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**SAFEGUARDING ADULTS**

**ANNUAL REPORT**

**2023 - 2024**

**August 2024**

**SAFEGUARDING ADULTS ANNUAL REPORT 2023 to 2024**

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| **Date** | August 2024 |

1. **PURPOSE OF THE REPORT**

1.1 This report covers the period of 1st April 2023 to 31st March 2024 and is the second Safeguarding Adults annual report for NHS Somerset Integrated Care Board (ICB). This report provides assurance to the ICB and members of the public that the ICB has fulfilled its statutory responsibilities to safeguard adults at risk of / experiencing abuse, neglect and / or exploitation.

1.2 The narrative throughout this report gives an overview and summary of assurance against our statutory functions and the shared local priorities of safeguarding adult partners. The work of Safeguarding Adults covers the [10 categories of abuse](https://www.scie.org.uk/safeguarding/adults/introduction/types-and-indicators-of-abuse), with key focus on workstreams that include Domestic Abuse, Modern Slavery and exploitation, Serious Violence Duty, [Anti Social Behaviour](https://www.gov.uk/government/collections/antisocial-behaviour-guidance-for-professionals), [MAPPA](https://www.gov.uk/government/publications/multi-agency-public-protection-arrangements-mappa-guidance) (Multi Agency Public Protection Arrangements), [Prevent](https://www.gov.uk/government/publications/prevent-duty-guidance) (radicalisation of individuals into terrorism) and work relating to statutory duties regarding [Mental Capacity Act](https://www.gov.uk/government/publications/mental-capacity-act-code-of-practice) and [Deprivation of Liberty Safeguards](https://www.cqc.org.uk/sites/default/files/Deprivation%20of%20liberty%20safeguards%20code%20of%20practice.pdf).

1.3 This report will conclude by looking forward to the year ahead identifying key priorities for 2024-2025.

1.4 In accordance with [statutory guidance](https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance) the ICBs core business is to safeguard adults with care and support needs at risk of / experiencing abuse, neglect and / or exploitation through the provision of high-quality and effective support, with agencies, frontline professionals and practitioners commissioned by the ICB being clear about their own and each other’s roles and responsibilities and how we work together to safeguard adults at risk / experiencing harm, abuse and /or exploitation.

1. **DELIVERY OF STATUTORY SAFEGUARDING FUNCTIONS**

**2.1 Somerset Safeguarding Leadership and Accountability**

* + 1. The accountability for safeguarding rests with the Chief Executive of the ICB, as the accountable officer[[1]](#footnote-1). The Safeguarding Adults team are part of the ICB Strategic Safeguarding Team, the Designated Nurse for Safeguarding Adults reports to and is led by the Associate Director of Safeguarding, Mental Health, Learning Disabilities and Autism who in turn reports to and is led by the Chief Nursing Officer / Executive Lead for Safeguarding.
    2. As part of an integrated approach quarterly safeguarding assurance reports are provided to the Quality Committee from a safeguarding adult, safeguarding children and children looked after and care leavers perspective. These are reported by exception to the Integrated Care Board along with the Safeguarding Adults annual report.
    3. The ICB Strategic Safeguarding Adults team structure incorporates the statutory roles of Designated (and Deputy) Nurses, Named Professional for Primary Care, Pharmacy, Optometry and Dentists (PODs), Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS) Strategic Lead and administrative staff.
    4. There is a separate Continuing Healthcare, (CHC), Safeguarding, Quality and Court of Protection (CoP) Team line managed by the Associate Director of CHC (see table 1). This service is unique to NHS Somerset ICB, developed historically, and predates the overarching ICB Designate/Statutory Safeguarding Adults roles. This team supports CHC staff and CHC funded individuals with safeguarding, quality and Court of Protection related matters.

Table 1: ICB Safeguarding Adult Structure 2023-2024

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2.1.5 The reporting structure (Table 2) for the statutory arm of the ICB Safeguarding Adults Service demonstrates the safeguarding governance arrangements.

2.1.6 Due to an inability to recruit to the Named GP for Safeguarding post for over a year a Case for Change led to the reconfiguration of the role into a fulltime Named Professional for Safeguarding in Primary Care and Pharmacy, Optometry and Dental, (PODs) post. The postholder commenced in this role in September 2023.

2.1.7 The new role of a Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS) Strategic lead commenced in post in March 2023 and ensures that the ICB fulfils its statutory duties in relation to MCA and DoLS.

Table 2 - Somerset ICB Safeguarding Adult Governance Framework:

Structures / Committees

Individual Accountability

Chief Executive

Integrated Care Board

Chief Nursing Officer/ Executive Lead for Safeguarding

Somerset ICB Quality Committee

Review, Learn and Improve Meeting

Associate Director of Safeguarding, Mental Health, Learning Disabilities and Autism

Integrated safeguarding reports

(Informed by multiple aspects of the Somerset

safeguarding assurance system)

NHS England quarterly safeguarding assurance returns

Avon and Somerset Strategic Safeguarding Partnership (ASSSP) Meetings

Safeguarding Adults Team (including Designated and Deputy Designated Professionals and Named Professional for Primary Care and PODs)

Regional and National Safeguarding Adults Meetings

Oversight and scrutiny of commissioned providers compliance with Safeguarding Adult contract schedules

Somerset Safeguarding Adults Board (SSAB) Meetings

Safer Somerset

Partnership (SSP) Meetings

Somerset NHS Provider Safeguarding Committees

Safeguarding visits to providers

* 1. **Discharging Statutory Safeguarding Adults duties**

2.2.1 Accountability: There is a clear line of accountability for safeguarding adults reflected in our ICB governance arrangements as described in Table 2 above. We have achieved compliance against the requirements of the NHS Safeguarding Accountability and Assurance Framework and from 1st April 2023 to 31st March 2024 substantial assurance was provided to NHS England South West safeguarding team through the following:

* Quarterly Safeguarding Assurance reports
* Safeguarding Commissioning Assurance Toolkit (SCAT) submissions
* System updates to the South West safeguarding steering group
* System updates to the South West Designated Professionals forum
* A safeguarding visit to the ICB by the NHS England South West safeguarding team

2.2.2 Policies and Procedures: The ICB’s Safeguarding Adults policy sets out our commitment and approach to safeguarding adults at risk of harm and abuse and is currently being updated to reflect recent legislative changes and the move from CCG to ICB status. The current version of the policy is located here: [Safeguarding Adults - NHS Somerset](https://nhssomerset.nhs.uk/health/safeguarding-adults-and-children/safeguarding-adults/). The [ICB Domestic Abuse policy](https://nhssomerset.nhs.uk/wp-content/uploads/2023/05/NHS-SOMERSET-ICB-Domestic-Abuse-Policy-fv2.1-2023.pdf) has been updated within the timeframe of this report and is available on the ICB website with a newly devised “Standard Operating Procedure For Responding To Domestic Abuse” and separate policy “Support for Colleagues at Risk of Domestic Abuse” having also been developed and made available to staff.

2.2.3 Effective Supervision & Training: Three all day training events were provided to GP safeguarding leads and ICB staff throughout 2023/2024 on the theme of Neglect and self neglect across the lifespan. This was in addition to training opportunities provided by the Somerset Safeguarding Adults Board, and Safer Somerset Partnership. Feedback from the training event included the following:

The groupwork cases were very interesting + informative. Very helpful to have participatory elements to the day to enhance learning.

Thought provoking and interesting day

Great interactive day. Really enjoyed working through the case studies

2.2.4 The ICB’s strategic safeguarding team provide formal and informal safeguarding supervision to Primary Care staff, strategic safeguarding leads within providers commissioned by the ICB, staff and teams within the ICB and partner agencies.

2.2.5 Information Sharing: The ICB newsletter ‘The Safeguard’ is routinely contributed to and shared with Primary Care staff, staff within the ICB, the Local Medical Committee and the NHS provider safeguarding team.

2.2.6 Risks relating to Safeguarding Adults Six risks were recorded on the ICB risk register during this reporting period.

|  |  |
| --- | --- |
| **Risk** | **Score** |
| Risk 440 / Mandatory Prevent Training compliance in NHS Trusts | 4 |
| Risk 327 / There is a risk to the ICB of a failure to implement new statutory duties relating to Liberty Protection Safeguards (LPS) | Closed |
| Risk 368 / ICB Strategic Safeguarding Service Provision | 9 |
| Risk 554 / There is a risk that statutory safeguarding services will not be delivered due to ongoing demand and capacity issues | 9 |
| Risk 614 / Risk to victims of domestic abuse due to the lack of information sharing and engagement between MARAC and GPs | 10 |
| Risk 625 / Risk the ICB is not compliant in relation to Anti Social Behaviour statutory duties | 12 |
| Risk 648 / Risk that the ICB is breaching its statutory duties in relation to safeguarding training | 8 |
| Risk 642 / Risk of delayed access to diagnostics for people with learning disabilities requiring referral from primary to acute care | 8 |

Risk 440 score has subsequently reduced and assurance is provided through ongoing monitoring provided vis the NHS Provider Trust Somerset NHS Foundation Trust completion of the quarterly safeguarding dashboard and submission of quarterly data to NHS Digital. Risk 327 has since been closed as LPS is no longer going to be implemented within the lifespan of the current government (as of end of March 2024- predating new government being elected in July 2024). Risk 368 has also altered due to the successful recruitment of vacant post within this reporting timeframe. Risk 642- A business case was put forward and accepted for an LD liaison nurse to complete devolved MCA considerations. An individual has been appointed in the role and we are awaiting a start date.

1. **safeguarding assurance** 
   1. Somerset ICB has continued to regularly receive assurance on statutory safeguarding adults responsibilities from the services we commission, with work completed to revise the joint safeguarding adults and children dashboard provided by Somerset NHS Foundation Trust and Yeovil District Hospital NHS Foundation Trust. In partnership with Somerset NHS Foundation Trust and Yeovil District Hospital NHS Foundation Trust’s Integrated Safeguarding Service and the ICB strategic safeguarding team colleagues the joint safeguarding dashboard has been revised. This involved removing data collection no longer required (assurance already gained and positive embedded changes evidenced) and the introduction of mutually agreed new metrics for monitoring directly related to contractual requirements.
   2. In 2022 to 2023 the ICB strategic safeguarding team and services we commission actively contributed to the “deep dive” of Multi Agency Risk Assessment Conference (MARAC) undertaken by Safe Lives on behalf of Somerset County Council. This has led to a series of recommendations for 2023 / 2024 and subsequent change to the MARAC operating model.
   3. Additional safeguarding assurance in relation to the health system and partner agencies provided through the multi-agency Bi-Monthly Safeguarding Forum has ceased and has been replaced by the work of the ICS and safeguarding steering group.
   4. The ICB Safeguarding Assurance Meeting (SAM) was initiated in 2023 / 2024 (developed out of the previous ICB Safeguarding Business meeting) to seek great er assurance from internal ICB directorates that they were considering safeguarding through all the workstreams they were undertaking.
   5. In 2023 to 2024 assurance on safeguarding systems, processes and practice within primary care was sought through the GP safeguarding annual report. The report template was developed with support from the Somerset Local Medical Committee and was sent out to practices for completion in March 2024.
2. **progress against objectives for 2023 – 2024**

4.1 The ICB Safeguarding Adults team have continued to work collaboratively, engaging with partners in work streams to improve quality, strengthen Safeguarding Adult Review (SAR) and Domestic Homicide Review (DHR) arrangements and where necessary mitigate organisational and partnership risks. The following objectives were worked on in 2023/2024:

|  |  |
| --- | --- |
| Continue to work collaboratively with local and regional safeguarding adult partnerships; to improve quality and strengthen safeguarding adult and domestic homicide review arrangements, mitigating where necessary organisational, partnership and system risks. | Ongoing |
| Ensure the ICB meets its statutory duties in relation the Serious Violence Duty introduced in January 2022 | Ongoing |
| Review the provision of safeguarding adults support across the ICB to reduce duplication in roles and responsibilities across the CHC safeguarding and designate safeguarding duties | Ongoing |
| Implement MCA mandatory training across all ICB staff to mirror work already undertaken within CHC team | Ongoing |
| Establish ICB responsibilities in relation to the into Anti-Social Behaviour Community Triggers / Case review statutory process though involvement in development of local multiagency process | Ongoing |
| Revise ICB Individual Management Review (IMR) process to ensure Primary Care lead on writing / signing off IMRs written on their behalf, to ensure greater involvement in DHR and SAR process and recommendation | Ongoing |
| Create a “stand alone” Prevent / Counter Terrorism Policy to be in line with best practice and as advised by NHSE/I. | Ongoing |
| Create a MCA / Dols Guidance document for ICB and health system and ensure all relevant ICB staff are mapped to appropriate level of MCA training | Ongoing |
| Extend the Domestic Abuse notifications project to include medium and high risk cases where children are not present and explore digitalisation of the information sharing process | Ongoing |
| Ensure GPs actively contribute to / engage with the MARAC process | Ongoing |
| Support the development of a trauma informed approach across the Somerset system to enable more targeted support and understanding of adults with care and support needs. | Ongoing |
| Develop a sustainable safeguarding training package, including Back to Basics and Safeguarding Reviews. | Ongoing |
| Produce and disseminate a health system wide policy and promotion material on Sexual Safety for staff and patients inline with directive from NHSE | Ongoing |

**5 Priorities for 2024 - 2025**

* To provide safeguarding training data for ICB staff
* In partnership with Electronic Staff Record (ESR) colleagues the strategic safeguarding team will look at how evidence of additional learning required for level 3 safeguarding adults and children can be uploaded to ESR.
* To establish effective pathway for GP involvement within domestic abuse Multi Agency Risk Assessment Conference (MARAC) process
* To expand police notification information sharing process to primary care to include notifications where there are no children involved
* To expand the Older Person Independent Domestic Violence Abuse (IDVA) pilot project into a second Primary Care Network area.
* Transitional safeguarding workstream. Children Social Care and Adult Social Care working together across Somerset to better understand needs of children transitioning from children to adult’s services
* Female Genital Mutilation (FGM) policy in production to support primary care with statutory responsibilities regarding safeguarding women and children at risk of / experienced FGM.
* Aim to build a domestic abuse link network across health, including primary care, working alongside established the network within SFT.
* Work alongside ICS Workforce Inclusion to establish freedom to speak up processes across health
* Work with ICB workforce to ensure the ICB fulfils it commitment to taking and enforcing a zero-tolerance approach to any unwanted, inappropriate and/or harmful sexual behaviours within the workplace
* Ensure ICB fulfils its statutory duties in relation to Anti social behaviour case review process through input into the multi agency development of information sharing agreement and shared process

6 **CONCLUSION**

6.1 Commissioners of health services have a duty to ensure that all NHS Trusts recognise the importance of having robust and effective arrangements in place to safeguard adults with care and support needs who may be / are at risk of experiencing abuse and neglect Somerset, and to provide assurance that they are fulfilling their statutory responsibilities for Safeguarding Adults set out within the Care Act 2014.

6.2 The 2024 to 2025 objectives will continue to take forward the progress that has been made this year to fulfil our statutory and strategic objectives.

6.3 NHS Somerset Integrated Care Board are requested to note the contents of this report.

1. [Adult Safeguarding: Roles and Competencies for Health Care Staff | Royal College of Nursing (rcn.org.uk)](https://www.rcn.org.uk/Professional-Development/publications/adult-safeguarding-roles-and-competencies-for-health-care-staff-uk-pub-007-069) [↑](#footnote-ref-1)