (MCA/DoLS)</td>
<td></td>
</tr>
<tr>
<td><strong>6. The Year Ahead</strong></td>
<td>27</td>
</tr>
<tr>
<td><strong>7. Appendices</strong></td>
<td>29</td>
</tr>
<tr>
<td>Appendix A - NELSAB Structure and Membership</td>
<td></td>
</tr>
<tr>
<td>Appendix B – Section 42 Training</td>
<td></td>
</tr>
<tr>
<td>Appendix C – Performance Data</td>
<td></td>
</tr>
<tr>
<td>Appendix D – MCA/DoLS Data</td>
<td></td>
</tr>
<tr>
<td><strong>8. Glossary of Abbreviations</strong></td>
<td>34</td>
</tr>
</tbody>
</table>
Foreword

This report for 2018/19 sets out the activities and work undertaken by North East Lincolnshire Safeguarding Adults Board (NELSAB) and its members to deliver on the aims and objectives of our strategic plan. The overarching objective of our plan is to make North East Lincolnshire (NEL) a safer place for all people, but specifically for those adults within our community who are at risk of experiencing abuse and/or neglect.

The production of an annual report is a statutory requirement of the Care Act 2014, the primary piece of legislation under which the Board operates. Safeguarding is everyone’s business and the NELSAB is responsible for ensuring this premise is at the heart of everything we do.

Adults at risk of abuse and neglect are found in all areas, in all walks of life and within all social classes. They may be at risk for a number of reasons such as disability, age, or lacking mental capacity to make decisions. They may be at risk due to being susceptible to radicalisation, subject to domestic abuse or because of substance misuse.

The NELSAB exists to ensure services, whether regulated, commissioned or voluntary, are safe.

The local development of a Place Board alongside the newly formed Safeguarding Children Partnership (SCP) and the NELSAB’s closer working with the Community Safety Partnership (CSP) is a step towards a joint vision for a “Safer NEL”.

1. Background and Local Context

North East Lincolnshire (NEL) is situated on the south bank of the Humber Estuary with higher than average levels of deprivation. NEL has a stable population of around 160,000, of whom more than 126,000 are adults over 18 years of age. The proportion of those over the age of 65 is increasing.

NEL is a unitary authority area spanning an area of 192 square kilometres across a range of communities within Grimsby, Cleethorpes, Immingham and 22 surrounding villages. The town centres of the more densely populated areas of Grimsby and Cleethorpes are only three miles apart with Immingham approximately eight miles from Grimsby.

NEL’s neighbours are the authority of North Lincolnshire and the Lincolnshire’s districts of East Lindsey and West Lindsey.

1.1 North East Lincolnshire Safeguarding Adults Board (NELSAB)

The NEL Safeguarding Adult Board (referred to as the SAB) is a statutory requirement for all local authorities under Sections 42-46 of the Care Act 2014 with the Director of Adult Social Services (DASS) taking the lead role and overall responsibility for adult safeguarding.

The main objective of the SAB is to assure itself that local safeguarding arrangements and partners act to help protect adults in its area who:

• have needs for care and support (whether or not NEL is meeting any of those needs)
• are experiencing, or at risk of, abuse or neglect
• as a result of those care and support needs, are unable to protect themselves from either the risk of, or the experience of abuse or neglect (Sec 14.2 Statutory Guidance)

People that fall into this category are referred to as ‘adults at risk’.
2. Structure and Governance

As a minimum, the SAB membership must comprise of three main statutory partners, these being North East Lincolnshire Council (NELC), Humberside Police and local health services. In NEL we have established a broader multi-agency membership to ensure representation and provision from all sectors and areas across the NEL community to enable adults’ needs to be fully recognised and met.

2.1 NELSAB Structure, Framework and Membership

The Director of Adult Social Services (DASS) is responsible for ensuring that all organisations providing or commissioned to provide adult services, do so to a standard that is safe and commensurate with the 2014 Care Act requirements. In line with our vision, we seek to empower and protect adults with care and support needs, and support structures to promote the highest standards possible, so that all people in NEL feel safe and are safe, wherever possible, living lives free from the risk or experience of abuse or neglect.

The SAB structure and membership has been consistent for the past three years and the SAB’s relationship with the workgroups is co-ordinated through the Operational Leadership Group (OLG) process that effectivley highlights those issues that require the SAB’s attention. The OLG, chaired by the DASS, meets quarterly to monitor performance and review reports to be presented to the SAB.

The work groups have clear responsibilities aligned to the strategic plan which directs work group activity, including regular reporting into the OLG. The reports considered by the OLG are combined into a composite report that is presented on a quarterly basis to the SAB.

In order for the SAB to have the necessary means for effective decision-making and commitment of resources, its members have sufficient delegated authority to act on behalf of their own agencies. The SAB comprises senior officers, nominated by member agencies, operating under terms of reference that reflect the vision and guiding principles of the Care Act 2014, which are:

- Empowerment: supporting people to make their own decisions and give informed consent
- Prevention: taking action before harm occurs
- Proportionality: the least intrusive responses appropriate to the risks
- Protection: support and representation for those in greatest need
- Partnership: local solutions through services working with communities
- Accountability: accountability and transparency in delivering safeguarding

See Appendix A for SAB Structure and Membership

2.2 Chairing arrangements and interface with children’s safeguarding and NEL Community Safety Partnership

The SAB is currently chaired by the Director of Quality and Nursing and Executive Lead for Safeguarding of the NHS NEL Clinical Commissioning Group (NEL CCG). This post is also one of the three executive members of the Safeguarding Children Partnership (SCP) ensuring synergies between the partnerships.

Through joint ventures, the SAB has increased its capacity to communicate safeguarding information to all people across NEL and move towards a culture of shared expertise across adults, children and
the community as a whole. Joint working with the Community Safety Partnership (CSP) allows cross-cutting themes to be tackled more effectively such as Modern Day Slavery and Prevent.

The appointment of an Assistant Director, now managing all three partnerships, has allowed progress in the Safer NEL ethos.

The SAB has maintained its pledge commitment to safeguarding this year, directly contributing to NELC’s vision that “All people in NEL feel safe and are safe”.
3. Priorities 2018/2019 and Resulting Action

The three-year strategic plan was created in 2016 and has been revised annually. The plan was developed in line with the six principles. The section below sets out the key principles of what we said we would do and what we have done so far:

**Empowerment** - People being supported and encouraged to make their own decisions with informed consent

The Board will produce an information leaflet and develop a website. This will contain information about keeping safe, explain types of abuse and neglect, and provide contact information to be used by anyone with a safeguarding concern.

*The Safer NEL website is now well established and used by both professionals and members of the public; it contains policies and procedures as well as reports from safeguarding reviews, which not only informs all three partnerships are doing but signposts where to get help and assistance.*

http://www.safernel.co.uk/

The Board will organise campaigns and events to raise awareness of adult safeguarding.

*Leading on from the success of events in 2018 with awareness raising of the Mental Capacity Act ‘Unwise Decision Making’, events to raise awareness of Modern Day Slavery and Prevent have been held.*

**Prevention** – It is better to take action before harm occurs

All Board partners will be required to assure the Board regularly on what they are doing to prevent abuse or neglect.

*The updated workforce development strategy is now firmly embedded. The offer of a revised Mental Capacity Act and Deprivation of Liberty Safeguards training pathway has been made with the first refreshed courses being run shortly. The ‘Safeguarding Champions Network’ is now fully embedded and meets regularly to discuss cases and ensure that good practice and lessons learnt are disseminated throughout agencies. We continue to audit and dip sample cases when patterns or themes emerge.*

**Proportionality** – The least intrusive response appropriate to the risk

The Board will ensure that the requirements of Making Safeguarding Personal (MSP) are embedded in all safeguarding enquires. Any actions taken are informed by the express wishes and feelings of the person at the centre of the concern when possible.

*Making Safeguarding Personal (MSP) is the government term for practising in a way that ensures that the adult at risk has the opportunity to express what they want to happen during safeguarding processes and measuring the success at achieving this. Where adults are unable to express their wishes this requires the provision of a suitable advocate to speak on the adult’s behalf.*

*Over 2018/19 we have yet again increased our recording of MSP and have improved the numbers and outcomes of service user satisfaction. We have also improved our activity on assessment for adults who appear to lack capacity, and now in 2018/19, MSP is business as usual firmly embedded in practice.*
Protection – Support and representation for those in greatest need

The Board will require all partners to ensure that there is an up-to-date assessment of mental capacity where appropriate and any best interest decision on file. They will ensure that the person is supported when appropriate by an advocate or an Independent Mental Capacity Advocate (IMCA).

Management of the Deprivation of Liberty Safeguards (DoLS) remains an issue both locally and nationally. Since the Cheshire West court case, the demand for DoLS authorisations has increased more than tenfold. This year the backlog of people awaiting assessment nationally is in excess of 100,000 and all local authorities are struggling to keep pace with demand. As a result, there has been an amendment to the Mental Capacity Act, and the DoLS system is due to be replaced by the Liberty Protection Safeguards (LPS) in October 2020.

North East Lincolnshire’s MCA Group has worked tirelessly in its attempts to manage the risks for those individuals whose applications have not been authorised and to prepare for the forthcoming change in legislation.

To ensure that local Safeguarding arrangements are effective, the SAB also plans to hold an external review of safeguarding processes in 2019/20.

Partnership – Local solutions through services working together with our community

Each Board partner will ensure their organisation upholds their collective responsibilities to safeguard adults in accordance with the requirements of the Care Act 2014.

The Board requires assurances from all partner agencies and providers that safeguarding remains a priority. The Safeguarding Adult Referral, Significant Incident Learning Process and Good Practice Group (SAR, SILP and GP Group) continues to review individual cases where concern is raised or it is believed we could benefit from learning. The group reports quarterly to the Board on all open cases. The Board considers any themes or trends in safeguarding that require scrutiny and direct in-depth audits to allow a clear understanding in order to inform practice.

The Board will work with the Safeguarding Children Partnership (SCP), Community Safety Partnership (CSP) and other local partners when possible to promote safeguarding for all our community.

The SAB chair is one of the executive members of the newly formed SCP and all three partnerships work on common themes such as Domestic Abuse, Modern Day Slavery, Female Genital Mutilation and Prevent. We share audit processes and learning from reviews.

Accountability – Accountability and transparency in delivering safeguarding.

The Board will agree and maintain local multi-agency safeguarding adults’ policies and procedures for all partners to use.

Work continues nationally to agree benchmarking within adults. Locally we have had our dataset reviewed by the Association of Directors of Adults Social Service (ADASS), which published our performance reporting as an example of good practice. Known as the Performance Wheel and developed by the Quality Assurance and Performance Group, it allows the Board to maintain oversight...
of the safeguarding referrals, enquiries made, types of abuse and the outcomes for those subject to enquiries.

The current multi-agency policy and procedures are shared via our website, and the Designated Adult Safeguarding Manager (DASM) role and Person in Position of Trust (PiPoT) protocol is firmly embedded in practice.

The Board will produce an annual report explaining what it has done and how its partners have helped to keep people safe in North East Lincolnshire.

A statutory requirement, this report highlights what the Board has achieved and what it seeks to achieve in the current and next financial years.
4. SAB Members’ Contribution to Safeguarding

4.1 Director of Adult Social Services (DASS)

During 2018/19 we have continued to focus on improving system-wide practice in relation to the Mental Capacity Act, and this year incorporated a sub-group of the SAB specifically focusing on this. Through the roll-out of a series of training events throughout the year, we have focused on topics such as mental capacity and consent, and unwise decisions. We have also evaluated learning from these events through a post-training audit of practice. This shows some improvements in some areas, but also that we need to do more work to re-inforce the understanding and application of the Mental Capacity Act.

We have undertaken a review of a number of case examples involving adults at risk and instigated a learning workshop in June 2018, from which we have developed improved policies and working practices in relation to self-neglect and hoarding. We have developed a multi-agency risk approach to managing more adults at risk with complex needs. We hope this will help us to work more proactively with those at risk of self-neglect, and that partners will be able to collaborate more effectively in supporting adults within the community, whilst protecting individuals’ rights to choice and control.

The management of the increased number of Deprivation of Liberty Safeguards (DoLS) cases continues to pose concern, and we have followed with interest the progress of the law reform in this area of activity. Meeting the demands of our large volume of cases and preparing for the Liberty Protection Safeguards (LPS) regime will present a significant challenge for the Council and its partners.

4.2 NEL Clinical Commissioning Group (CCG)

The NHS North East Lincolnshire Clinical Commissioning Group (NEL CCG) is committed to working with partner agencies to ensure the safety, health and well-being of the local people in NEL. Protecting adults at risk is a key part of the CCG’s approach to commissioning and, together with a focus on quality and patient experience, is integral to our working arrangements. The CCG approach to adult safeguarding is underpinned by quality and contracting systems and processes that aim to reduce the risk of harm and respond quickly to any concerns. This includes working within a multi-agency framework to take measures to reduce the risk of neglect and abuse, and responding where abuse has occurred or is suspected of occurring.

The CCG has a duty to take additional measures in establishing effective structures for safeguarding within its organisation. This includes the development of a clear strategy, robust governance arrangements and leadership across the local health economy.

NEL CCG’s Chief Officer has the overall accountability for safeguarding adults, with the responsibility for ensuring the contribution of health services to safeguarding and promoting the safety of adults at risk.

The Director of Quality and Nursing, reporting to the CCG Chief Officer, is the Executive Lead for Safeguarding Adults across NEL. As Chair of the SAB and a member of the CCG Partnership Board, they take the responsibility for ensuring that safeguarding is embedded across the health community, operationally delivered through local commissioning arrangements.
The Designated Nurse for Safeguarding reports to the Director of Nursing and Quality and attends the SAB to provide clinical advice. This strategic role provides support and leadership across the health economy, ensuring that any lessons learnt are disseminated.

The Designated Nurse, MCA Strategic Lead and Executive Lead for Safeguarding have all undertaken Level 4 training in Safeguarding Adults, provided by NHS England. The Designated Nurse has also undertaken Safeguarding Supervision training and Executive Safeguarding Leadership courses, both commissioned by NHS England. CCG staff have all had appropriate levels of safeguarding training identified, dependent on their roles, and the CCG Safeguarding Team has delivered this in-house.

The Designated Nurse regularly collaborates with the Focus safeguarding adults team, providing advice and support for any health related issues presenting within safeguarding cases. The CCG actively monitors the quality of nursing, residential homes and domiciliary care to ensure any issues are addressed and remedied at the earliest possible point. This is often undertaken in collaboration with the Care Quality Commission (CQC) and other partner agencies.

NEL CCG has a system of robust reporting mechanisms from providers to ensure adequate scrutiny of their safeguarding arrangements. The CCG Safeguarding Policy includes a number of standards which providers are expected to meet and are included in all contracts for providers of commissioned NHS health services. The returns are scrutinised and providers can be challenged through contract compliance.

NEL CCG provides the link with primary care services and the Designated Nurse works closely with the Named GP for Safeguarding Adults to support primary care staff and promote practice improvement in their contribution to safeguarding adults. The Designated Nurse and Named GP for Safeguarding Adults hold a Safeguarding Lead GP forum to further support practice and offer a two-way information-sharing opportunity.

The CCG Designated Nurse chairs and co-ordinates a Health Forum which brings together senior safeguarding leads from all health organisations in NEL, and provides a vehicle through which safeguarding strategy and operational delivery can be supported, challenged and developed. It brings together senior leaders with an opportunity for key communication and peer networking and support.

The CCG continues to manage the Learning Disability Mortality Review process for NEL, ensuring reviews are undertaken, quality assuring completed reviews and disseminating learning into various local work-streams to further enhance standards and improve service delivery.

Both the Designated Nurse and Specialist Nurse for Safeguarding are active participants and contributors to a number of safeguarding systems, including the Channel Panel and Multi Agency Public Protection Arrangements (MAPPA).

NEL CCG actively contributes to the One System Approach to Domestic Abuse. Working with Women’s Aid, the CCG continues to support and promote a weekly domestic abuse drop-in located in two GP practices. All staff within the practices have been provided with bespoke domestic abuse training to aid their recognition of domestic abuse to further support and signpost patients to these drop-ins. The CCG is hopeful that further drop-ins can be delivered in other practices across the locality.

NEL CCG is committed to being a very active member of the SAB, ensuring there is CCG representation at all NEL SAB subgroups.
4.3 Humberside Police

Within Humberside Police safeguarding is everybody’s responsibility. Initially, response to crime allegations from adults at risk is provided by Communities resources. Investigations are then progressed by specialist staff in the Protecting Vulnerable People (PVP) Unit or Criminal Investigation Department (CID). The Force also has specialist domestic abuse officers who are co-located with partner agencies. Appropriate action is taken against those who offend and where there are areas of concern these are shared with partner agencies to ensure a multi-agency approach is considered.

Humberside Police works collaboratively with a range of partner agencies to support service users who have been victims of crime or are at risk of abuse or neglect who are adults at risk. We are key contributors to the SAB and associated sub groups.

“A person is vulnerable if, as a result of their situation or circumstances, they are unable to take care of or protect themselves or others from harm or exploitation.”

We have a dedicated Detective Sergeant working within the local authority at Cleethorpes who is responsible for the co-ordination of referrals and concerns identified through police contact in relation to adults at risk. We ensure that we share appropriate information with our partner agencies to safeguard the needs of adults and children. The Force ensures that there is engagement with frontline officers to safeguard the needs of the community.

The Force has delivered training to support front-line officers with a greater understanding of how to respond to vulnerable people, including those with mental health issues, Autism spectrum disorders and understanding the Herbert Protocol in respect of vulnerable people who go missing. Staff within the PVP have also received training on the Mental Capacity Act.

Within Humberside Police awareness has been raised in respect the emerging issue of Modern Day Slavery and Human Trafficking through local and regional training events and the creation of specially trained Police Tactical advisors.

During 2018/19 Humberside Police received eight items of intelligence and three National Referral Mechanism (NRM) referrals regarding Modern Day Slavery and Human Trafficking within NEL. The Force investigated three crimes relating to these, having created a dedicated team to focus on this issue.

In addition, Humberside Police have continued to deliver Domestic Abuse Matters training to a significant proportion of the Force aimed at raising awareness of the impact of domestic abuse on victims and the need for positive intervention and support.

To further improve the response to domestic abuse issues, Humberside Police now have an Independent Domestic Violence Advocate (IDVA) based within the Force Control Room seven days per week during peak hours. This collaboration ensures specialist tactical advice to call-handlers and response officers, and enables immediate specialist intervention to support members of the public where required.

We have actively engaged in a number of Safeguarding Adults Reviews and multi-agency audits and disseminated this learning across the Force where appropriate. Throughout 2018/19 numerous successful prosecutions were brought in respect of allegations of physical abuse, sexual abuse, theft and domestic abuse involving adults at risk.
In addition to the successful prosecutions there have been hundreds of safeguarding concerns which have been reviewed and then acted upon to ensure appropriate multi-agency intervention to protect those at risk and improve their lives.

To further improve the response to adults in crisis and those with acute mental health issues, Humberside Police now have a crisis worker from MIND based within the Force command centre seven days per week between 1600hrs and 2200hrs. This collaboration ensures specialist tactical advice to call-handlers and response officers and enables immediate mental health intervention to support members of the public where required.

Humberside Police have implemented Operation Signature focussed on identifying adults who have been subjected to financial abuse. The operation is intelligence led through referrals from the National Crime Agency and other partner organisations using the Banking Protocol. This protocol was set up to help financial institutions identify adults who may be in the process of being financially abused or are being financially abused. The operation has been running since January 2018 and has identified 22 victims from NEL who have all been visited by officers from Humberside Police.

4.4 Adult Mental Health Services (NAViGO)

NAViGO is the commissioned provider for adult mental health services in NEL and is represented on relevant safeguarding boards and groups including the SAB Operational Leadership Group, several sub-groups including the SAR, SILP and Good Practice Group, as well as the Performance and Communications groups, Multi-Agency Risk Assessment Conference (MARAC), Multi-Agency Tasking And Coordination (MATAC), the Provider Forum and Channel Panel. NAViGO works closely with *focus* Independent Social Work Practice and all other providers. Over the year NAViGO has worked to increase the numbers of mental health staff receiving safeguarding training. Our current compliance for safeguarding adults and children training exceeds organisational targets, which is good.

During the year, NAViGO has contributed to a number of enquiries that were complicated by mental health issues or where allegations have been made against professionals. NAViGO is committed to the ongoing NELSAB priorities, as the following demonstrate:

- NAViGO responded to its previous CQC inspection which was positive about safeguarding, but recommended having an additional person in safeguarding should the Named Nurse be unavailable and to build resilience.
- NAViGO is currently complying with CQC inspection requirements and CQC scrutiny is imminent.
- Embedding the ethos of ‘Making Safeguarding Personal’ continues across the organisation.
- To adopt a ‘think family approach’, NAViGO is using the transferability of the Signs of Safety model if appropriate, when assessing adult safeguarding concerns.
- Greater awareness of safeguarding within NAViGO through its interface with the public, especially in our trading arms like the Garden Centre.
- Ongoing review and development of the Safeguarding Champions and Leads in each service area to provide advice, support and information, particularly regarding lower tier safeguarding within their teams and liaison with the NAViGO Safeguarding Team.
- A stronger approach to data collection to show a positive impact on safeguarding, which will improve as NAViGO moves to SystemOne in September 2019.
- Incorporating learning from SARs and SILPs into training and practice improvement.
Northern Lincolnshire and Goole NHS Foundation Trust (NLaG) is an NHS Trust covering Northern Lincolnshire and providing hospital and community services to our local population. We are committed to the safety and wellbeing of all patients in our care especially those who are deemed to be vulnerable and in need of safeguarding.

The Trust has an identified lead for safeguarding (adults and children) across the three local authority areas and also a Named Nurse for Safeguarding Adults and a Named Nurse for Mental Capacity and Deprivation of Liberty Safeguards (DoLS). The Trust continues to have leads for Learning Disabilities, Dementia, Privacy and Dignity. All of these posts are held by senior staff within the organisation and a new post of Specialist Nurse (Safeguarding Adults) has been appointed to further enhance the safeguarding team.

There is commitment to attending and contributing to the Safeguarding Adult Boards (SABs) in North Lincolnshire, North East Lincolnshire and the East Riding of Yorkshire. The policy and procedures for all three SABs are accessible via the Safeguarding Adults web page on the Trust Intranet and have been shared with Trust staff. There is also recognition that there is representation on the SAB sub-groups by senior Trust staff including those with designated responsibilities in safeguarding arrangements.

NLaG is actively involved in case audits as part of the partnership working across the three SABs that it works with. As part of routine investigations, the team undertakes regular reviews of case records and implement action plans where improvements are necessary. Case discussion and audit feedback takes place at the bi-monthly Safeguarding Adults Forum (part of the Governance framework) and actively promotes the delivery of training which includes areas such as domestic violence, modern day slavery, financial exploitation, Dementia, improving the care for people with learning disabilities and Prevent. All of these are delivered to ensure that we put the patient first and follow the principles of Making Safeguarding Personal.

Safeguarding adult training continues to be a key area of focus within the Trust with 85% of staff trained to recognise and react appropriately when areas of concern are noticed. DoLS applications continue to rise in line with national levels following the Cheshire West case in 2014 and demonstrate improved understanding of the needs of patients deprived of their liberty whilst in hospital.

The Trust continues to identify adults in need of safeguarding and continues to make appropriate referrals in relation to support of adults at risk and safeguarding referrals if abuse is identified or suspected in line with its partners under the Care Act requirements. Referrals are completed in agreement with the client in an endeavour to make safeguarding personal.

Domestic abuse is a significant issue across Humberside with increasing incidents during 2018/19. The Trust continues to identify victims and attends Multi-Agency Risk Assessment Conferences (MARAC) within North East and North Lincolnshire. Within the safeguarding team there are two Independent Domestic Violence Advocates (IDVAs) who provide 1:1 work with victims and support staff.

Following our Care Quality Commission (CQC) inspection in 2018, we are continuing to move forward and make improvements to ensure that our clients receive the best possible care. A further inspection will take place in late 2019.
4.6 National Probation Service

The role of the National Probation Service (NPS) is to protect the public, support victims and reduce re-offending. It does this by:

- Assessing risk and advising the courts to enable the effective sentencing and rehabilitation of all offenders;
- Working in partnership with Community Rehabilitation Companies (CRCs) and other service providers; and
- Directly managing those offenders in the community, and before their release from custody, who pose the highest risk of harm and who have committed the most serious crimes.

In carrying out its functions, the NPS is committed to protecting an adult’s right to live in safety, free from abuse and neglect.

The NPS has a key responsibility for safeguarding and promoting the welfare of adults at risk. It recognises the importance of people and other organisations working together to prevent and stop both the risk and the experience of abuse and neglect, whilst at the same time making sure an individual’s well-being is being promoted with due regard to their views, wishes, feelings and beliefs.

It also acknowledges the important contribution the NPS can make to the early identification of care and support needs for an offender in the community, as well as cases where an offender who is a carer needs support.

The NPS is committed to eliminating all forms of unlawful discrimination and to encouraging diversity amongst the services it provides. Its aim is to ensure equality and fairness for all and to not discriminate on the grounds of gender, marital status (including civil partnerships), race, disability, sexual orientation, age, gender reassignment, religion or belief, pregnancy and maternity (the nine characteristics protected by the Equality Act 2010).

The NPS continues to work with the North East Lincolnshire and North Lincolnshire Safeguarding Board members via the Humberside Multi-Agency Public Protection Arrangements (MAPPA). Together we have ensured the proportionate and necessary risk management of adult offenders who present a risk of serious harm to communities whilst supporting desistance from crime through a continued and shared rehabilitative ethos. We continue to work closely with our colleagues from the Humberside, Lincolnshire and North Yorkshire Community Rehabilitation Company (HLNY CRC) to commission services targeted at addressing domestic abuse in terms of the risks presented by individual offenders and the wider societal impact.

Following the Government’s announcement to move all case management to the NPS, we will work with our CRC partners to ensure a successful implementation of the Strengthening Probation reforms.

4.7 Community Rehabilitation Company

Humberside, Lincolnshire and North Yorkshire Community Rehabilitation Company (HLNY CRC) is an organisation responsible for supervising offenders within the community. HLNY CRC is owned by Purple Futures, an Interserve led partnership. We work with low to medium risk service users who are serving community based sentences or on post custody licence. We are responsible for delivering unpaid work and offending behaviour group work programmes to service users managed by both the CRC and the National Probation Service (NPS). These programmes include the Building Better
Relationships programme which is aimed at perpetrators of domestic abuse offences. We also support victims of domestic abuse through our Partner Link Workers.

This year has seen HLNY CRC make significant progress in continuing to deliver the ‘Interchange’ service delivery model. This is centred upon personalisation and mirrors the principles of Making Safeguarding Personal. All service users subject to probation supervision by the CRC have individual ‘enabling’ plans which are developed in collaboration with their case manager. These plans focus upon areas which will support service users to desist from offending behaviour. Under a team restructure we have also developed dedicated functional teams to deliver group work programmes, support female service users, oversee community sentences and those sentenced to custody. We benefit from positive links with local partners and directly commission service delivery support from Empower for service user mentoring and Lincolnshire Action Trust to support our work with female offenders. We work with Shelter to deliver resettlement work for service users leaving custody and build links with local housing providers.

The Alcohol Abstinence Monitoring Requirement (AAMR) pilot will cease in April 2019. The project involved the use of electronic ‘sobriety tags’ which monitor whether a service user has consumed alcohol. We are awaiting the final evaluation report but feedback from service users who have been sentenced to AAMR has been positive.

Our Service User Council, co-ordinated by User Voice, remains integral to providing feedback and service user assurance to CRC service delivery. In addition, our Peer Mentoring Scheme involves ex-service users and volunteer mentors supporting our delivery of interventions including group work and induction.

Risk management is integral to our work. We work in partnership with NPS colleagues and have robust risk escalation procedures in place in the event service users are assessed to pose a high risk of harm. We work in collaboration with Humberside Police, Youth Offending Service, Her Majesty’s Prison and Probation Service and Addaction within the Integrated Offender Management Scheme which targets service users who pose the highest risk of reoffending. We are part of multi-agency risk management forums including Multi-Agency Risk Assessment Conference (MARAC) and Prevent, working to safeguard adults who may be at risk from our service users as well as being mindful of safeguarding issues relevant to our client group. We work with local adult safeguarding services towards linking service users into specialist support where required. We are represented on the Safeguarding Adults Board plus the Safeguarding Adult Referral and Significant Incident Learning Process (SAR/SILP) Panel and contribute to the Domestic Abuse One System Approach action plan.

CRCs are subject to rigorous performance management from the Ministry of Justice and we maintain strong local performance against all service level measures and assurance metrics. The inspection framework for Her Majesty’s Inspectorate of Probation (HMIP) has been amended with CRCs now subject to annual inspection. The HLNY CRC was inspected in October 2018 and received an overall rating of ‘Requires Improvement’ although we received a ‘Good’ rating in relation to Leadership and delivery of ‘Through the Gate’ and Unpaid Work. We are now working on delivering our resultant action plan to address the areas of development identified and anticipate further inspection at the end of 2019.
4.8 focus Independent Social Work Practice

Safeguarding Adults Team – focus

The key role of the Safeguarding Adults Team (SAT) at focus is to provide a response to allegations of abuse as defined by Section 42 of the Care Act 2014, in line with Chapter 14 of the accompanying Care and Support Guidance on behalf of North East Lincolnshire Council (NELC). To do this, the SAT provides a duty and triage role to receive and risk assess concerns, and then takes a lead role in making enquiries, or causing them to be made. The SAT has been established since 2010 and all qualified professionals within the Team also act as Best Interest Assessors (BIAs) for the Mental Capacity Act/Deprivations of Liberty Safeguards (MCA/DoLS).

Throughout 2018/19, the SAT has been further embedding the Making Safeguarding Personal programme into working practice. This has included the roll out of the ‘safeguarding outcomes’ process, which comprises face-to-face follow-up for individuals who have been subject to safeguarding enquiries in order to gain feedback from their experience. Whilst some individuals have declined the option to give feedback in this way, we are seeing some take-up of telephone feedback, and some face-to-face meetings. We are hoping to continue to develop this follow-up further and incorporate the provision of feedback into a formal review process throughout next year.

The SAT has been actively involved in other local activities, and provide representation at the local Channel Meeting, the Modern Slavery Group, (Multi-Agency Public Protection Arrangements (MAPPA), Domestic Abuse One System Approach Group, and have taken part in the support of the newly formed Multi-Agency Task and Co-ordination(MATAC) group that is led by Humberside Police and which focuses on interventions with perpetrators of domestic abuse. The BIAs within the SAT have also made a significant contribution to the testing phase of the local implementation of the Association for Directors of Adult Social Services (ADASS) ‘light touch’ approach to Deprivation of Liberty Safeguards (DoLS). More information about MCA/DoLS can be found in the MCA section of this report.

This year, for the first time, the SAT is pleased to have been involved in supporting the Assessed and Supported Year in Employment (ASYE) programme for newly qualified social workers, and is hoping to create a placement scheme for social work students and newly qualified social workers next year.

One of the Advanced Safeguarding Practitioners has also qualified as an Approved Mental Health Practitioner (AMHP), which has brought some additional specialist knowledge into the team.

Throughout 2018/19, the SAT has continued to deliver safeguarding awareness training across health and social care, and has delivered 12 sessions of the Foundations training and 7 sessions of Intermediate training for Managers. This training function ceased at the end of March 2019 because (and we are pleased to announce that) a specialised training post was established to deliver both Safeguarding and MCA Awareness training on a WTE job share basis. The new Safeguarding/MCA trainers will spend some dedicated time reviewing all safeguarding and MCA training packages which they will then roll out over 2019/20.

Business Team

The MCA/DoLS business team provides business support to the SAT and also provides and coordinates the administrative function for MCA/DoLS on behalf of the Supervisory Body (North East
Lincolnshire Council [NELC]). This forms a key role within NELC’s response to applications for authorisation of Deprivation of Liberty. This is both in standard (care homes and hospitals) and non-standard settings (people’s own homes). The main challenge facing the MCA/DoLS team continues to be the overwhelming number of applications that have been made since the Cheshire West judgement that made far more people eligible for DoLS authorisation.

To deal with this the DoLS team has risk assessed applications and directed resources to those most in need of assessment and authorisation. The recent MCA Amendment Bill has been dealing with the issues raised by the increased demand for DoLS authorisations, and the details of the subsequent Liberty Protection Safeguards (LPS) will hopefully address some of the issues that have been raised nationally. However, the implementation of these is likely to lead to a number of challenges during local implementation throughout 2019/20/21.

The MCA/DoLS business team has also supported the development and implementation of a local Memorandum of Understanding that has supported the transition of patients discharged from Mental Health Section, where necessary, onto a DoLS authorisation.

4.9 Healthwatch

The purpose of Health Watch North East Lincolnshire (HWNEL) is to give people a powerful voice locally; ensuring that their views and experiences are heard by those who plan and deliver health and social care services, giving people a real say over how their local health and social care services are run. HWNEL not only has the ability to influence how services are set up, commissioned and delivered, but it is also able to provide advice and information on health and social care services as well as signpost those wishing to make a complaint about their local NHS services. Under its statutory remit, HWNEL enables people to monitor the standard of provision of local care services, and has a number of powers to enable it to fulfil this activity, including the ability to enter and view premises where care is delivered.

During 2018/19, HWNEL conducted 26 Enter and View visits, in addition to researching a number of key issues raised by the local public. During this last year, the Delivery Manager has attended the SAB on behalf of HWNEL, and it has been via this route that HWNEL has escalated any concerns of a safeguarding nature that HWNEL has identified in the course of its activity.

During the year, HWNEL has improved communication and direct pathways to escalate safeguarding issues that may arise and to raise concerns with procedures for the population of North East Lincolnshire.

4.10 NHS England

NHS England has a statutory duty to ensure that it makes arrangements to safeguard and promote the welfare of children and young people, to protect adults at risk from abuse or the risk of abuse and support the Home Office Counter Terrorism strategy CONTEST, which includes a specific focus on PREVENT (preventing violent extremism radicalisation).

Child Protection Information Sharing:

The child protection information sharing phase 1 programme ended 31 March 2019. The North region consistently exceeded target throughout 2018/19. Across NHS England North the local authority
target was 80%, but we achieved 90%. The health target was 80%, but we achieved 96% implementation.

**Female Genital Mutilation (FGM)**

North region consistently exceeded target with current compliance at 84%. Work is underway to pilot an FGM clinic for non-pregnant women and girls in Leeds which is expected to begin operating in May 2019.

**PREVENT**

Across the North, 91.3% of NHS organisations received general training and 83.8% received focused training. For those organisations below target all have support action plans in place.

**Leadership and development:**

- NHS England commissioned the NHS Leadership Academy to deliver 150 places for safeguarding designated professionals to undertake the Mary Seacole programme.
- To raise Child Sexual Exploitation (CSE) awareness, 338 designated professionals accessed training which included Boys & Young Men CSE Awareness – Blast project 133 staff trained, Brook project 205 staff trained.
- Safeguarding supervision skills training commissioned with 80 safeguarding designated professionals already completed with a further 48 in progress.
- Me First Conversations about concerns – 240 staff trained and a further 15 days currently being delivered (25-50 staff per day). In addition, a bespoke course for staff working in learning disability services has been commissioned for up to 125 staff.
- Mental Capacity Act (MCA) Masterclasses – 110 delegates including GPs.

**Learning events & conferences:**

- A north annual conference/learning event for Designated/Named Nurses/Leads was delivered across the North, the theme was ‘Adverse Childhood Experiences – The lifelong impact’ - 116 attended and evaluation was very positive.
- Delivered: Named GP Conference/Learning Event. The Theme “What are we missing” - 35 attended and evaluation was very positive.
- Delivered: County Lines Conference/Learning Event - 65 attended and evaluation was very positive.
- A Yorkshire and Humber learning event for designated professionals was delivered in October 2018. The theme was learning from serious case reviews and how to influence the new NHS landscape - 106 attended and evaluated well.

NHS England Yorkshire & the Humber mandatory safeguarding training compliance for this reporting period was above target at 96%.
5. Work Group Activity

5.1 SAR, SILP & Good Practice Group

The Safeguarding Adult Referral/Significant Incident Learning Process (SAR/SILP) and Good Practice group received two referrals during the 2018/19 year.

One SAR and one SILP was completed from referrals in 2017/18 and the findings were disseminated across various organisations through 7-minute briefings.

Significant Incident Learning Process (SILP)

Miss H was a 50-year old lady with a severe learning disability who sustained an injury which was to affect her life for a prolonged period of time. Miss H lived in supported living accommodation and was known to be very mobile. She was transported to a day centre by mini-bus on one particular day and on arrival was unable to stand. It was over a month later that she was diagnosed with having a fractured pelvis. This incident was the beginning of a series of events which will have been very distressing for this person.

Findings included:

- The SILP process demonstrated that staff in acute services do not always have knowledge of learning disabilities or have understanding of the support options available within Adult Social Care. It was clear that staff did not appreciate the limitations of supported accommodation and the role of carers in this environment.
- Discharge assessments should follow clear guidance which includes ascertaining whether the service user can access their property. This should incorporate patient transport services.
- If a service user needs to be accommodated in an alternative setting there should be a management plan which takes into account the likely distress this will cause. A robust plan should be put in place to ensure that basic care can be carried out in the event of behaviour changes and/or any unsettled periods.
- Other contributing factors identified were: Miss H’s inability to communicate independently, carers’ opinions not being given sufficient consideration by medical professionals, inaccurate record keeping and also lack of clear documentation relating to the Mental Capacity Act.

The full report is published on the Safer NEL website and can be found here:

http://www.safernel.co.uk/learning-from-audits-and-safeguarding-reviews/

Safeguarding Adult Review (SAR)

Mrs B was an 80 year old lady living in a care home in Grimsby. Mrs B had a history of dementia and multiple falls prior to moving to the home. Her mobility deteriorated and she developed contractures. Events culminated in Mrs B sustaining a fractured femur. This did not heal and was ultimately a contributing factor to her death.

Findings included:

- Recognition of the need to re-assess any plans for moving and handling in patients with deteriorating mobility and contractures. This highlighted the equipment used for moving and handling and how this may need to be evaluated and changed accordingly.
Another lesson was the need for pain management to be clearly conveyed during the discharge process. Discharges should also include risk assessments if any patient is not able to be returned to their usual home/room.

The SAR process also found that the arrangements around Lasting Powers of Attorney (LPAs) were not widely known or understood. All care homes and GP practices need to be aware that clarification can be sought from the Office of the Public Guardian and that a copy should be obtained from the family member who holds the LPA.

The full report is published on the Safer NEL website and can be found here: [http://www.safernel.co.uk/learning-from-audits-and-safeguarding-reviews/](http://www.safernel.co.uk/learning-from-audits-and-safeguarding-reviews/)

The Safeguarding Adult Review process is constantly evolving, looking to ensure the processes are streamlined and as effective as possible, avoiding any duplication with other review processes.

### 5.2 Learning and Workforce Development Group

The year got off to a slow start for the Learning and Workforce Development (LWD) Group in 2018/19. There were a number of tasks due to be completed on the workplan but conflicting priorities for the group led to some delays in progressing these. However, as the year went on, these issues were addressed and the group was able to complete all due actions by year end. These included:

- **Whistle Blowing Policy Audit** – All providers were sent a self-assessment form regarding the presence and awareness of whistle blowing policies within their own organisation. Following the audit, it was agreed that awareness of whistle blowing arrangements needed improving, and a reference to whistle blowing policies was requested to be included in all face-to-face safeguarding training. This was undertaken and confirmed at the LWD Group.

- **Foundation Training Feedback** – An audit of the foundation training feedback was undertaken, and it was agreed that the feedback forms were not currently yielding the information required to adequately evaluate the uptake of learning at the sessions. The feedback form was revised, with a plan to develop an assessment for future training sessions taking place throughout 2019/20.

- **The Multi-Agency Safeguarding and Mental Capacity Act (MCA) Training Strategy** – This strategy was revised and a plan formulated to change the local offer for safeguarding and MCA training for 2019/20 onwards. It was agreed that *focus* would be the main provider for the delivery of safeguarding and MCA training, and that this would be delivered free of charge to local providers. To increase the capacity of training provision to meet the likely demand, it was agreed that one WTE training post would be created. Recruitment to this post was successful and is due to commence delivery of the training in 2019/20.

The LWD Group has also been minded to commence planning for a number of new local and national changes. Locally, a Hoarding and Self Neglect Protocol, and a High Risk Panel Protocol had been under development throughout the year; however, neither had been ratified by year end, so the LWD Group was not able to plan launch events or briefing sessions.

In addition, the Mental Capacity Act Amendment Bill had been making its way through parliament throughout 2018/19 but had not received Royal Assent within the 2018/19 reporting period. It was acknowledged however that the implementation of new legislation following any change in legislation would generate a significant training requirement locally.
As 2018/19 drew to a close, a restructure of the NEL SAB commenced. Subsequently the LWD Group was dissolved and the outstanding actions relating to the planning for changes to the MCA were formally handed over to the MCA Group to follow up in 2019/20 once the new arrangements and implementation date are known.

*See Appendix B for details of Section 42 Training*

### 5.3 Communications and Engagement Group

The Communications and Engagement (CE) Group has achieved its key objectives during the last year, as follows:

- It produced and distributed an easy read information leaflet.
- It continued to develop the Safer NEL website, which is now widely accessed by both professionals and the community for the information it contains on keeping safe, types of abuse and neglect, and contact information to be used by anyone with a safeguarding concern.
- Awareness raising of the Safeguarding Adults agenda has been supported by organisations across NEL, and the CE Group has been proactive in its approach regarding raising awareness, particularly with the local community.

The development of the Safer NEL website has strengthened the collaborative approach and we are now considering the development of a Safer NEL Communication and Engagement Group.

### 5.4 Quality Assurance and Performance Group

Information and data from across the safeguarding partnership, continues to be gathered and analysed on a quarterly basis for reporting to the SAB. As themes emerge, deep-dive exercises are performed to identify any trends or areas of concern. An audit was conducted of those calls to the Single Point of Access that did not reach the safeguarding threshold and of cases of self-neglect; no significant issues were found. A recent audit of allegations against People in a Position of Trust (PiPoT) was completed in order to ensure referrals were being passed directly to the Designated Adult Safeguarding Manager (DASM) in line with the PiPoT protocol; again this system was found to be robust and the protocol was being followed. Submissions of low-level concerns by providers continues to improve.

A programme of dip sample audits of safeguarding activity also took place throughout the year to provide additional assurance to the Board; no significant errors were reported.

*See Appendix C for details of Performance Data*

### 5.5 Provider Forum

The joint SAB Safeguarding and the CCG Long Term Care Provider Forum meetings are now firmly established and well attended. Learning from the recently completed Safeguarding Adult Review (SAR) and Significant Incident Learning Process (SILP) were presented to the Forum and awareness raising on emerging themes such as sling and hoist use, pressure sore management and financial exploitation are just some of the presentations that have been delivered this year.

The Forum has continued to contribute to the development and implementation of the work of the SAB, and facilitates the dissemination of SAB protocols and guidance such as the PiPoT process and refresh of the Mental Capacity Act legislation.
5.6 Mental Capacity Act (MCA) Group

It has been an extremely busy year for Mental Capacity Act/Deprivation of Liberty Safeguards (MCA/DoLS) in North East Lincolnshire. The year started with a review and launch of the revised NEL MCA Policy. This was followed up with a number of training events organised by the NELCCG to raise awareness and promote best practice across all partner agencies within NE Lincs.

Some of the training was delivered by nationally recognised experts in the field, including Neil Allen (Barrister), Professor Michael Preston-Shoot, and Edge Training. Topics covered included: best practice for Best Interest Assessors; the application of MCA in cases involving self-neglect; unwise decision making, and capacity and consent; Article 8 rights; and capacity and consent regarding sexual relationships.

Some sessions regarding life planning and the importance of Lasting Power of Attorney were also set up by the CCG and delivered to members of the public.

A local Memorandum of Understanding was created to assist local professionals during their decision-making associated with the interface between the MCA/DoLS and the Mental Health Act.

To promote consistency with the delivery of MCA awareness training, it was agreed that focus would become the lead provider, and that training would be delivered free of charge. To facilitate this, a training post was created and recruited to in Quarter 4 (Q4) of 2018/19.

The passage of the MCA Amendment Bill through Parliament has been closely monitored throughout 2018/19, and it is recognised that the forthcoming changes that will occur if the Bill receives Royal Assent will be significant. The MCA group will lead on the implementation of any changes once they are known. In the meantime, local current practice for the authorisation of DoL in standard and non-standard settings will remain unchanged.

Deprivation of Liberty

At the end of Q4 2018/19, there were 290 authorised Deprivation of Liberty Safeguards (DoLS) in standard settings (hospital and care homes) and 10 court authorised Deprivation of Liberty (DoL) in non-standard settings.

The demand on local resources to manage and authorise the number of applications for DoLS and DoL continues to outstrip resources, and at the close of 2018/19 the backlog of cases yet to be assessed stood at: DoLS = 446; DoL = 189; with an additional 36 in the court process.

With regard to DoLS, of the 446 awaiting assessment, 8 were renewals of active authorisations, 16 were high risk cases, 120 medium and 302 low. Two active authorisations were also subject to Section 21a challenge at the court.

To manage the backlog of cases, focus has liaised with the CCG and undertaken a number of steps to minimise risk. These have included continued review of risk assessments for cases on the waiting list and an audit of self-funded placements.

The self-funded placements were chosen for audit as for some cases no social care or health involvement may have taken place prior to admission and pathways may be unclear. There were 39 cases identified as self-funding; of these, 15 were pulled forward for assessment.
Towards the end of the year, a proposal was under development to evaluate the resources that would be required to assess and authorise the 120 medium risk cases.

The clearing of the backlog remains a key objective, not only for the preparations for any changes in legislation, but also to ensure that the citizens of NELC are afforded the protections that they are entitled to under current legislation.

*See Appendix D for details of MCA/DoLS Data*

### 5.7 Domestic Abuse

Tackling domestic abuse remains a priority in NEL and ongoing work to tackle its prevalence across the borough continues to be embedded in the strategic ‘One System’ approach, underpinned by the current One System Domestic Abuse Strategy 2018/21. The strategy is focused around the following areas:

- **PREVENT** – *Cultivating an environment that prevents domestic abuse and brings about a continual reduction in incidents across North East Lincolnshire, by raising awareness, encouraging victims to report earlier and tackling the culture of acceptance.*
- **PROTECT & PROVIDE** – *Nurturing an environment where sustainable high quality provision, early intervention and wide ranging support services are accessible in order to protect and provide for victims and their families.*
- **PURSUE** – *Deploying the full weight of the criminal justice system to bring perpetrators swiftly to justice, whilst also offering support to those who want to change their behaviour.*

The strategy in turn is reinforced by a comprehensive action plan that is overseen and monitored by the One System Delivery Group, which co-ordinates an extensive range of partnership activity currently taking place.

The National Society for Prevention of Cruelty to Children (NSPCC) ‘Together for Childhood’ programme continues to be focussed on preventing domestic abuse in prototype area of East and West Marsh Wards. A ‘Theory of Change’ has been developed, co-created by a range of partner agencies and taking into account the voice of the victim, which identifies a range of initiatives for preventing domestic abuse, backed by research and proven theory. This has now been fully integrated into the One System Action Plan under six different action headings which are being developed into tangible actions which will put theoretical knowledge into practice.

The contract for Women’s Aid to continue providing Refuge and Outreach Support to victims of domestic abuse and their families has been extended for a further year. Women’s Aid continues to offer a range of domestic abuse domestic services across the borough in addition to those they are contracted to provide, which is supported through donations, fundraising activities and income from their charity shops. Grimsby and Scunthorpe Rape Crisis Limited (The Blue Door) continues to receive funding to deliver currently Independent Domestic Violence Advocate (IDVA) provision in NEL through the Community Safety Partnership (CSP), which currently stands at one IDVA post and one Multi-Agency Risk Assessment Conference (MARAC) Co-ordinator post. Further funding has recently been secured to provide an additional IDVA post for a period of 12 months, with a plan currently being developed to look at the sustainability of long-term provision of these very important roles which support high risk victims of domestic abuse.
Operation Encompass is a scheme which allows Humberside Police to inform schools that a domestic abuse incident took place in the family home while the child was present the previous evening/weekend. This gives the school some context if the student is particularly withdrawn or disrupted. The project was launched in May 2017 and has been rolled out to all schools throughout NEL. There has been a total of 761 notifications sent to schools in the first six months of 2019 (Jan-June) alone, meaning that those children will have been supported with an increased understanding if their behaviour had been affected by recent domestic abuse in their household.

The Domestic Abuse Recovering Together (DART) programme is a 10-week recovery programme developed by the NSPCC for children aged 7-14 years and their mothers, aiming to overcome the impact of domestic abuse, and build and develop parent/child relationships through joint group work sessions. The programme went live in late 2018 following the delivery of multi-agency training and is now part of the locality Prevention and Early Help offer.

A Target Hardening scheme is currently in place to support vulnerable victims of crime who need improved or enhanced security carried out at their home address. In 2018 there were 1,002 referrals, 57% of which had an element of domestic abuse. Safer Homes, who deliver the scheme, are currently carrying out additional work around income generation which is being actively sought, with the aim for it to be a fully self-sustaining service in the future.

Multi-Agency Risk Assessment Conference (MARAC) arrangements continue to ensure all necessary safety measures around high risk victims and their families (children) are in place through a structured multi-agency process. A renewed focus on perpetrators of domestic abuse is supported by ReForm, a non-convicted perpetrator programme, which was commissioned in 2018 for a two-year period. It aims to manage risk to victims and families, increase safety and reduce incidents, thereby improving outcomes around perpetrators being able to sustain non-abusive behaviour. The programme began taking referrals for its core programme in December 2018 and will begin taking referrals for the additional ‘Who’s In Charge’ programme (aimed as parents whose children are abusive / violent) in April 2019. Meanwhile serial perpetrators are made subject of the Multi-Agency Tasking and Co-ordinating (MATAC) system which aims to address their offending behaviour with key agencies meeting to consider interventions, either with an offender who welcomes the support or with an approach which uses enforcement. A pilot was established in September 2018, with multi-agency meetings being held monthly, and has recently been extended for a further year.

Sustained and consistent domestic abuse messages via the Social Marketing and Communications Plan have been heard and read throughout NEL, including:

- A World Cup social media campaign in June 2018 with a combined reach of 102,555.
- A letter and staff briefing sent to all Place Board members regarding domestic abuse and the White Ribbon campaign.
- A public forum event in November 2018.
- A White Ribbon social media campaign linked to the national campaign with a combined reach of 56,000.
- A ‘Santa’s Seaside Grotto’ event prior to Christmas where information on domestic abuse was handed out to parents while children met Santa.
The new ‘SaferNEL’ website, providing guidance and support for victims of domestic abuse, went live in May 2018 and continues to be expanded and updated. The One System Delivery Group has committed to seeking re-accreditation to the White Ribbon Campaign in September 2019, with proposals to develop an updated action plan of activities.

There were 5,502 recorded domestic abuse incidents during 2018/19; of these, 3,432 domestic abuse crimes were recorded. It is important to note that not all victims of domestic abuse will report to or be identified by the police. The recording of the prevalence of domestic abuse is not straightforward. It is generally accepted that the number of incidents of domestic abuse is under-reported with national research indicating that it takes on average between 2½ to 3 years before a victim seeks support. Due to the current strategy of social marketing, better services and increased focus, it is likely that the number of incidents will gradually increase for a period of time as the data better reflects actual prevalence levels. It is hoped that, in time, a plateau will be reached and numbers will begin to reduce as a result of victims becoming more intolerant of domestic abuse and better equipped to manage it at an earlier stage, whilst perpetrators will be better able to modify their conduct, thereby reducing abusive behaviour.

5.8 Prevent/Channel

The Counter-Terrorism and Security Act 2015 places a duty on local authorities to have “due regard to the need to prevent people from being drawn into terrorism”. As part of that duty NELC leads the Channel agenda. Channel is a multi-agency process to identify individuals at risk, assess the nature and extent of that risk and develop an appropriate support plan to reduce or remove that risk. The police have a critical role within Channel and work closely with NELC in order to assist them discharge their duty. A number of agencies support the process including youth offending services, probation, health, mental health services and education, as well as adult and child social services.

The panel received only two new referrals during 2018/2019, which was much less than the previous year when the panel received 18 referrals; however, this is in line with the other three authorities in the Humber region. The panel managed five individuals through Channel during the year, discharging all five after intervention. All closed cases have been reviewed at a six- and twelve-month intervals.

A peer review was conducted during the year and some minor weaknesses in the process were highlighted and have been addressed.
6. The Year Ahead

A new three-year strategic plan is being produced. This will provide direction and co-ordinate the efforts of the SAB to ensure service delivery is safe and improve the quality of care and support for those of our community who most need them. Our priorities have been identified from those Safeguarding Adult Reviews (SARs) conducted over the last three years, and the themes and trends identified from the learning extracted from audits and reviews.

The strategic plan has been simplified, allowing the SAB greater flexibility on how it approaches its three areas of priority namely:

- Neglect
- Domestic Abuse
- Exploitation

During the past three years, the strategic plan has identified three recurring common themes that underpin elements within all three priorities, and addressing these will be central in the SAB’s approach to those themed priorities. They are:

- Lack of Professional Curiosity – the failure of professionals to identify safeguarding issues or challenge others.
- Considering the presence and impact of the ‘toxic trio’ of domestic abuse, mental ill-health and substance abuse.
- Professional and public awareness and communication of safeguarding issues.

A new structure for the SAB is under consideration. A greater emphasis on leadership by the statutory partners of a wider and more inclusive SAB is envisaged. Work groups will be streamlined with specific objectives identified by the SAB who will meet more regularly, initially on a bi-monthly basis.

Now that processes and policies have been created over the past three years, a greater emphasis is on ensuring that these policies and protocols are being followed and that they are improving practice.

We will continue to work closely with the NEL Safeguarding Children Partnership (SCP) and the Community Safety Partnership (CSP) to embed the principle that safeguarding is everyone’s business.

Finally, and perhaps most importantly, we will continue to endeavour to reach out to all adults at risk of abuse or neglect and in doing so, take steps to ensure that their voices are heard and they not only feel safe but are safe and able to access the right services at the right time to protect them and minimise and prevent harm.

We will do this by:

- Demonstrating and sharing our commitment to ensuring that ‘Safeguarding is everybody’s business’ - with our internal and external partners and the wider community.
- Establishing a culture that recognises and does not tolerate abuse.
- Educating professionals and the public on how to spot the signs of abuse and to do something about it.
- Work in ways that enable adults at risk of abuse and neglect to make their own decisions and choices and encourage others to do the same.
- Ensure the voices of adults at risk of abuse or neglect, and their carers, are heard and acted upon.
- Strive to provide the victims of abuse or neglect with the outcomes they want, and those that are right for them as individuals.
- When abuse happens, provide support to those affected in order to:
  - stop the abuse occurring or continuing;
  - ensure that perpetrators are dealt with properly and swiftly;
  - ensure access to services is available for those most vulnerable at the time they are needed; and
  - share learning and solutions from all resolved issues far and wide so NEL as a whole can feel safe and be safe.
2018-2019 membership was:

Jan HAXBY: Board Chair and North East Lincolnshire Clinical Commissioning Group (NELCCG) Director of Quality

Cllr Jane HYLDON-KING: NELC Deputy Leader and Portfolio Holder for Adults

Bev COMPTON: Director of Adult Social Services

Detective Superintendent Dave WOOD: Protecting Vulnerable People Unit, Humberside Police

Nick HAMILTON-RUDD: Head of Humberside NPS (North and North East Lincolnshire)

Becky BAILEY: Interchange Manager for the HLNY Community Rehabilitation Company

Joe WARNER: Chief Executive of focus Independent Social Work Practice

Julie WILBURN: NELCCG Designated Nurse for Safeguarding Adults

Andrew APPLEYARD: Care Quality Commission (CQC) Inspection Manager

Craig FERRIS: Northern Lincolnshire and Goole (NLAG) NHS Head of Safeguarding

Tracy SLATTERY: Healthwatch

Rick PROCTOR: Independent Chair LSCB

Zena ROBERTSON: Senior Nurse NHS England

Stewart WATSON: NELSAB Business Manager
Appendix B – Section 42 Training Attendance

Safeguarding Adults and MCA Attendances 2018-19

- SAF: 152
- SA Managers: 196
- MCA Basic: 275
- MCA Int: 196
- MCA BIM: 71
- SAR E-learning: 34
- Assessing MCA: 71
Appendix C – Performance Data

Concerns Received

![Graph of Concerns Received]

- No of Safeguarding Concerns received
- No of Safeguarding Concerns progressed to Enquiries
- No of Safeguarding Concerns Closed (by Triage and Decision Maker)

Historical Data

![Graph of Historical Data]

- Number of Safeguarding Concerns Received (per year)
- Number of Safeguarding Enquiries/Investigations Completed (per year)
8. Glossary of Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADASS</td>
<td>Association of Directors of Adults Social Service</td>
</tr>
<tr>
<td>AMHP</td>
<td>Approved Mental Health Practitioner</td>
</tr>
<tr>
<td>ASYE</td>
<td>Assessed and Supported Year in Employment</td>
</tr>
<tr>
<td>BIA</td>
<td>Best Interest Assessors</td>
</tr>
<tr>
<td>CE</td>
<td>Communications and Engagement (Group)</td>
</tr>
<tr>
<td>CID</td>
<td>Criminal Investigation Department</td>
</tr>
<tr>
<td>CQC</td>
<td>Care Quality Commission</td>
</tr>
<tr>
<td>CSP</td>
<td>Community Safety Partnership</td>
</tr>
<tr>
<td>DART</td>
<td>Domestic Abuse Recovering Together (Programme)</td>
</tr>
<tr>
<td>DASM</td>
<td>Designated Adult Safeguarding Manager</td>
</tr>
<tr>
<td>DASS</td>
<td>Director of Adult Social Services</td>
</tr>
<tr>
<td>DoLS</td>
<td>Deprivation of Liberty Safeguards</td>
</tr>
<tr>
<td>HWNEL</td>
<td>Health Watch North East Lincolnshire</td>
</tr>
<tr>
<td>IMCA</td>
<td>Independent Mental Capacity Advocate</td>
</tr>
<tr>
<td>LPS</td>
<td>Liberty Protection Safeguards</td>
</tr>
<tr>
<td>LWD</td>
<td>Learning and Workforce Development (Group)</td>
</tr>
<tr>
<td>MAPPA</td>
<td>Multi-Agency Public Protection Arrangements</td>
</tr>
<tr>
<td>MARAC</td>
<td>Multi-Agency Risk Assessment Conference</td>
</tr>
<tr>
<td>MATAC</td>
<td>Multi-Agency Tasking and Co-ordination</td>
</tr>
<tr>
<td>MSP</td>
<td>Making Safeguarding Personal</td>
</tr>
<tr>
<td>NEL</td>
<td>North East Lincolnshire</td>
</tr>
<tr>
<td>NEL CCG</td>
<td>North East Lincolnshire Clinical Commissioning Group</td>
</tr>
<tr>
<td>NELSAB</td>
<td>North East Lincolnshire Safeguarding Adults Board</td>
</tr>
<tr>
<td>NLaG</td>
<td>Northern Lincolnshire and Goole NHS Foundation Trust</td>
</tr>
<tr>
<td>NRM</td>
<td>National Referral Mechanism</td>
</tr>
<tr>
<td>NSPCC</td>
<td>National Society for Prevention of Cruelty to Children</td>
</tr>
<tr>
<td>OLG</td>
<td>Operational Leadership Group</td>
</tr>
<tr>
<td>PiPoT</td>
<td>Person in Position of Trust</td>
</tr>
<tr>
<td>PVP</td>
<td>Protecting Vulnerable People</td>
</tr>
<tr>
<td>SAB</td>
<td>Safeguarding Adults Board</td>
</tr>
<tr>
<td>SAR</td>
<td>Safeguarding Adult Review</td>
</tr>
<tr>
<td>SAR, SLIP and GP Group</td>
<td>Safeguarding Adult Referral, Significant Incident Learning Process and Good Practice Group</td>
</tr>
<tr>
<td>SCP</td>
<td>Safeguarding Children Partnership</td>
</tr>
</tbody>
</table>