

**REPORT FOR: HEALTH & SOCIAL
CARE SCRUTINY SUB-
COMMITTEE**

Date of Meeting: 26th October 2015

Subject: Harrow Local Safeguarding Adults Board (LSAB) Annual Report 2014/2015

Responsible Officer: Bernie Flaherty
(Director, Adult Social Services)

**Scrutiny Lead
Member area:** Councillors Margaret Davine,
Performance Lead Member &
Chris Mote, Policy Lead Member

Exempt: No

Wards affected: All

Enclosures: Appendix A - Harrow Local
Safeguarding Adults Board Annual
Report 2014/2015

Section 1 – Summary and Recommendations

This report provides Scrutiny Committee Members with an overview of the Local Safeguarding Adults Board (LSAB) Annual Report for 2014/2015 which summarises safeguarding activity undertaken in that year by the Council and its key partners. It sets out the progress made against priorities, analyses the referrals received and outlines priorities for the current year (2015/16).

Recommendations:

Scrutiny Committee is requested to note the work that has taken place in 2014/15 and the action plan for 2015/16. Also to note that from April 2015 the Safeguarding Adults Board has been put on a statutory footing as required by the Care Act 2014.

Section 2 – Report

2.1 Introduction

This is the eighth Annual Report of the Local Safeguarding Adults Board (LSAB) and a copy is attached as an appendix for information.

2.2 The Care Act 2014

Under the Care Act 2014 the local Safeguarding Adults Board has 3 core duties. It **must**:

- i. publish a strategic plan for each financial year
 - *the Harrow LSAB has a 3 year strategic plan for 2014 – 2017*
- ii. publish an annual report
 - *Harrow LSAB's 7th Annual Report (for 2013/2014) was presented to the Council's Scrutiny Committee in July 2014. This 8th report for 2014/2015 will go to a Scrutiny meeting on October 26th 2015*
 - *each partner organisation represented at the LSAB presented the Board's Annual Report for last year at their Executive level meeting or equivalent*
 - *as in previous years, this report will be produced in "Executive Summary", "key messages for staff" and "easy to read" formats and will be available to a wider audience through the Council and partner agencies websites*
- iii. conduct any Safeguarding Adults Reviews (SARs)
 - *these will be carried out as required*
- iv. have the following organisations on the Board – the Council; the local NHS Clinical Commissioning Group (CCG) and the chief officer of Police
 - *the membership of Harrow's LSAB (as at 31st March 2015) is shown in Appendix 5 and their attendance record is shown at Appendix 6*

2.3 Management Information/statistics

The full set of statistical information is at Appendix 1 of the attached report.

Headline messages – safeguarding adults

Previous annual reports have compared Harrow's performance against the national figures. However with the introduction of the new data set (the SAR – Safeguarding Adults Return), this opportunity has reduced – the level of detail is significantly less, reducing the usefulness of the comparison and the first year was experimental and therefore potentially unreliable.

This section therefore provides the Harrow position last year with commentary based on the last set of national data and local intelligence:

- 1,227 alerts compared to 1003 in 2013/14, represented a growth of 22% locally. A growth in number remains positive and suggests that briefing sessions, publicity and training events are being successful in raising awareness of the issues
- 51% of Harrow alerts were taken forward as referrals (629 referrals), compared to 62% in 2013/14. It is difficult to be sure what percentage of alerts should meet the threshold for investigation although it certainly would not be 100%. Given the high increase in alerts it is possible that quite a significant percentage are dealt with by other means e.g. information/advice, care management or “root cause analysis” for pressure sores. As previously, both internal and external file audits continue to check that appropriate alerts are being taken forward to the referral stage
- repeat referrals in Harrow increased slightly from 10% in 2013/14 to 18% in 2014/15. The last known national figure was 18%, so Harrow is now in line with other boroughs. As stated in previous reports, too high a figure suggests that work is not being done correctly or thoroughly first time around, so this is an important indicator and one the Board will want to continue to monitor closely. The most recent independent file audit (for cases completed between September 2014 and March 2015) looked at repeat referrals and with one exception found that they were all for a new concern, which is reassuring
- completed referrals in Harrow (88%) are now broadly in line with the last available national figure of 81%. The safeguarding adults team in the Council tracks cases very carefully to ensure that there is no “drift”, however the introduction of Making Safeguarding Personal has slowed down the timescales because the user is in control of dates and venues for meetings etc
- in Harrow the female: male referral ratio at the end of 2014/15 was 65:35 which is very close to the last known national position of 61:39
- referrals for older people decreased slightly from 383 in 2013/14 to 363 in 2014/15, even so they remain the highest “at risk” group
- for adults with a physical disability the figure in Harrow last year was 53% compared to 66% in 2013/14. As indicated in last year's annual report it is important to note that in the statistics (as required by the Department of Health/ NHS Information Centre), service users (for example) who are older but also have a physical disability are counted in both categories.

It is therefore quite difficult to form a view about risks to younger adults whose primary disability is physical or sensory. The last national figure was 51%, so Harrow is now closer to that position

- mental health referrals increased slightly from 81 (13%) in 2013/14 to 103 (16%). This is still some distance away from the last national figure of 24%. Given that the main hospital site is located in Brent, it is possible that more in-patient statistics are counted in their data than in those generated by Harrow
- in Harrow the referral figure for people with a learning disability in 2014/15 was very slightly lower at 14% (88 cases) compared to 15% in 2013/2014. This remains lower than the last available national figure of 19%
- it is pleasing to note that the alerts from “BME” communities rose last year to 46% from 34% in 2013/14 – which is much more in line with the makeup of the Harrow population. The referral figure was 44% which is also positive, as it suggests that a proportionate number of alerts are progressed and people from “minority” communities are not being disproportionately closed before the investigation stage
- statistics showing where the abuse took place in Harrow remain broadly similar to 2013/14, with the highest percentage being in the service user’s own home (61%) and 21% in care homes (long term and temporary placements). It is positive that last year’s slight reduction in referrals from care homes has been sustained and at the time of writing this report there are no homes where a formal embargo is in place. Figures in other settings remain small e.g. 2% in an acute hospital (13 cases) and 5% in supported accommodation (30 cases)
- allegations of physical abuse (28%) and neglect (at 23%) were the most common referral reasons last year. The slight reduction in neglect cases (29% in 2013/14) is likely to be due to a different approach taken last year with pressure sores i.e. a root cause analysis being completed by NHS staff before a decision about the need for a safeguarding investigation was taken
- financial abuse (20%) and emotional/psychological abuse (22%) are the other significant figures which have each reduced by one percentage point
- in Harrow, social care staff e.g. “domiciliary care workers” (20%); “other family members” (30%) and “partner” (8%) were the most commonly alleged persons causing harm – these figures being very similar to those in 2013/14
- given the numbers of training and briefing sessions undertaken in recent years, it is always interesting to look at the source of alerts and this is the first time (following a request from the LSAB) that year on year comparison has been possible. Last year (as in the previous year) the highest number (20%) were from social workers/care managers. The other sources were: primary health care staff (12% - a small reduction on 2013/14); residential care staff (8% - also a small reduction on 2013/14); family (9% - a 1% reduction on 2013/14); secondary health care staff (16% - a 7% increase on 2013/14); mental health staff (1% - an 8% reduction); Police (5% - a 2% increase) and family/friend/neighbour (10% - a 2% reduction)

- outcomes in Harrow for the person alleged to have caused harm in relation to criminal prosecutions/Police action compared to the 2013/14 statistics of 10% have improved again slightly in 2014/15 to 12%. This indicates that the focus given to this area by the safeguarding adults team supported by the Police is positive, however progress is slow and work will need to continue in 2015/16
- outcomes for the adult at risk remain similar to previous years with the highest statistic being “no further action” at 23%.
The other outcome areas include: increased monitoring (12%); community care assessment and services (12%); management of access to perpetrator (6%); moved to different services (5%); referral to MARAC (2%); referral to advocacy (2%); referral to counselling or training (2%); management of access to finances (2%); application to Court of Protection (1%). All figures are broadly similar to 2013/14, with the exception of a significant reduction in “no further action” which suggests that more creative outcomes are being identified for victims

Headline messages - Deprivation of Liberty Safeguards (DoLS)

This is the third year that the LSAB Annual Report has included a full set of statistics for use of the Deprivation of Liberty Safeguards (DoLS). The use of these safeguards is important in the Board’s oversight of the prevention of abuse and as they are relevant for some of the most vulnerable people known to local services (and those that are placed out of borough), the LSAB needs to be reassured that they are carefully monitored.

There were 384 requests for authorisations last year (an increase of 370 on the previous year) of which 304 were granted. The very large increase followed the “Cheshire West” Supreme Court ruling in March 2014 which significantly changed the criteria requiring that any individuals meeting the “acid test” be assessed. There were 16 requests from hospitals compared to 5 in 2013/14.

It is now the case that anyone living in a care home or hospital without the mental capacity to consent to reside there and receive the care/support/treatment they may need, could be eligible for a DoLS authorisation.

Summary/Actions Required

In the majority of the performance statistics above, the Harrow position mirrors the last available national data and/or is broadly in line with the 2013/14 position. In some important areas e.g. Police action/criminal prosecutions; mental health referrals and alerts/referrals from BME communities, there was some improvement. Given that these were areas prioritised by the LSAB for 2014/15 this is a very positive outcome.

The action plan in this report (year two of the LSAB Strategic Plan 2014 – 2017) includes objectives to address the key messages from the statistical analysis.

2.3 Making a Difference – (progress on objectives for 2014/2015)

This section of the annual report looks at what difference the work of the LSAB made last year by reviewing progress on the priorities agreed for 2014/2015, as set out in the annual report for 2013/2014.

Theme 1 - Prevention and Community Involvement

The LSAB is confident that prevention of abuse of adults at risk is a high priority in Harrow

The LSAB's prevention strategy 2014 – 2017 ("Promoting Dignity and Prevention of Abuse") was formally agreed at the Board meeting in March 2014. 2014/15 was the first year of implementation which built on the work done from the previous plan. Examples of work in this area include:

Care providers ran events to mark Dignity Awareness Day (February 2015).

World Elder Abuse Awareness Day 2014 was marked with a Best Practice Forum on dignity and respect which was attended by 70 staff from a range of local organisations.

The Safeguarding Adults Services attended 4 of the "Safer Streets" events in 2014/15, speaking with members of the public about community safety issues for vulnerable people. Booklets and information were handed out, with the most popular being "The Little Book of Big Scams" produced by the Metropolitan Police and the Home Office.

Outcomes:

There were 61 alerts raised by friends/neighbours and family last year – and it is hoped that sustaining the numbers from the previous year was achieved as a result of the above activities.

Ensure effective communication by the LSAB with its target audiences

A formal Communications Plan for the LSAB was approved by the Board at the March 2015 business meeting. It aims to ensure that its target audiences across the whole community know about abuse and how to report it and that resources are used for publicity and awareness related events in the most time/cost efficient ways.

The LSAB's newsletter which commenced in 2013 continued throughout last year aimed at keeping all relevant individuals and organisations up to date with its work and any key issues that needed to be highlighted. The editions published (September and November 2013; January and March 2014) included topics such as: making safeguarding personal; statistical information; DoLS; loan sharks; Dignity Action Day; Fire Safety; Care Act; LSAB annual report 2013/14 and training information.

The Safeguarding Adults Service attended a wide range of community based events last year to raise awareness. This included several Safer Streets days (see above), an information event for older patients at the Elliott Hall primary care centre; Neighbourhood Champions briefings; and the "keep safe and well" event at Choices for All.

Outcomes:

The referrals from "BME" communities increased last year to 42% (44% of alerts) which is much more in line with the local demographic makeup of the borough.

The very positive arrangements between the Safeguarding Adults Service and the local Fire Service continued last year with 105 referrals for free home fire safety checks (an increase of 45 on the previous year).

Safeguarding Adults priorities are clearly referenced in wider community safety strategies e.g. Domestic Violence

Briefing sessions have been held for 16 more of the borough's Neighbourhood Champions (230 were briefed in 2013/14) who are the "eyes and ears" of the community on their individual street.

As in previous years, the safeguarding adults' contribution to the Council Tax leaflet (which goes to every household in the borough) featured "being a good neighbour", giving the example of distraction burglary and asking residents to be aware of vulnerable people in their street that might be targeted.

Contributions continued from the Safeguarding Adults Service to the Multi-agency Risk Assessment Conference (MARAC – domestic violence focus); Multi-agency Public Protection Arrangements (MAPPA – public safety focus); Prevent (prevention of terrorism focus), and Anti-social Behaviour Group (ASBAG – anti social behaviour focus) - ensuring effective information sharing and communication where vulnerable adults are victims or perpetrators.

Outcomes:

For Operation Conker in September 2014, the Harrow Police were interviewed and answered questions from the public on local community radio about the campaign which was focused on anti-burglary products and making your home looked lived in. The interview included reference to the most vulnerable people in the borough and related safeguarding implications.

There is evidence that the Harrow LSAB's work is influenced by user feedback and priorities

The independent social worker (who interviews randomly selected service users after the safeguarding investigation is concluded) continued last year to ask whether people knew how to report abuse and understood what would happen next. She reported that the majority of users were very happy with the outcome of the investigation. Staff continue to issue the easy to read publication "what happens after I report abuse?" however some people still reported being unclear about the process. New approaches under the "Making Safeguarding Personal" project will embed even further the requirement to start the process being clear about the user's views and to check throughout that they understand what's happening.

Service users attended the LSAB Annual Review Day again last year. They presented a DVD about what was important to them in keeping safe and provided challenge to Board members:

"we are frightened to talk to the Police"

"there is bullying and swearing at the Harrow Bus Station so it's a scary place"

"we are worried about keeping safe on Facebook and about cyber bullying"

"we are worried about nasty messages on mobile phones"

"why haven't more people with mental health difficulties reported abuse?"

Outcomes: as a result the LSAB did the following:

- there was a “Keep Safe in Harrow” session at Choices last December. 70 people came and the Borough Police Commander (Simon Ovens) was there with some of his officers. He gave lots of advice about keeping safe e.g. that the Police have sophisticated technology and excellent links with mobile phone companies, so if users got nasty messages they should keep them and tell the Police. Lots of people talked to the Police at the event and afterwards said that they wouldn’t feel so worried about asking a Policeman for help
- more work has been done to set up a Harrow Safe Place scheme. Choices For All students are helping and are visiting shops, churches and cafes near the Bus Station jointly with the local Police (as the first priority area) asking them to sign up
- there were more articles in “News and Views” e.g. about fire safety and keeping safe on-line
- CNWL Mental Health NHS Trust carried out a lot of work last year to get information out for people to look at. 3% more people reported abuse last year than the year before

Theme 2 – Quality and Performance Review

The LSAB oversees effective practice and ensures continuous improvement

Performance management reports were presented to the LSAB at all of its meetings in 2014/2015. Following the Peer Review recommendations members were asked to provide input to these reports, however there is still more to do in this regard.

A provider concerns section was added to the performance reports last year so that important information could be shared amongst the LSAB’s member organisations.

Peer Review

The Peer Review challenge of safeguarding adults work in Harrow was commissioned by the Council with the full support of the Local Safeguarding Adults Board. This had concluded in 2013/14 with the outcome “good to great”, so last year focused on implementation of the action plan to address its recommendations.

Outcomes:

As a result of implementing the Peer Review recommendations examples of outcomes include:

- the Access Harrow “first contact” message for people ringing with concerns was simplified with a specific choice for safeguarding adults
- a “mystery shopping” exercise was commissioned by the LSAB which was carried out by users (supported by Mind in Harrow) in September 2014 with feedback provided to both Access Harrow and CNWL
- more briefing sessions took place at GP surgeries, although this did not result in a further increase in alerts from primary care services

File Audit

Both internal and external (independent) audits of casework continued in the Council's Safeguarding Adults and DoLS Service during 2014/15 with headline messages presented to the LSAB. A total of 105 cases were reviewed with the key focus being on learning from the audit findings and providing feedback to relevant front-line staff and managers.

Outcomes:

Changes were made to the multi-agency training programme and also to the specific sessions for front-line staff. For example, a bespoke course on "unwise decisions" made by vulnerable adults with capacity who choose to put themselves at high risk was commissioned and delivered by a specialist trainer.

Statistical data improves understanding of local patterns enabling improved planning of responses to allegations

The LSAB has received statistical reports at each of its meetings, including the full year position for 2014/2015 at its Annual Review/Business Planning Day this June. In addition, the new Strategic Plan for 2014 – 2017 included trend analysis looking back over the previous 3 years and all reports included comparison with the national position wherever possible.

Some targeted briefing sessions took place, including for groups not previously visited before including: an Asian day centre for older people; Age UK volunteers; RSPCA staff and volunteers; the Wiseworks Centre for people with mental health difficulties; MIND in Harrow users and volunteers.

Outcomes:

On-going analysis by the LSAB of relevant statistical information has enabled adjustments to be made to training events and also to briefing sessions. The most up to date comparisons with the national data shows a positive picture for the work in Harrow with areas identified for future work covered in the action plan at section 5 of the attached report.

Theme 3 –Training and Workforce Development

The LSAB is confident that the local workforce is competent in relation to safeguarding adults' practice – with particular focus on learning from file audits and management reviews e.g. use of the Mental Capacity Act

Multi-agency training remains a high priority for the LSAB. The existing programme is competency based.

As a supplement to the formal training programme, the Safeguarding Adults Service also ran briefing sessions across a range of agencies, offering most at the organisation's premises. Full details of the training statistics are at Appendix 2 of the attached report.

Headline messages

- a total of 2143 people received some training in 2014/2015

- 1,115 staff received formal training – this was the same level as in the previous year - the breakdown of formal training was: 224 Council staff (an increase of 47 from 2013/14); 67 NHS staff (an increase of 1 from 2013/14); 9 “other statutory” staff including the Police (a decrease of 9 from 2013/14); 565 private sector staff (an increase of 296 from 2013/14) and 250 voluntary sector staff (an increase of 156 from 2013/14)
- a refresher was organised for elected Councillors and was attended by 35 individuals (an increase of 23 on the previous year)
- 1,028 people attended sessions run by the Safeguarding Adults Service including some new groups e.g. RSPCA staff/volunteers and local Dentists
- a total of 209 staff attended 4 multi-agency best practice forums in 2014/15 on “dignity and respect in care” for WEAAD 2014; “Keep Safe and Well” (joint with the Police and Choices For All); “Recognising the Links” (joint with the LSCB and RSPCA); and “Unwise Decision Making/Mental Capacity”
- there was a 21% reduction in individuals booked on to formal training courses cancelling or failing to attend, a significant decrease following the LSAB decision to charge for non-attendance
- this was the third year for the e-learning course which allows some front line staff to access training that they might otherwise not be able to e.g. GP trainees. A total of 66 staff used the tool last year

Outcomes:

Each year the multi-agency training programme and Best Practice Forums are developed from the evaluation and experience of the previous year’s sessions. They also cover the areas that successive independent audits of safeguarding cases and the Peer Review suggested for further improvements in staff knowledge and/or confidence. An on-going high priority was given to mental capacity training, and new topics included “train the trainer” so that organisations can run more in-house sessions themselves, and “what I need to know as the lead for my organisation?” – both being well received by attendees.

Theme 4 - Policies and Procedures/Governance

Ensure production of the LSAB Annual Report and presentation to relevant accountable bodies

Following its formal agreement at the LSAB annual review day in 28th June 2014, the report was presented to the Council’s Scrutiny Committee in July 2014, the Health and Wellbeing Board in September 2014 and subsequently to all partner agencies’ Executive meetings or equivalent

The LSAB Annual Report for 2014/2015 was formally agreed by the Board at its annual review/business planning event in June 2015. This day was facilitated by Dr Adi Cooper (a national lead for safeguarding adults) who had challenged the Board and found it had solid arrangements with no complacency and therefore was well placed to take on its statutory role.

Subsequently the LSAB annual report is being presented to the Council’s Scrutiny Committee (October 26th 2015) and partner agencies’ Executive meetings or equivalent.

Outcomes:

As in previous years, following the decision to sign off the annual report by the LSAB last June a “key messages for staff” version of the report was produced for the second time and an easy to read version was put on the Council’s website – aiming to ensure that the Board’s work is as accessible as possible to both staff and the public.

The general public is aware of safeguarding issues & the work of the LSAB

As stated earlier in this report, the Safeguarding Adults Service attended a wide range of community based events last year to raise awareness. This included several Safer Streets days (see above), an information event for older patients at Elliott Hall primary care centre; Neighbourhood Champions briefings; and the “keep safe and well” event at Choices for All. The information in the Council tax leaflet (pushed through every letter box) and the community radio coverage were further examples of the service trying to reach out to the general public. Other broader campaigns included articles in the Fire Safety magazine “fire is not the only danger you face” and an article in “Homing In” the Council’s Housing Department newsletter for all tenants.

The safeguarding adults’ website was kept up to date and has a section for easy to read information.

LSAB (jointly with LSCB) takes a “family first” approach to its work

The joint protocols developed in 2013/14 by the LSAB/LSCB sub-group and formally launched by the chairs of the 2 Boards in October 2013 were refreshed last year.

Work between the two Boards continued with (for example) a joint best practice forum on “recognising the links” at which the RSPCA presented information about the growing recognition of risks for children or vulnerable adults in homes where animals are abused and vice versa. Wherever appropriate, meetings where there are common issues are held jointly e.g. the bi-annual meeting with the London Ambulance Service.

Outcomes:

The independent/external file auditor reported again last year that workers in the safeguarding adults team were demonstrating confidence in a “family first” approach, stating that all the relevant (audited) cases had been appropriately referred to Children’s Services. In the most recent audit there were also examples of good practice highlighted where joint work on complex cases had produced a more positive outcome for the user.

The LSAB has strategic oversight of local safeguarding adults work

Year one actions from the LSAB Strategic Plan 2014 – 2017 were implemented with an exception report at each Board meeting. This section of the annual report covers the work carried out and some of the outcomes achieved as a result.

Theme 5 – Partnership with the Local Safeguarding Children’s Board (LSCB)

Common joint safeguarding needs are identified in terms of Domestic Violence and actions prepared to address gaps, including mapping key pathways to MARAC

Independent file audit last year also reviewed cases where domestic violence was a factor. The LSAB was reassured by the finding that referrals were being routinely made to MARAC and it is becoming much more common for a worker or manager from the Safeguarding Adults/DoLS Service to attend the meetings for specific cases. Some audited cases also recognised work done with both the Looked After Children’s and Children with Disability Teams.

Outcomes:

Better outcomes for young adults in specific cases where joint work was effective.

The LSAB (joint with LSCB) takes a “family first” approach to its work

See above. In addition, a practitioner representative from the Council’s Safeguarding Adults/DoLS Service and relevant NHS staff provide information for the daily MASH (Multi-agency Safeguarding Hub) meeting where threshold decisions about referred children are discussed. This ensures appropriate information sharing and therefore decisions are taken in the most informed way possible.

2.4 LSAB Objectives for 2015/2016

The LSAB’s objectives for 2015/2016 build on those established the previous year and address the priorities identified in its new Strategic Plan for 2014 - 2017. The priorities include: specific projects to tackle wider community safety issues as highlighted by users (e.g. hate crime; safe travel on public transport; distraction burglary/doorstop crime; safe place scheme and home fire safety); to formally evaluate the multi-agency and single agency training programmes with a focus on outcomes for participants in practice; for the LSAB to agree an effective approach to fulfil its responsibilities for overseeing work on self-neglect; and to consider all possible areas for joint approaches with the LSCB e.g. in relation to safeguarding training, work with schools and sexual exploitation.

Section 3 - Financial Implications

The revenue cost of the Safeguarding Adults Service (and related activities e.g. publicity) is outlined in the Annual Report under the “LSAB Resources” section. The increased activity during 2014/2015 resulted in additional costs incurred by the Safeguarding Adults and DoLS Service, however this was contained within the overall adult social care budget.

The additional increase in cases (30%) already seen in 2015/16 following the introduction of the Care Act has required the Council to identify funds for an additional wte qualified social worker for the Safeguarding Adults Team.

As highlighted last year, the other financial implication arising from this report relates to the Supreme Court judgement in the DoLS work area.

There were 384 requests for authorisations last year (an increase of 370 on the previous year) of which 304 were granted. The numbers for 2015/16 are projected to be around 700 cases.

The average (direct) cost of an assessment is £430 (the assessment costs) however this does not factor in the office based administration and coordination (indirect) costs.

The Council has received a financial contribution for 2015/16 from the Department of Health (DoH) of £104K in recognition of the extremely high numbers of cases, however this is inadequate to cover the totality of the rising numbers so the Council has had to fund the remaining cost pressure. Whilst in previous years costs have been contained within the Adult social care budget, the increasing care cost pressures together with the reduced budget to deliver MTFs savings to contribute towards council budget gap are likely to influence the ability to contain these pressures moving forward.

It is also not clear at this stage whether the DoH grant is one-off or will be recurring in subsequent years.

The expectation is that the outcomes can be delivered within the annual financial envelope, however this continues to prove challenging where the pressures are demand led and of a statutory nature.

NB. It is important to note that there are statutory requirements to carry out DoLS assessments and the timescales in which they must be completed are set out under the DoLS framework i.e. that urgent referrals must be assessed within 7 days and standard authorisation requests within 21 days.

There is consequently no option but to process the cases as soon as they are referred to the Council, including use of independent staff where required (psychiatrists) or to meet resource gaps (availability of qualified Best Interest Assessors).

Section 4 - Performance Issues

The report is primarily concerned with performance and contains analysis of the Harrow LSAB statistics, both as they relate to the previous year and also to national data.

Section 5 - Environmental Impact

There is no environmental impact arising from this report.

Section 6 - Risk Management Implications

Risk included on Directorate risk register? Yes

Separate risk register in place? No

Potential risks:

Failure to ensure local safeguarding adults' arrangements are robust could lead to a serious untoward incident e.g. death of a vulnerable person. Failure to implement the statutory DoLS guidance could lead to a legal challenge about unlawful deprivation of a vulnerable person in a care home or hospital.

Section 7 - Equalities implications

The LSAB considers local safeguarding adults statistics at each Business Meeting and at its annual review/business planning event, with particular emphasis on ensuring that alerts (now “concerns”) are being received from all sections of the community. The new Strategic Plan for 2014/17 has been developed such that the LSAB will monitor the impact of abuse in all parts of Harrow’s community and will focus its awareness raising sessions in areas where low/no referrals have been received in the previous period. Safeguarding adults’ work is already focused on some of the most vulnerable and marginalised residents of the local community and the 2014/15 statistics demonstrate that concerns are coming from all sections of the Harrow community.

Section 8 - Corporate Priorities

The Council’s vision:

Working Together to Make a Difference for Harrow

This report primarily relates to the Corporate priorities of:

- making a difference for the vulnerable
- making a difference for communities

Section 9 - Statutory Officer Clearance

Name: Donna Edwards (comments are included in section 3)

on behalf of the*
Chief Financial Officer

Date: 3rd September 2015

Ward Councillors notified:

NO - the report affects all Wards

Section 10 - Contact Details/Background Papers

Contact: Visva Sathasivam (Head of Adult Social Care)
(Direct Dial: 0208 736 6012)

Background Papers: Harrow Local Safeguarding Adults Annual Report 2014/2015