

Committee Name and Date of Committee Meeting

Improving Lives Select Commission – 26 July 2022

Report Title

Headline Report for Quarterly Performance report - 2021/22 4th Quarter Rotherham Safeguarding Adults Board

Is this a Key Decision and has it been included on the Forward Plan?

No

Strategic Director Approving Submission of the Report

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Ward(s) Affected

Borough-Wide Choose an item.

Report Summary

This report outlines data analysis which provides an overview of trends in safeguarding demand, consistency of thresholds and quality of service. The data relates to period ending 30 April 2022 (2021/22 Quarter 4) with comparison where possible to previous quarters and financial years.

Recommendations

1. Progression to enquiry – With the low progression rate from safeguarding concern to section 42 enquiry, further work to understand what is being referred as a safeguarding concern is required.
2. Missing data – The report notes that there are missing fields and therefore no data available. The work that has commenced on developing a new case management system will ensure that all reportable fields are mandatory and therefore will be captured, it is envisaged that that this will be finished and in place in the autumn.

List of Appendices Included

Appendix 1 ILSC Safeguarding Performance Date July 2022

Appendix 2 ILSC July 2022

Background Papers

Not applicable at this time.

Consideration by any other Council Committee, Scrutiny or Advisory Panel

Not applicable at this time.

Council Approval Required

No

Exempt from the Press and Public

No

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1. Data within the accompanying report has been grouped under the six principles of adult safeguarding as set out in The Care Act 2014. The following summary provides an overview of the analysis against each of the principles with page numbers provided for ease of reference.

Proportionality

2021/22 continues to see a significant increase in safeguarding concerns. At the end of the 4th quarter 3640 concerns had been reported since the start of the reporting year. This has more than doubled numbers of concerns reported in 2019/20 reporting year when at 1601 and 698 or 25.3% more than 2020/21.

The quarterly analysis shows there has been a higher volume on each of the four comparable quarters of 2020/21, with the 951 recorded in this latest quarter 4, being the highest seen in 2021/22 and 300 more than same quarter last year. March recorded the highest number received in the 4th quarter at 328 month which was also second highest over the year with only the 345 new concerns recorded in November being higher. Most months recorded over 300 which is 30% higher demand flow coming in than the average of 230 seen during 2020/21.

Although volume of concerns are high progression rates remain low. Only 14% of concerns are progressing to enquiry as compared to 24% 2020/21 and 27% in 2019/20.

Of those not progressing almost 8 in every 10 (77%) are closed with no action following initial investigation, (2817 concerns of the total 3640 not progressing).

Abuse type analysis shows that the same four common types within concerns reported in quarter 3 remained, with 'Neglect' (753 concerns - 30.6%), 'Physical Abuse' (645 concerns - 26.2%), 'Financial Material Concerns' (304 concerns - 12.4%) and 'Psychological Abuse' (224 concerns - 9.1%) and proportions being broadly stable within a range of + or - 0.3%. During the 4th quarter (Q4) we have seen a significant uptick in enquiry completion, with 181 matching Q1 levels compared to Q2 and Q3 lower levels of 122 and 133 respectively. This has raised total for year to 610 completed enquiries for 2021/22 although this is below the 710 completed last year it is higher than 485 reported in 2019/20.

Neglect, Financial and Physical abuse continue to represent the three highest enquiries abuse types reported. Since quarter 3 position, they now show as (40% -0%, 26% +1% and 24% -4% respectively). The fall in physical from 28% to 24% also changed ranking from 2nd highest to third for first time in 3-year period. The only other notable change is an increase in 'Self Neglect' enquiries which has increased again during quarter 4 to end more than double last year's rate of 6% at 13%.

In previous performance reports a data recording issue had been identified regarding 'Risk Assessment Outcomes' not being recorded. At quarter 4 this related to 414 enquiries.

This issue has been investigated by the Performance and Business Intelligence Manager which identified the root cause being due to a LAS system and recording change part way through the year. Reporting has now

been updated and resolved the majority of the enquiries. The data now shows that 362 concluded enquiries (59%) resulted in the risk removed or reduced. The remaining 43 records with no risk recorded will be actioned via the service through the annual statutory return submission process.

Prevention

As stated earlier 3640 safeguarding concerns have been received in the year. These related to 2408 individual adults, with 702 being subject of two or more concerns. This equates to a repeat concern rate of 29% which is above the rates seen in previous two years at 24% and 22% respectively. All three categories have seen significant upward direction of travel rising in each of the 3 years listed. Evidence from these reviews suggests that the concerns are more about managing behaviours that challenge rather than safeguarding. Work has now commenced looking at the repeat concerns, the PBI team have identified who the repeat concerns involve.

Repeat concerns are regularly reviewed by the service. Evidence from these reviews suggests that the concerns are more about managing behaviours that challenge rather than safeguarding. Work has now commenced with the Council's commissioning services and partners to share this learning and develop improvement strategies, further work continues. Work continues across the partnership to address the referral information and data cleansing and quality assurance has highlighted that information is not always being recorded accurately.

This is being addressed through the weekly validations from the social work teams and safeguarding quality assurance.

Due to the increase in Police referrals since the introduction of the Vulnerable People's App a South Yorkshire group has reviewed the questions within the app that the police complete, and these have been amended to better reflect safeguarding and to integrate Making Safeguarding Personal.

A dip sample of the contacts/concerns shared by the Police to understand the low progression rates has shown that concerns are not always raised via the most appropriate pathway for the person's needs or are raised via multiple pathways (ie Mental Health, Domestic Abuse).

Work has commenced across RMBC and RDaSH alongside South Yorkshire Police and discussions are ongoing about the most appropriate pathway to deal with police alerts. Further work with police colleagues has been agreed alongside the introduction of the Community Multi Agency Risk Assessment Conference (CMARAC), Vulnerable Adults Risk Management meeting (VARM), and any referral that has a repeat incident will automatically be flagged, screened and sent through to be considered at a VARM meeting.

In addition to the targeted work with Police colleagues, the Policy and Practice Subgroup are in the process of auditing the partnerships People in Positions of Trust (PiPoT) polices and ensuring that the RSAB overarching PiPoT policy has been embedded, it was agreed that an appendix outlining the difference between PiPOT and LADO would be useful. PiPot training was delivered during Safeguarding Awareness Week programme of events in November 2021.

7 Minute briefings have been produced on Self Neglect, Making Safeguarding Personal, Mental Capacity Act and Safeguarding Adults Reviews are currently with the communications team and will be circulated once completed.

The safeguarding assurance and performance team will look at the increasing numbers of repeat concerns, the cases will be analysed, and any learning will be shared.

Partnership

Section 4 of the accompanying data report provides an analysis of the volume and progression rates of concerns by source agency. It is important to analyse these two elements together to help understand both the level of engagement and the understanding of safeguarding thresholds across the partnership. A high proportion of concerns, (relative to the size of the source organisation), would represent good engagement but a low progression rate may indicate low understanding and development need.

At 28% of all concerns reported this year Residential/Supported Living Providers remain the highest source agency although Residential far outweighs Supported living by at least 4 in every 5 (further analysis to be continued). The Police are the second highest at 20%. Progression rates for these two highest referrers remain comparatively low at 9% and 3% respectively and, due to the high volume, are significantly impacting on the overall progression rate.

There has been an approximate 45% reduction in the numbers received from Rotherham Hospital (351 in 20/21 to 195 in 21/22) and they are no longer the third highest referrer by volume. They now only represent 5% of the concerns compared to 13% and 16% in the previous two years. The progression rate has also declined from 23% last year to 16% for the current year to date.

The volume and progression rates for Police related concerns changed significantly following the introduction of the Vulnerable People App. The data provided by South Yorkshire Police relating to referrals from the Vulnerable Adult Referral app which showed an upward trend and work has commenced locally and regionally to look at opportunities as most of the cases referred via the app do not meet safeguarding criteria. Head of Service for Safeguarding and Mental Health is awaiting a meeting with SYP to look at what we can do now and what we can do moving forward and will report into the next quarters report.

Training continues to be delivered via Directions and requests have been made to receive detailed information on attendance numbers by training course and organisation. This has been requested by the end of year reporting.

Training via digital means also continues for all partners including topics such as Section 42 enquiries, Mental capacity Act, Self-neglect and Hoarding, during quarter 4 a total of 57 were accessed.

Training via digital means also continues for all partners including topics such as Section 42 enquiries, Mental capacity Act, Self-neglect and Hoarding.

Training has been secured across the partnership to increase awareness of thresholds and there is work within the partnership to look at the current

safeguarding forms, what type of concerns are coming in, working on concerns that do not meet the threshold and identifying what we can do differently to stop non-safeguarding activity being recorded.

There is also new guidance which has been circulated to all LA, this has guidance on thresholds and what constitutes safeguarding, this document has been circulated to partners and will be incorporated into the training offer. Work continues supporting staff across the partnership with what constitutes a safeguarding alert, what is complex case management and what should go into the quality monitoring process for commission and contracting.

The safeguarding assurance and performance team will work alongside partners to address the validation errors, missing data and provide some narrative on the reduction in capacity being recorded or why no theme or concern type was provided.

Further work has commenced with the systems team to look at the safeguarding module, a program of work has begun to streamline this, this will make the recording of safeguarding as simple and easy to use as possible. Once the forms and systems have been completed a period of consultation will take place with partner agencies.

Accountability

The overall quality of provision across the care market in Rotherham remains high with 81.3% of all registered care homes inspected by CQC being rated as Good or Outstanding. Two care homes have yet to be inspected.

86.2% of all registered commissioned community-based care (with a location in Rotherham) inspected by CQC have been rated as Good or Outstanding. There are 10 services yet to be inspected.

There are 0 care homes that have been placed in contract default during this quarter, although one contract default remains in place in response to CQC issuing a warning notice for breach of Reg. 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The SMIP was signed off with this provider on 1.11.21, awaiting follow up CQC visit to review Warning Notice (expected April – was January). Default Notice still in place as CQC rated Inadequate.

There is a total of 15 registered providers with a CQC rating of Requires Improvement (11 are residential/nursing providers and 4 are providers of community-based care) Improvement Plans were issued to address areas of provision that have been identified as below standard. These are regularly reviewed and updated, failure to make sufficient improvements within agreed timescales will result in escalation to a formal contract default. Only two improvement plans against requires improvement providers are currently in place, the others have all been completed and the services are awaiting reinspection.

Two additional residential care providers rated Good, currently have ongoing improvement plans.

There are 39 Community based care services that are registered with CQC in Rotherham. There are 16 contracted Community Care providers rated either Good or Outstanding who deliver services on behalf of the Council and

Rotherham CCG. 2 are currently rated Requires Improvement and have completed Improvement Plans and are awaiting re-inspection.

Protection

Although there are no statutory timescales set for completing enquiries, time taken to conclude the enquiry is monitored locally to provide assurance that enquiries are progressing appropriately and are not facing unnecessary delays.

The timeliness of the enquiries completed this year has declined when compared to the previous year. 2021/22 year to date figures shows that 14% of enquiries took over 40 weeks to complete and a further 19% took between 20-40 weeks, compared to 7% and 12% respectively for 2020/21. As reported in previous performance reports there have been a number of enquiries 'on hold' due to ongoing issues external to social care (i.e., Police investigations). These have remained 'open' rather than being closed on the system. As this and other process issues are being addressed, and the enquiry is closed, they will continue to impact on the timeliness data.

As at the 8th April 22 there were 146 open enquiries, much reduced from 204 at quarter 3. Of these 27 (-10) proportionately still at 18% have already surpassed 40 weeks and 21 (-21) and reducing to 14% from quarter 3 position of 21% are between 20-40 weeks. Work continues in service to review and progress these cases however they will continue to impact on the timeliness measure until they have all been cleared.

During 2021/22 the SAR subgroup has considered 5 Safeguarding Adult Reviews (SAR). 1 SAR was published during quarter 3, The Painter and His Son had been commissioned during 2020/21 and was complete and signed off by the RSAB during August 2021. In quarter 3 of 2021/22 the SAR subgroup commissioned Karen Rees to complete a SAR following the death of a young woman, the final report is due to the RSAB in June 2022. The SAR subgroup continue to meet monthly.

The Quality Assurance Team alongside the performance team are working together on the weekly data to ensure that there is an accurate picture of what is coming in, a data validation exercise is completed, and the outputs are then discussed with teams and managers.

The enquiries over 40 weeks are overseen by the quality assurance team, it is worth noting that the majority of these enquiries are police investigations. RMBC have contacted the Police and we will submit all outstanding enquiries for oversight and an officer will be assigned to support working through these cases. On all cases work continues to ensure that there is a protection plan in place.

Empowerment

85% of individuals involved in a completed enquiry were asked their views and wishes, which is slightly above the 83% achieved last year. A greater improvement has been achieved in terms of those which were both "Asked" and they "chose to express their views and wishes", 70% for the total at quarter 4 compared to 62% last year. In the last two quarters this improved further to 74% in quarter 3 and broadly sustained at 73% in quarter 4. In the last quarter 80% of personal outcomes were fully met, 18% partially achieved and 2% not achieved which is an improved position on the 3rd

quarter when only 74% were recorded as fully met and 3% were not achieved. Overall, the year-end data figures show 98% of outcomes being at least partially met which matches last year's outturn position.

The latest data indicates a continuing overall downward trend in the proportion of individuals lacking capacity being subject to safeguarding procedures, 31% compared to 34% in 2020/21 and 38% in 2019/20). It should be noted that there has been an increase in the proportion of enquiries where the individual's capacity was not recorded at all, (11% compared to previously 8% in 2020/21).

More people (1 in 3 from 1 in 4) have been supported by an advocate than either of the last two years at 32% compared to 24%. the 193 enquires this year, where the individual was identified as lacking capacity, a formal advocate has supported 64.

Making Safeguarding Personal (MSP) training has been secured for all partnership members and data cleansing and validation continues to highlight the cases where there are no outcomes have been recorded or no risk identified. Alongside the training we are piloting MSP principles and as such are developing an exit questionnaire to answer the ADASS questions asked and to ensure that we have captured the user voice, this is being supported by advocacy.

- 2. Key Issues**
Not applicable
- 3. Options considered and recommended proposal**
Not applicable
- 4. Consultation on proposal**
Not applicable
- 5. Timetable and Accountability for Implementing this Decision**
Not applicable
- 6. Financial and Procurement Advice and Implications**
Not applicable
- 7. Legal Advice and Implications**
Not applicable
- 8. Human Resources Advice and Implications**
Not applicable
- 9. Implications for Children and Young People and Vulnerable Adults**
Not applicable
- 10. Equalities and Human Rights Advice and Implications**
Not applicable
- 10.2 Implications for CO₂ Emissions and Climate Change**
Not applicable

- 11. Implications for Partners**
Not applicable
- 12. Risks and Mitigation**
Not applicable
- 12.2 Accountable Officer(s)**
Andrew Wells – Head of Service
- 13.** Approvals obtained on behalf of:

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