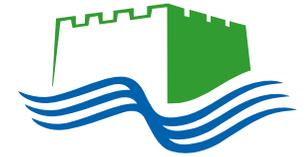




Safeguarding Adults Board

Making Safeguarding Personal



TOWER HAMLETS



Strategy 2019-24

Safeguarding is everyone's responsibility



INVESTORS IN PEOPLE | Silver



Barts and The London 
NHS Trust



METROPOLITAN POLICE

TOTAL POLICING



Tower Hamlets
Clinical Commissioning Group

Foreword - Independent Chair Christabel Shawcross



I am delighted to present this new five year strategy for the London Borough of Tower Hamlets Safeguarding Adults Board (SAB). The local authority, adult social care, health, police, fire,

housing and voluntary and community sector partners have all contributed to an ambitious strategy to reduce the abuse of adults at risk.

The strategy has been developed through a programme of research and through engagement with residents and partners. It aims to improve ways of protecting as well as preventing adults at risk from being abused. Our analysis has highlighted the importance of partner agencies learning from local and national Safeguarding Adult Reviews and reviews that occur following the death of individuals with a learning disability (known as LeDeRs). It has highlighted

the importance of the Board using more qualitative as well as quantitative data to fully understand and react to changes related to safeguarding. The types of abuse do not change but the intensity and methods and location do, and this requires agile responses to new issues such as cuckooing, financial scamming through the internet and coercive control.

Through talking to residents, service users and carers about this strategy, two clear messages emerged: Firstly, the importance of awareness-raising to ensure that more people understand what safeguarding is and what to do about it; and secondly, the importance of partner organisations working effectively with one another.

In order to capture what we have found in research and what we have heard from residents, we have based the strategy around the following six principles:

- Empowerment
- Prevention
- Proportionality
- Partnership
- Protection
- Accountability

These principles are drawn from 'Making Safeguarding Personal', which is a nationally recognised approach to tackling adult abuse and neglect built around the individual at risk. What this means is that individuals at risk of abuse are at the centre of initiatives to develop awareness of what abuse is, how to get help, and have protection that meets with their wishes and situations.

As Independent Chair I will be helping to lead and oversee implementing the strategy on an annual basis and giving updates on progress, issues and achievements in the SAB annual report.



Foreword - Councillor Amina Ali, Cabinet Member for Health and Adult Services



I am pleased to endorse the Safeguarding Adults Board Strategy. The strategy sets out a clear commitment from partner agencies to prevent and tackle adult abuse and neglect,

and is ambitious in what it seeks to achieve.

Abuse and neglect can have a devastating impact on people's lives, and there are a complex set of issues that need to be addressed in order to tackle safeguarding at a strategic level. Older people and people with a disability are at an increased risk of abuse and neglect, and negative social attitudes towards old age and disability are part of this picture. People who feel lonely or who are socially isolated may be at a

greater risk of things like financial scams. Indeed, the wider determinants of health and wellbeing including relationships, education, housing, work and income all form part of the wider context of safeguarding.

This strategy sets out the Board's priorities to prevent and tackle adult abuse and neglect, recognising these wider issues that impact on the lives of residents. There is a huge programme of work in place that looks at these issues, from the council's Housing Strategy to our Ageing Well Strategy. In this way, the Safeguarding Adult Board Strategy is part of our ongoing commitment to improve health and wellbeing and to build strong, resilient and safe communities.

1. Legal Framework for Safeguarding Adults

The Mental Capacity Act 2005:

Introduced to protect and empower people who may lack the mental capacity to make their own decisions about their care and treatment

The Deprivation of Liberty Safeguards 2009:

Provides a legal framework to protect those who lack the capacity to consent to the arrangements for their treatment or care

The Care Act 2014:

Places the duty on Local Authorities to carry out an assessment of anyone who appears to require care and support, regardless of their likely eligibility, and articulates statutory requirements in relation to safeguarding

The Care Act 2014 also made it a statutory requirement for local authorities to establish a Safeguarding Adults Board (SAB), a partnership board whose core membership should include the local authority, police and health.

2. How we developed the strategy

How did you develop this strategy?

- We talked to a number of resident groups between November 2018 and January 2019, many of whom have experience of adult social care. This includes the Carers Centre, Older Peoples Reference Group and the Learning Disabilities Partnership Board, who have all directly contributed to the strategy.
- Partners from across the Safeguarding Adults Board (SAB), representing organisations such as the police, council, health and the Voluntary and Community Sector have also provided their opinions, directly informing this strategy.
- Evidence, data and research at a national, regional and local level was analysed and used to inform this strategy.

What were the main messages from residents, service users and professionals?

- Service users and professionals all reiterated the priority of Making Safeguarding Personal, which is reflected throughout the strategy.
- There was a strong emphasis on the need to build on previous awareness raising campaigns around safeguarding. Service users felt that safeguarding was still an unknown term with many residents, especially those residents that are 'hard to reach'.
- Identifying and tackling new forms of abuse, such as financial scams, cuckooing

and 'mate crime' was also an important message that came across through service users and professionals

- Throughout these conversations, there was a reoccurring theme around strengthening the working relationship between partners. This is reflected strongly within the priorities of the strategy.



3. Why we need a safeguarding strategy

This page tells you about why we need a strategy; outlining the scale of the issue, the impact of safeguarding as well as who is at an increased risk of abuse and neglect.

One of the duties of the Safeguarding Adults Board is to develop and publish a strategic plan setting out how they will meet their objectives and how their member and partner agencies will contribute.

Tower Hamlets is the 10th most deprived borough in the country. There is evidence suggesting there is a strong association with a person's socio-economic circumstances and the chance of experiencing abuse/neglect, - families with low economic capacity are at greater risk.

In one survey, 4% of older people said they had experienced mistreatment from someone they knew in the last year (Action on Elder Abuse Prevalence Study, 2007).

People with a learning disability, physical disability or mental health issue are at an increased risk of abuse or neglect
(Disability and domestic abuse report by Public Health England, 2015).

People who lack the mental capacity to make their own decisions need particular safeguards to make sure they are not subject to abuse of neglect.

The number of concerns people have raised about safeguarding has been rising, reflecting the potential scale of the issue as awareness is raised. In Tower Hamlets, the number of concerns raised per month has almost doubled from an average of 60 in 2016-17 to 114 in 2018-19.

Although we think awareness is increasing, there are still a number of barriers that may stop people coming forward for help if they are experiencing abuse or neglect. The true scale of the issue is likely to be larger.

Over the past 3 years, neglect and acts of omission have been the largest single type of abuse investigated in Tower Hamlets. In 2016-17, this was at 36%, falling slightly to 32% in 2017-18. The data for the first 3 quarters of 2018-19 indicate a similar story. It is worth noting that within this, 'self-neglect' has been steadily increasing.

About a fifth of safeguarding investigations in Tower Hamlets relate to financial abuse (22% in 2017-18, 20% the year before).

A further fifth of safeguarding investigations in Tower Hamlets relate to physical abuse (18% in 2017-18, 20% the year before).

Crime is the top concern of Tower Hamlets residents, with 41% rating it as a key concern (2018 Annual Residents Survey). Safeguarding can be seen within this picture.

The impact of abuse or neglect can be devastating. In one survey, 76% of those asked said that the effect of the mistreatment was serious. The most commonly reported effects were emotional (such as feeling angry or upset), and social (for example feeling cut off from family and friends). (Action on Elder Abuse Prevalence Study, 2007).

4. Challenges

- ▶ **Resources:** A number of public services face challenges in terms of how to meet an anticipated rise in demand for care and support in the context of restricted resources. This has resulted in significant changes in how we deliver services, as well as changes to the structures of partner organisations. How we prevent and tackle abuse and neglect in this changing context is an ongoing challenge.
- ▶ **An ageing population:** Residents over the age of 65 tend to have a higher dependency of need with regards to care, and safeguarding issues tend to be proportionately more prevalent in this group. In Tower Hamlets, approximately half the safeguarding concerns and investigations in 2018 related to people aged 65 or over. Although we have a comparatively small number of older residents in Tower Hamlets compared to other boroughs (6% of our population are over the age of 65, lower than boroughs such as Greenwich and Newham¹), this number is expected to grow by 39% over the next ten years.

- ▶ **Diversity and a changing borough:** The borough is ranked as the 16th most ethnically diverse local authority in England in terms of the mix of different ethnic group populations. More than two thirds of our residents belong to a minority ethnic group². We are also a borough where a significant proportion of residents are transient: relative to the size of our population, we have the 11th highest population rate turnover in the UK³. Although this welcoming nature and vibrancy in culture is something which Tower Hamlets is celebrated for, it also brings potential challenges in relation to safeguarding in terms of ensuring that everyone – including those with English as

a second language, those who may not be familiar or comfortable with statutory services, and those who may be new to the borough – are aware and empowered to prevent and tackle abuse.



¹ ONS, 2017 Mid-Year Estimates

² 2011 Census

³ ONS, 2017 Mid-Year Estimates

► Emerging trends

Addressing emerging and changing safeguarding trends is an ongoing challenge for the Safeguarding Adults Board. As safeguarding risks continue to evolve, it is vital that the strategy is able to adapt to such changes to ensure our response remains contemporary and relevant.

The increasing use of online platforms such as social media sites has opened up a new area for safeguarding risks. Within the national context, we have seen a rise of online abuse such as cyber bullying. The Safeguarding Adults Board Strategy in Tower Hamlets has to ensure it remains proactive in identifying online abuse at an early stage, and flexible in responding to such concerns.

There are some risks which are associated with cultural practices; these include female genital mutilation, forced marriage and honour based violence. Other safeguarding issues such as human

trafficking, cuckooing (where drug dealers take over the home of a vulnerable person in order to use as a base for drug dealing) and county lines (where vulnerable individuals are exploited to traffic drugs) have emerged from within a criminal setting, and require a response which is based on partnership working, with other partnership Boards such as the Community Safety Partnership. In recognition of the importance of this partnership, this strategy is consistent with the borough's Violence Against Women and Girls Strategy, the Community Safety Partnership Plan and the Violence, Vulnerability and Exploitation Strategy (currently under development).

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5. The response so far in Tower Hamlets

This strategy builds on the achievements of the previous safeguarding strategy, from 2015 to 2019. Just some of the achievements of the Safeguarding Adults Board (SAB) and partner agencies over the previous four years are listed below:

We have run resident-facing campaigns and events every November as part of Safeguarding Month.

In summer 2017, a 'Keeping Safe' event was well attended by people with a learning disability. In November 2018, the Community Engagement sub group ran safeguarding awareness sessions throughout Tower Hamlets, which was attended by approximately 60 people.

In the vast majority of cases, safeguarding investigations result in the risk being reduced (in 2017-18, this was true in 91% cases).

In 2018, advocacy was provided in 95% of investigations where a person lacked mental capacity.

In 2017-18, the local authority employed specialist hoarding project workers to help tackle this emerging issue.

In 2016, East London Foundation NHS Trust introduced the Routine Enquiry Domestic Violence training course for frontline staff members.

In 2017 a High Risk Transition Panel started, enabling agencies to come together and look at cases where there is a potentially high risk related to safeguarding.

In 2017, an independent victim support service was newly commissioned by the council to help safeguard over 400 high risk victims of domestic abuse.

In 2017, the London Fire Service delivered Home Fire Safety visits to more than 80,000 households in the capital, supporting a number of vulnerable adults through the process.

In 2017, the Metropolitan Police created a dedicated Domestic Violence Protection Order Case Worker post to provide support to vulnerable victims in Tower Hamlets.

The London Amulance Service produced short films on dementia and safeguarding for people in care homes or their own properties.

In 2018, 63.5% of adult social care users said they felt as safe as they wanted to - a steady increase from the previous year.

In 2017, the Council and Clinical Commissioning Group pooled their resources to fund a Safeguarding Strategy Manager post.

A huge programme of staff training has ranged from workshops, to conferences, to a theatre performance on modern slavery in 2018.

In 2017, Barts Health NHS Trust delivered 242 training sessions on DoLs and mental capacity, reaching 2,500 members of staff.

The proportion of adults with a learning disability having an annual health check increased in 2017-18 from 36% to 74%.

6. Our priorities for 2019-24

The priorities in the Safeguarding Adults Board Strategy are built around the six principles of Making Safeguarding Personal. Making Safeguarding Personal is a nationally recognised approach to tackling adult abuse and neglect, which focuses on the outcomes of safeguarding work.

EMPOWERMENT

What we want to achieve:

- 1) People are helped to protect themselves and each other from abuse
- 2) Agencies involve people in safeguarding processes that are made personal to them
- 3) Staff members are proactive and able to have meaningful, engaging conversations with people
- 4) People are offered appropriate support through safeguarding processes, including advocates
- 5) People who have been through safeguarding processes feel safer as a result

PREVENTION

What we want to achieve:

- 1) People will know how to identify and avoid abuse
- 2) The reasons behind abuse and neglect are tackled, including loneliness and isolation
- 3) The reasons behind repeat referrals are tackled
- 4) New forms of abuse and neglect are identified and tackled at an early stage
- 5) The wider determinants of wellbeing that impact safeguarding are addressed (including work on poverty, domestic abuse, relationships, housing and employment)

PROPORTIONALITY

What we want to achieve:

- 1) Individuals will feel supported to make informed decisions on risk taking and the level of intervention that they receive
- 2) Everyone going through a safeguarding concern is asked what matters to them and what the outcomes they want to achieve
- 3) The proportion of cases where people's objectives are achieved increases
- 4) Individuals transitioning to adulthood (or transitioning through another significant change in their lives) are supported and safeguarded from abuse, exploitation and neglect

EMPOWERMENT PREVENTION PROPORTIONALITY PROTECTION PARTNERSHIP ACCOUNTABILITY

PARTNERSHIP

What we want to achieve:

- 1) Partners across health, care, housing and the justice system work together to prevent and tackle abuse and neglect
- 2) Partners share their evidence and performance and analyse it together to learn and make continual improvements
- 3) Partnership Boards and the structure in place to safeguarding children, work together to identify safeguarding trends
- 4) Community and voluntary sector organisations influence services and strategies through co-delivery and co-production
- 5) Partners effectively implement multi agency safeguarding procedures

PROTECTION

What we want to achieve:

- 1) Safeguarding practice is continually strengthened
- 2) Staff members are able to identify and manage risk
- 3) Financial scams and other organised exploitative activity is disrupted and prevented
- 4) People, including hard-to-reach groups, know where to go for help

ACCOUNTABILITY

What we want to achieve:

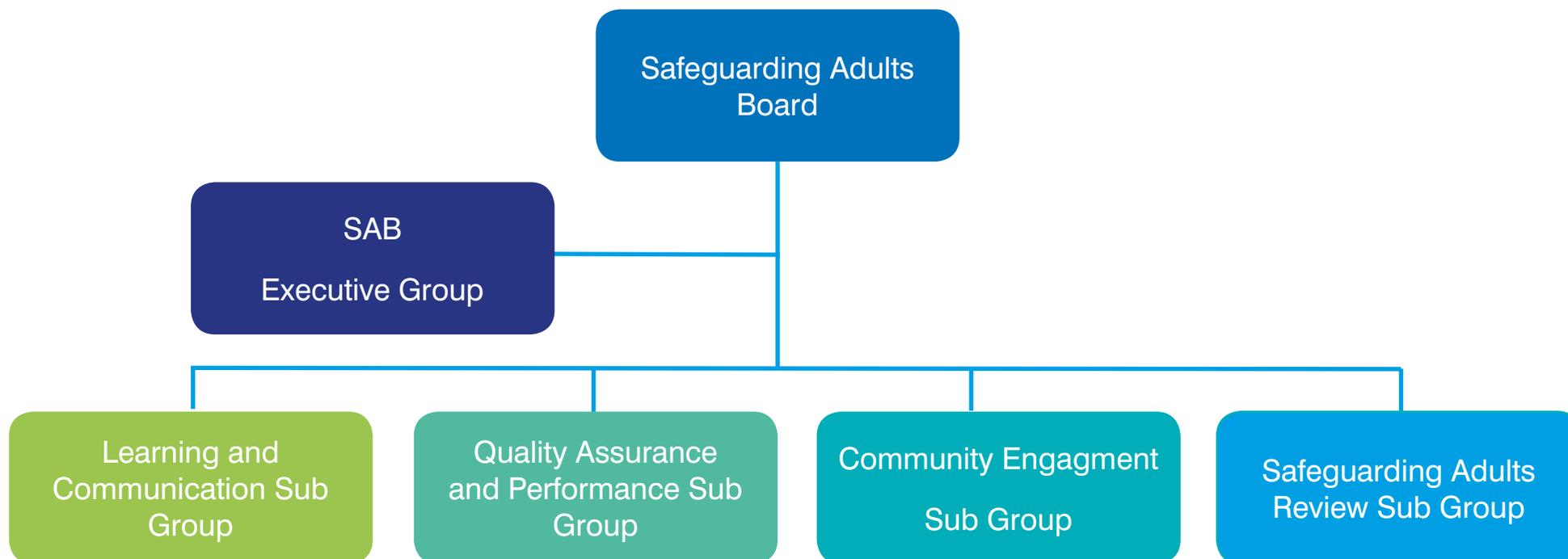
- 1) Partners learn lessons from Safeguarding Adult Reviews, Learning Disabilities Mortality Reviews, Domestic Homicide Reviews, audits and more.
- 2) Service users, carers and patients feel empowered and able to influence service delivery
- 3) Consultation and co-production with service users and carers become routine

EMPOWERMENT PREVENTION PROPORTIONALITY PROTECTION PARTNERSHIP ACCOUNTABILITY

7. How we will make this happen?

The Tower Hamlets Safeguarding Adults Board (SAB) currently has four sub groups that assist the board in meeting its obligations. However, the board recognises the need to remain flexible and adaptive to emerging issues, and that includes ensuring that the sub groups can adapt and change over the course of the strategy. Although this might be the case, we would ensure that the core themes of 'community engagement', 'learning and communication' and 'quality assurance and performance' are reflected and addressed throughout the SAB structure.

The sub groups are currently chaired by members of the SAB, and are held regularly throughout the year. The Safeguarding Adults Review (SAR) sub group will focus on ensuring that the SAR process is effective and will also undertake any thematic reviews of SARs. The remaining three sub groups that sit alongside it will lead on the actions needed to achieve the strategic priorities.



The Safeguarding Adults Board needs to work with other strategic partnerships in the borough in order to be successful. Key amongst these are the Health and Wellbeing Board, the Community Safety Partnership Board and the Tower Hamlets Safeguarding Children's Partnership.

Learning and Communication Sub Group

What we will do:

- 1) Work with staff across all partner agencies, including staff in health, care, housing and the justice system
- 2) Provide staff training, supervision, peer support and practice groups that have a focus on 'Making Safeguarding Personal'
- 3) Pool budgets across partners and utilise Tower Hamlets Together to commission a joint training package
- 4) Undertake a thematic review on how loneliness and isolation is impacting on safeguarding for older people in relation to financial abuse
- 5) Organise a staff safeguarding best practice event as part of safeguarding month, themed around having meaningful and difficult conversations
- 6) Develop the London Borough of Tower Hamlets website as a better resource for staff and residents on safeguarding
- 7) Undertake a review on the governance of the Safeguarding Adults Board; including board membership and how the board can strengthen links with other groups and strategies
- 8) Utilise the multi-disciplinary high risk transition panel to support young people transitioning to adulthood and vulnerable adults where there are high risks of serious harm and difficulties transitioning to services that meet their needs
- 9) Ensure social work staff are able to work across departments to identify young people at risk and ensure that appropriate safeguards are in place, working with families and networks to reduce risks

Quality Assurance and Performance Sub Group

What we will do:

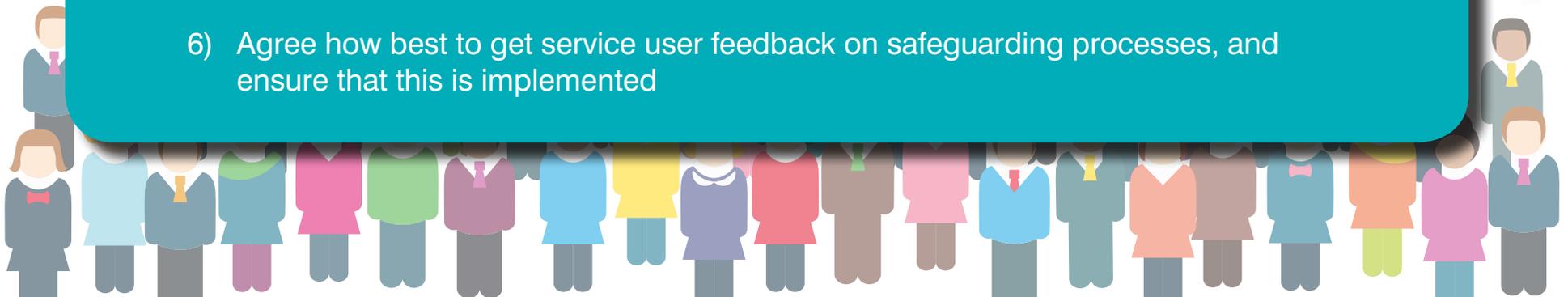
- 1) Analyse findings from audits, performance data, feedback, Safeguarding Adult Reviews and Learning Disabilities Mortality Reviews
- 2) Look at safeguarding concerns that are not turned into section 42 enquiries
- 3) Undertake a deep dive analysis if any trends or spikes in activity are identified
- 4) Develop a comprehensive multi-agency dashboard and audit programme
- 5) Carry out further analysis on the interplay between housing and safeguarding in Tower Hamlets
- 6) Each partner will carry out an annual assessment looking at their safeguarding practices
- 7) Conduct a review of the multi-disciplinary high risk transition panel – including gathering insights from service users - to identify how the panel and transition process can be improved



Community Engagement Sub Group

What we will do:

- 1) Identify the most appropriate organisation to support individuals during and post care
- 2) Identify our 'hard-to-reach' and 'easy to ignore' groups and target safeguarding awareness materials towards them
- 3) Carry out market-style research on where residents would go if they were worried about abuse
- 4) Organise a borough-wide, resident-facing publicity campaign to raise overall awareness of safeguarding, including new leaflets and posters
- 5) Coproduce Safeguarding Adult Board-related strategies and policies with residents and service users
- 6) Agree how best to get service user feedback on safeguarding processes, and ensure that this is implemented



8. Other strategies and plans that are linked to this

This strategy has close ties to the following strategies and plans in Tower Hamlets:

- The Community Safety Partnership Plan
- The Health and Wellbeing Strategy
- The Children and Families Plan
- Violence Against Women and Girls Strategy
- Violence, Vulnerability and Exploitation Strategy (currently under development)
- The Substance Misuse Strategy
- The Mental Health Strategy
- The Learning Disability Strategy
- Ageing Well Strategy
- The Autism Strategy
- The Special Educational Needs and Disabilities Strategy
- The Suicide Prevention Strategy
- Housing Strategy
- Homelessness Strategy

There are a number of cross cutting issues such as domestic abuse, mental ill health and violence against women and girls that require a response which links in with the work that is going on with other partnership boards.

We will work with other strategic boards and with an awareness of relevant strategies, to ensure that resources are put to the best possible use, and that shared issues are addressed collaboratively.



9. Glossary

Abuse: includes physical, sexual, emotional, psychological, financial, material, neglect, acts of omission, discriminatory and organisational abuse.

Advocacy: support to help people say what they want, secure their rights, represent their interests and obtain services they need. Under the Care Act, the local authority must arrange for an independent advocate to represent and support a person who is the subject of a safeguarding enquiry or a safeguarding adult review if they need help to understand and take part in the enquiry or review and to express their views, wishes, or feelings.

Care Act 2014: came into force in April 2015 and significantly reforms the law relating to care and support for adults and carers. This legislation also introduces a number of provisions about safeguarding adults at risk from abuse or neglect. Clauses 42-45 of the Care Act provide the statutory framework for protecting adults from abuse and neglect.

Care Programme Approach (CPA): an approach which requires health authorities, in collaboration with social services departments, to put in place specified arrangements for the care and treatment of people with mental ill health in the community.

Clinical Commissioning Group (CCG): created following the Health and Social Care Act in 2012, and replaced Primary Care Trusts on 1 April 2013. They are clinically-led statutory NHS bodies responsible for the planning and commissioning of health care services for their local area



Community Safety Partnership (CSP): a strategic forum bringing agencies and communities together to tackle crime within their communities. Community Safety Partnerships (CSPs) are made up of representatives from the responsible authorities; these are Police, police authorities, local authorities, Fire and Rescue authorities, Clinical Commissioning Groups and Community Rehabilitation Companies and the National Probation Service.

Deprivation of Liberty Safeguards (DoLS) 2009: aims to make sure that people in care homes and hospitals are looked after in a way that does not inappropriately restrict their freedom. Part of the Mental Capacity Act 2005.

Domestic Homicide Reviews (DHR): a multi-agency review of the circumstances in which the death of a person aged 16 or over has, or appears to have, resulted from violence, abuse or neglect by a person to whom they were related or with whom they were, or had been, in an intimate personal relationship, or a member of the same household as themselves.

Learning Disabilities Mortality Reviews (LeDer): established to support local areas to review the deaths of people with learning disabilities, identify learning from those deaths, and take forward the learning into service improvement initiatives.

Making Safeguarding Personal (MSP): an approach to safeguarding work which aims to move away from safeguarding being process driven and instead, to place the person at risk at the centre of the process and work with them to achieve the outcomes they want.

Mental Capacity Act (MCA) 2005: is designed to protect and empower people who may lack the mental capacity to make their own decisions about their care and treatment. It applies to people aged 16 and over.

Safeguarding: activity to protect a person's right to live in safety, free from abuse and neglect. It involves people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that their wellbeing and safety is promoted.

Safeguarding Adult Board (SAB): a multi-agency partnership Board established by the Care Act 2014, which has a duty to publish a strategic plan, publish an annual report and conduct any Safeguarding Adult Reviews. Its core membership includes the Local Authority, Police and Health.

Safeguarding Adult Review (SAR): a statutory review commissioned by the Safeguarding Adults Board in response to the death or serious injury of an adult with needs of care and support (regardless of whether or not the person was in receipt of services) and it is believed abuse or neglect was a factor. The process aims to identify learning in order to improve future practice and partnership working.

Tower Hamlets Together (THT): made up of a partnership of local health and social care organisations, with an ambition to improve the health and wellbeing of people living in Tower Hamlets.