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# Report to the Meeting of the Oxfordshire & Buckinghamshire Mental Health NHS Foundation Trust Members' Council

### For Information

17 November 2009

Safeguarding Vulnerable Adults (SVA)

#### Introduction

In 2000 the Department of Health (DH) issued the document 'No Secrets'. This was the product of a multi-agency steering group led by the DH with the full co-operation of the Home Office, the Association of Chief Police Officers, the Association of Directors of Social Services, the NHS Confederation, the voluntary sector and academic bodies. The aim of 'No Secrets was to ensure that key local agencies, particularly but not solely health, social services and the police, are able to work together to protect vulnerable adults from abuse, by developing local multi-agency policies and procedures.

## What is meant by abuse?

Abuse is the violation of an individual's human and civil rights by any other or other persons. It may be something that is done to the person or something not done when it should have been. It does not necessarily have to be intentional; if the vulnerable person experiences it as abusive, it is considered abuse.

'No Secrets' defined a vulnerable adult as a person aged 18 or over who is or maybe in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to protect himself or herself against significant harm or exploitation. Types of abuse include:

- Physical
- Sexual (contact and non-contact)
- Psychological
- Financial or material

- Neglect, acts of omission
- Discriminatory
- Institutional

## **Local arrangements**

Local authority social services were tasked with playing a lead role in developing local policies and procedures for the protection of vulnerable adults form abuse. Each County Council (Oxfordshire and Buckinghamshire locally) is the designated Lead Authority for the Safeguarding of Vulnerable Adults (SVA) in each county area. OBMH works together with both County Councils. Other public agencies (e.g. PCT, Acute hospitals, police, etc) are partners with the County Councils and are members of the respective Safeguarding Adult Boards.

OBMH is an integrated provider of Health and Social Care Services through Section 75 agreements with both County Councils. The responsibility for ensuring the investigation of Safeguarding concerns relating to people with mental health needs and management of the process rests with the manager of the Community Team for where the person lives. The manager will ensure that decisions are made and recorded at each stage, a co-ordinated investigation is undertaken if needed and the matter is referred to the police if:

- a crime may have been committed as this must be investigated as part of the Safeguarding process
- Police input/advice would be helpful in discussing possible protection options
- Police colleagues may have information about any of the people involved

Some forms of abuse are criminal offences and police investigations are required and appropriate. However, neglect and poor practice are not always criminal offences.

## Safeguarding Vulnerable Adult Referrals

Safeguarding concerns raised within the Trust usually come through the Incident reporting route.

There have been incidents of service users making allegations against staff. All incidents are investigated and patients referred for Safeguarding where appropriate.

County Councils in both Oxfordshire and Buckinghamshire hold the information with regard to all Safeguarding referrals. Currently the Trust is working with them to improve reporting on the content and outcome of all Safeguarding referrals.

From 01 April 09 there have been twenty one referrals for Safeguarding to Oxfordshire Social & Community Services. Twenty of these were for Older Adults.

Seven of the referrals resulted in Multi-agency involvement, seven resulted in single agency involvement. Three are unspecified.

Eleven of these cases are now closed. Four of which were not accepted as there was no evidence of abuse found in the initial assessment.

There have been twenty five referrals to Safeguarding in Buckinghamshire.

Types of abuse recorded included

- Physical
- Financial
- Emotional
- Neglect
- Sexual

## **Expectations OF OBMH staff**

All staff who work with service users should:

- Be well informed about Safeguarding issues
- Report all concerns about potential, suspected, actual or alleged Safeguarding concerns to their manager
- Ensure that Safeguarding is part of risk assessment and care planning
- Ensure that all staff with a right and need to know can access Safeguarding information in service user notes
- Record clearly and accurately
- Consider there may be others at risk now and in the future including risks to children.

Basic Awareness training in SVA is mandatory for all staff in OBMH who work with service users. This training is provided by the Trust. The objectives of this training are that individuals will be able to:

- Describe and recognise the various types of abuse
- State what to do if they have a concern about a vulnerable adult
- Report a concern under the whistle-blowing policy
- Recognise the important issues around professional boundaries.

The consolidated mandatory training performance target for the Trust is set at 60%. Currently the achievement rate is 79%.

Multi-agency training for more senior staff e.g. Investigation and Managers training is provided by the respective County Councils.

Any member of staff can also seek advice from:

- Their Team manager
- OBMH safeguarding Lead for relevant county
- Safeguarding manager in the relevant County Council

## New legislation

**Deprivation of Liberty Safeguards (DoLS)** – From April 2009 this legislation was introduced into the Mental Capacity Act 2005 to help protect vulnerable people who may lack the mental capacity to make their own decisions about their care. This applies to people accommodated in Care Homes and hospitals, it does not apply to people living in the community. Occasionally for example a person with a mental health issue or dementia may have to be deprived of their liberty for their own care and protection. This legislation will ensure that when restrictions are used it is for their care and protection and is subject to regular review and scrutiny. There is a clear cut connection with Safeguarding, as to deprive an individual of these freedoms could otherwise be a Safeguarding issue.

Independent Safeguarding Authority (ISA) – The ISA was created to help prevent unsuitable people from working with children and vulnerable adults. This will be done by working in partnership with the Criminal Records Bureau (CRB). Increased safeguards have now been introduced under a Vetting and Barring scheme from 12 October 2009:

- It is now a criminal offence for individuals barred by ISA to work or apply to work with children or vulnerable adults in a wide range of posts
- To work with these groups staff will have to be ISA registered
- The three former barred lists (POCA, POVA and List 99) are being replaced by two ISA-barred lists
- Employers must refer staff where they are concerned that an individual poses a risk

ISA registration starts for new workers and those moving jobs in July 2010. ISA registration will become mandatory for these workers in November 2010. All other staff will be phased into the scheme from 2011. OBMH HR are very aware of these requirements.

## Consultation on the review of 'No Secrets'

The Government carried out a consultation on the review of 'No Secrets'. This closed on 31 January 2009. The aim of the consultation was to take account of views and experiences of adult safeguarding. The main question posed was whether and how the 'No Secrets' guidance needed to change to keep adults safe from harm. This included whether new legislation was necessary. 12000 people took part in the consultation and nearly 500 written responses were received.

## **Key Questions**

- 1. Should the 'No Secrets definitions be revised?
- 2. Where should the leadership come from?
- 3. Safeguarding and Personalisation?

The Government is now looking at all the evidence and is working to develop a response.