
Safeguarding Adults Update for Health and Wellbeing Board (Q3 2021/22)

Report being considered by: Health and Wellbeing Board

On: 19 May 2022

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Report Sponsor: Councillor Jo Stewart

Item for: Discussion



1. Purpose of the Report

This report outlines the volumes and performance of Safeguarding Adults in West Berkshire Council.

2. Recommendation

That the Health and Wellbeing Board notes the report.

3. Executive Summary

- 3.1 Safeguarding adults is a core activity of ASC and a statutory responsibility for local authorities.
- 3.2 In Q3 2021/22, volumes of safeguarding activity have remained high, and this is reflective of demand across wider ASC services.
- 3.3 Some changes were made in Q3 to the way that activity is recorded. This was because administration of the previous approach had been inefficient and time-consuming for officers. Therefore during Q3 we made some changes to the process of triaging and recording some concerns raised by our emergency service partners. All concerns received were dealt with appropriately but some were recorded in a different way and this has had an impact on numbers.
- 3.4 Overall concerns (those that meet the threshold and social welfare) volumes for Q3 2021/22 decreased by 7% on Q2 total concerns. This variation is minor and volume remains reasonably high. This overall figure is not impacted by the changes to recording referenced above.
- 3.5 S42 enquiries opened have reduced by 26% on Q2. This is partly as a result of the increased capacity within the team to make more effective initial enquiries meaning more concerns were micro-triaged and closed down at an earlier stage.
- 3.6 Performance against other measures within safeguarding activities all remain broadly in line with the 2020/21 YTD.

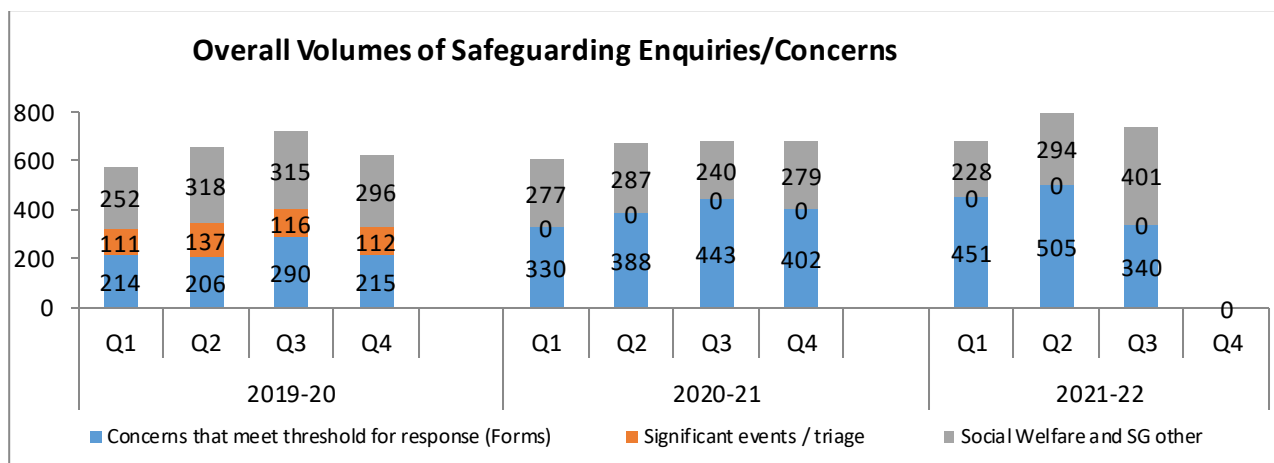
4. Supporting Information

Introduction

- 4.1 This report refers to the key quarterly measures and trends used to monitor activity for Safeguarding Adults and DoLS. Comparative data to benchmark performance against other authorities where it exists is also included under the relevant graphs.
- 4.2 The overall volume of activities across DoLS and Safeguarding Adults during Q3 remains high and consistent with demand throughout the year to date.
- 4.3 This report makes comparisons with Q2 of 2021/22 in most instances which is more representative of current circumstances. Graphs provided do indicate performance in 2019/20 prior to the pandemic and in some instances provide useful comparison.

Background

- 4.4 The data set of total concerns received is split into two types of concerns; namely those that meet the threshold for a response within the safeguarding framework and those that do not. Those that do not meet the threshold are followed up in other teams.
- 4.5 It was noted in the Q2 report that the time taken to administer the recording system, implemented in April 2020 to more accurately reflect the work undertaken by the team, had had a significant effect on the amount of time available to micro-triage the concerns that are referred in. This meant that some concerns were being passed through for an enquiry that previously may not have met the threshold following initial enquiries. This had only become apparent as demand escalated significantly.
- 4.6 During Q3 we took a decision to filter out some concerns raised by the South Central Ambulance Service (SCAS), Thames Valley Police (TVP) and the Royal Berkshire Fire and Rescue services (RBFRS). Those concerns were triaged in the normal way, but where they were clearly unrelated to any safeguarding matter they were not administered via the case management system as reportable concerns, although they were still forwarded to appropriate teams and services for action as a social welfare concern.
- 4.7 This change in process has served to reduce the number of concerns administered within the safeguarding framework and statutorily reported by 92 but increase the number of social welfare concerns logged. Because of this change it is important to review the total data per quarter rather than just concerns meeting the threshold for a response within the safeguarding framework.
- 4.8 This change in process is under review as it will skew comparisons to the 2020/21 data and increase the % rate of conversion.

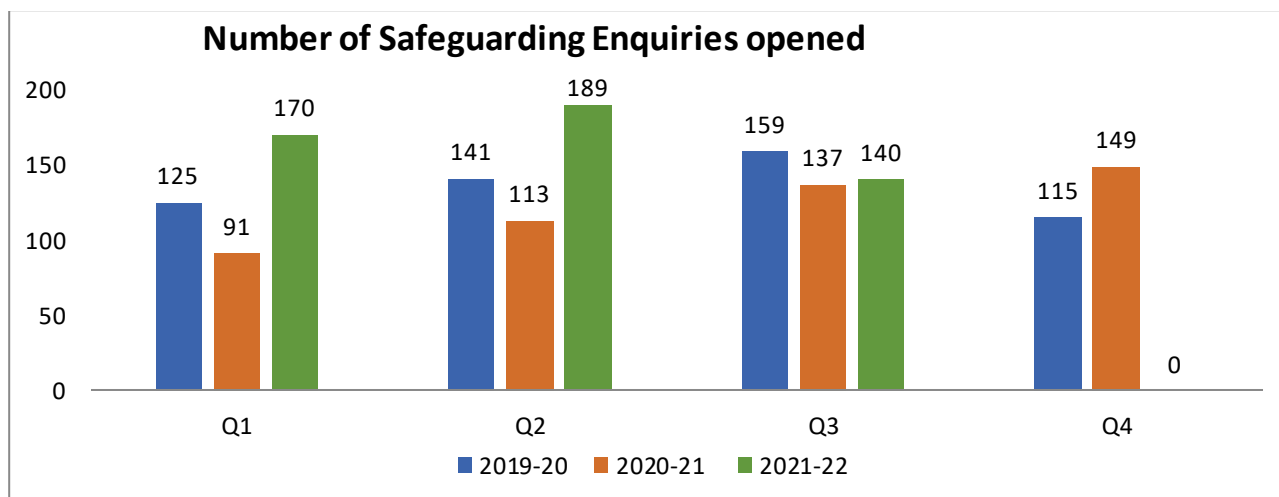


4.9 The Concern graph indicates:

- Total concerns that were received during Q3 is 7% lower than in Q2. This is not a large variation.
- The concerns that received a response within the safeguarding framework is 32.6% lower than those in Q2. That reduction is a direct result of the changes in approach made in Q3 described above.
- 'Social Welfare' concerns -These are enquiries that come into the Safeguarding team but relate to social welfare concerns and are passed on to the relevant Locality team to assess and respond appropriately.
- Social welfare concerns are 36.3% higher than Q2. This increase is a direct result of the changes made in Q3 and described above.
- Safeguarding concerns that meet the threshold are the only ones reported statutorily, but the overall volume provides an accurate picture of the volume of work received by the Safeguarding Team.

Section 42 Enquiries opened – Overall volume opened in the year

- 4.10 Local authorities must make enquiries, or cause another agency to do so, whenever abuse or neglect are suspected in relation to an adult and the local authority thinks it necessary to enable it to decide what (if any) action is needed to help and protect the adult.
- 4.11 These enquiries are typically referred to as Section 42 (S42) enquiries. All concerns are risk assessed and triaged by the safeguarding team to establish if further enquiries are necessary to meet our statutory obligations.



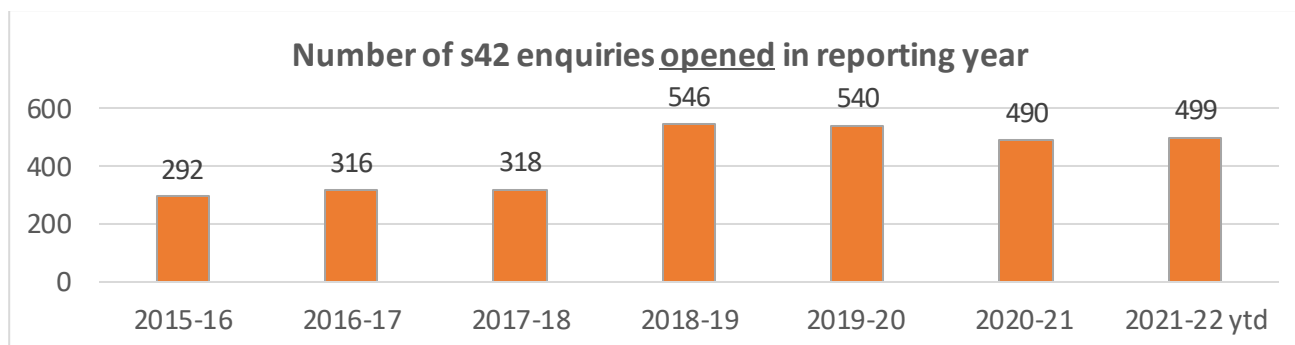
4.12 Of the concerns received in Q3, 140 were assessed as requiring a S42 enquiry. That represents a 26% decrease on Q2.

4.13 As noted in the Q2 report, the time taken to administer the recording system, implemented in April 2020 to more accurately reflect the work undertaken by the team, had a significant effect on the amount of time available to micro-triage the concerns that were referred in. The executive decision taken in early Q3 to filter out some concerns raised by TVP, SCAS and RBFRS where the referral was clearly not related to a safeguarding matter, has had an impact on the number of S42 cases opened.

4.14 92 cases were filtered out and referred through as social welfare concerns. Those were passed to the relevant ASC Locality teams or mental health services for action.

4.15 The team’s capacity to undertake greater initial enquiries, before determining whether the concern meets the threshold for a S42 enquiry, has increased and this has impacted on the number of enquiries opened. However, as the number of concerns has reduced more than the number of enquiries opened, the conversion rate will be higher.

4.16 The graph representing the number of S42 enquiries opened in a reporting year is useful in respect of taking an umbrella view of enquiries over a longer period of time than focusing on a single quarter.

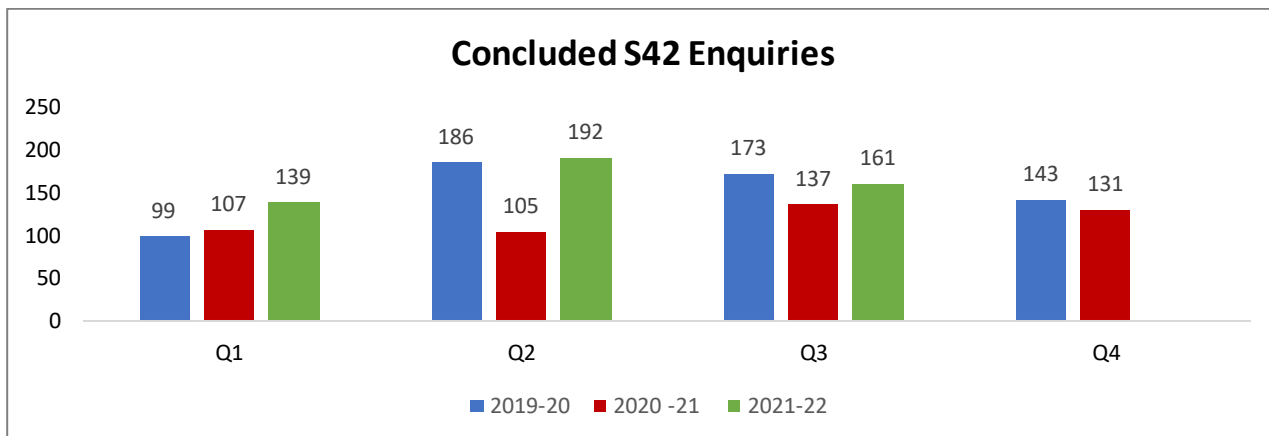


4.17 The total number of S42 enquiries opened in 2020/21 totalled 490. As at the end of Q3 we have opened nine cases more than the total opened during 2020/21. We are likely to see year end activity slightly in excess of the activity recorded for 2018/19.

4.18 The conversion rate of concerns to enquiries as at the end of Q3 is 38.5% and demonstrates the beginning of the predicted increase in the conversion rate as referenced above. The rate is calculated as year to date and so will be tempered by the rate recorded in Q1 and Q2.

Concluded S42 Enquiries

4.19 There were 161 enquiries concluded during Q3. This is 16% lower than Q2 closures. This figure will vary dependent upon number opened in the preceding months.



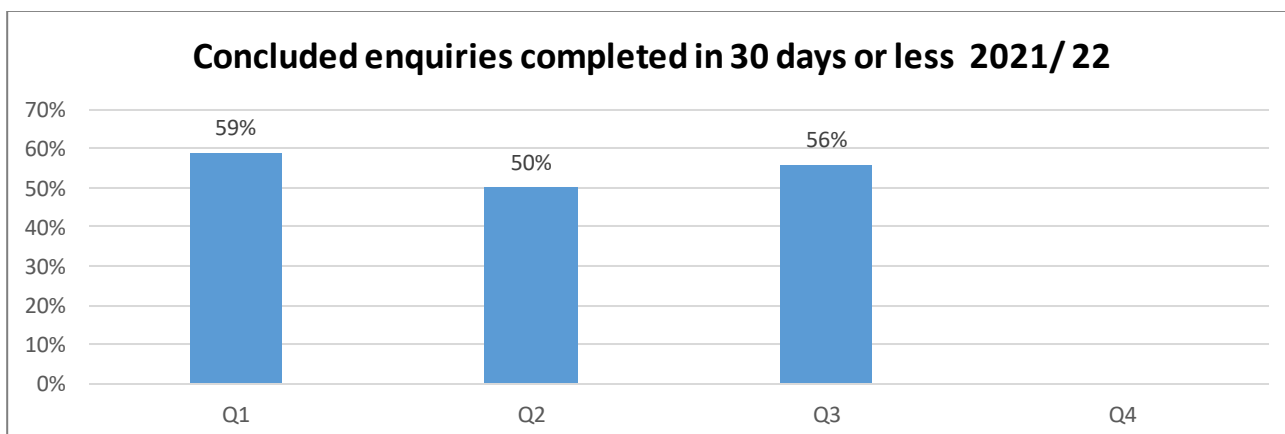
Timeliness

4.20 Concluded enquiries completed in less than 30 days for Q3 is approximately 56% of cases. This % does vary as complex cases will take much longer than 30 days to complete and close. Generally this % figure sits somewhere between 50 and 60% and varies quarter by quarter.

4.21 This measure allows us to monitor drift and ensure those opened for longer than 30 days are open for a valid reason.

4.22 There is a facility within the documentation on Care Director to require a safeguarding case to be reviewed within a specified time period. A review would be to determine if the protective measures put in place are making a positive impact.

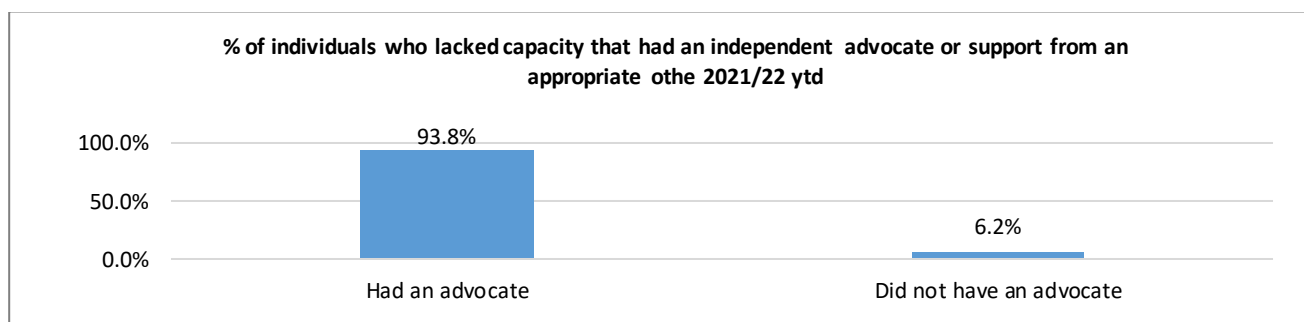
4.23 Any substantive decrease in the % closed within this timeframe would either indicate a significant increase in complexity of cases, a substantive number of reviews pending or significant drift in undertaking those enquiries.



- 4.24 The service is required to audit 10% of all concluded cases by year end. As at end of Q3 the total number audited amounted to 10.2%. That is 50 audits against 492 closures as at end of Q3.
- 4.25 This is on target and represents a 50% improvement in performance on Q2. This improvement was achieved as a result of the Safeguarding Manager returning from maternity leave early in Q3 and resuming responsibility for closures thereby freeing up capacity to audit.
- 4.26 Any case audited that raises specific concerns continues to be directed back to the relevant staff member and team managers.

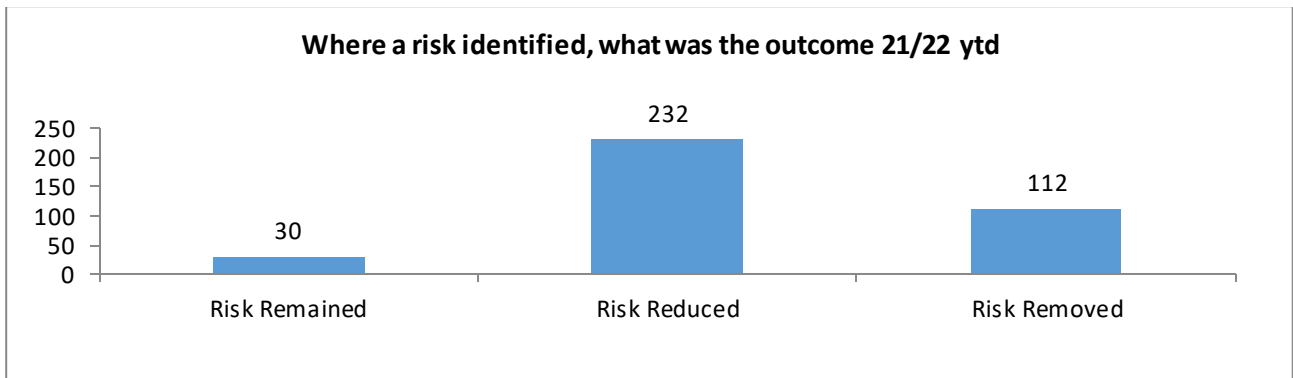
Advocacy

- 4.27 The Council has a statutory duty to ensure a person who is deemed to have substantial difficulty in participating and making decisions in the safeguarding process has access to suitable advocacy. In some cases this will be a paid advocate although it can be a friend or relative.
- 4.28 In Q3, 62 people were deemed to have substantial difficulty to participate, 61 were provided with an advocate. This represents a year to date total of 94% and a slight improvement on performance in Q2.
- 4.29 The single individual who was not provided with an advocate in Q3 was reviewed. There was consideration in the case made to the provision of an advocate at the time of enquiry and explored with the social worker involved. In this instance it was the predicted behavioural reactions of the service user to a third party that prevented the introduction of an advocate; someone unknown and unfamiliar to them. The service will continue to monitor this area of work closely.



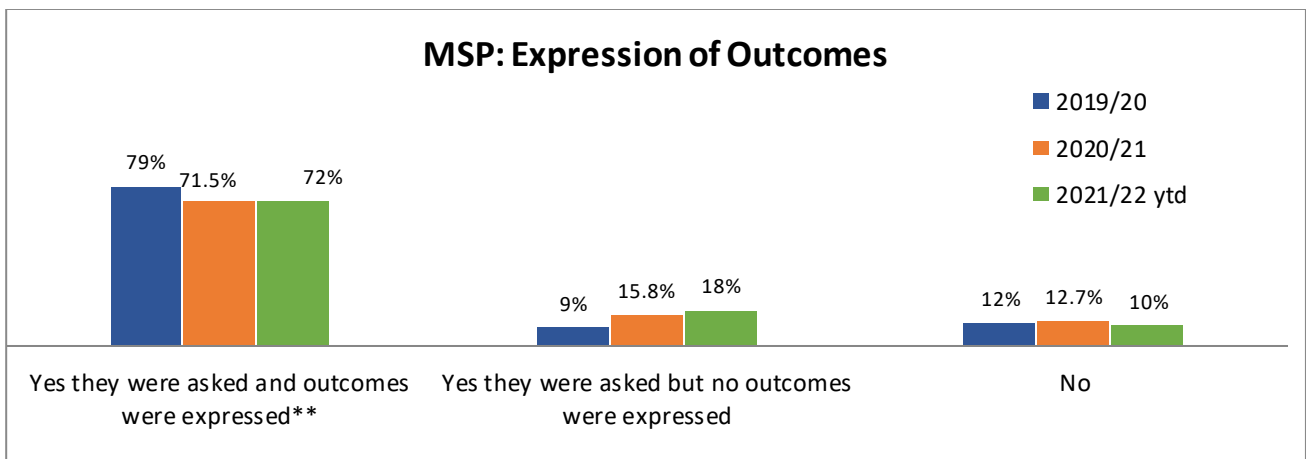
Management of Risk

- 4.30 Data is drawn from concluded cases.
- 4.31 In cases where risk was identified and action was taken in Q3, the outcomes indicate that in 123 cases the risk has either been removed or reduced. That represents as at year to date 92% where actions taken had a positive impact on the presenting risk.
- 4.32 This is broadly consistent with the 90% recorded in Q2, and note this figure will fluctuate quarter by quarter, according to circumstances and decisions about the safeguarding plans made by the person subject to the safeguarding enquiry.

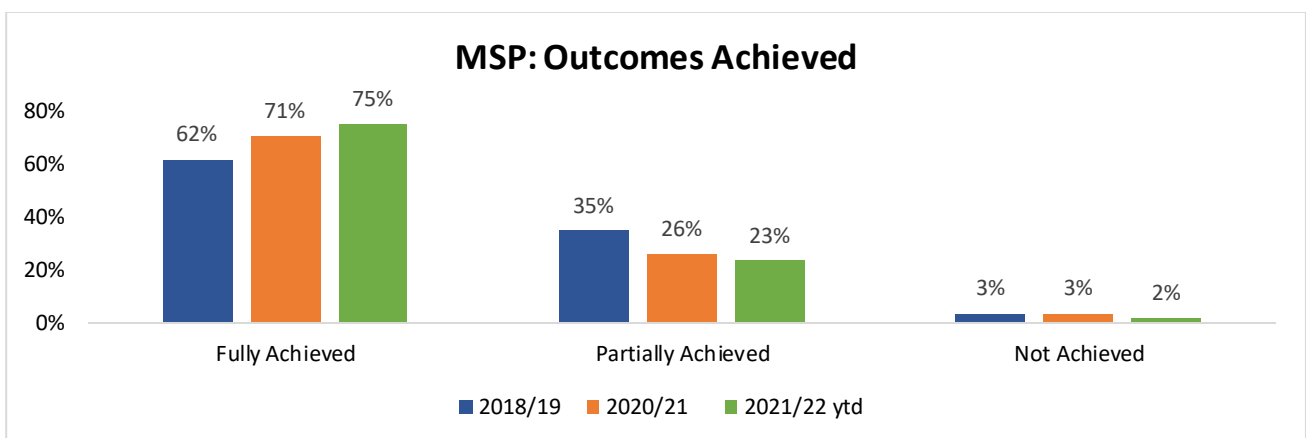


Making Safeguarding Personal (MSP)

4.33 In Q3, of the 161 enquiries concluded, in 93% of cases the individual was asked what their desired outcomes would be. However, for the purposes of reporting it is only those who expressed a desired outcome, 122 in Q3 (76%), that we look to further understand if outcomes have been achieved.



4.34 Of the 122 people who expressed a desired outcome in Q3, 119 were able to achieve those outcomes either full or partially with only 3 individuals not achieving their desired outcomes. This represents a YTD total of 98% either fully or partially achieving their desired outcomes from a safeguarding enquiry.



5. Conclusion

- 5.1 The Safeguarding team has maintained consistent performance during Q3 within the context of continued high volumes. Demand has remained well managed within the resources available.
- 5.2 The decision taken to filter out some safeguarding concerns referred in by a number of our statutory partners, to increase capacity to make initial enquiries appropriately and therefore triage more effectively, has impacted on the number of concerns statutorily reported versus the number of social welfare concerns processed, the number of S42 enquiries opened and the conversion rate. It is important to note all concerns sent through are reviewed in detail and dealt with irrespective of how they are counted.

6. Consultation and Engagement

This report includes contributions from the Quality and Performance Team, Legal Services Team and Safeguarding Adults Team.

7. Appendices

None.

Background Papers:

[West of Berkshire Safeguarding Adults Partnership Board – Annual Report 2020-21](#)

Health and Wellbeing Priorities Supported:

The proposals will support the following Health and Wellbeing Strategy priorities:

- Reduce the differences in health between different groups of people
- Support individuals at high risk of bad health outcomes to live healthy lives
- Help families and young children in early years
- Promote good mental health and wellbeing for all children and young people
- Promote good mental health and wellbeing for all adults

The proposals contained in this report will support the above Health and Wellbeing Strategy priorities by demonstrating how action is taken to safeguard adults in West Berkshire.
