

Follow-Up of Adult Safeguarding

| Client | Director for People |
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| System | Adult Safeguarding |

| Matter Arising 1 | Recommendation |
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| The information initially available for the 2010-11 Abuse of Vulnerable Adults return was not adequate to enable a submission to be made. Additional work had to be undertaken to collect the required data before it could be reconciled and the submission completed. The lack of up to date information being available at any given point in time reduces the effectiveness of the safeguarding process and could potentially increase | reminded of the importance of the timely completion of records. Access to up to date information is essential to ensure the safety and protection of vulnerable adults and also assist in the completion |
| the risks faced by vulnerable adults. | Where possible, a quarterly check should be carried out on the data to ensure that adequate information is available to complete the return. |

Original Management Response

The Head of Modernisation and the Safeguarding Adult Manager are working with the Safeguarding Adult Quality and Performance sub-group to improve the completion of records. The AVA data bench marking exercise has evidenced an extremely high result in the area of protection plans being offered to service users. Although there is a lack of formal case conferences recorded, staff are finding creative ways of encourage service users to agree to protection plans. In this respect, Plymouth is leading the way nationally in service user led Safeguarding.

Follow Up - Action Taken to Date

Discussion with Kerrie Todd, Safeguarding Adults Manager.

| Conclusion | Status |
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| The safeguarding referral process has changed and the information collection process is still fragmented by the existence of the HUBs, however the information for the returns is due to be generated from the CareFirst 6 system. Further work needs to be undertaken in around six months to confirm that the information is available for the production of the return. | on going |

| Matter Arising 2 | Recommendation |
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| At the time of the audit review, Version 2 of the Safeguarding Adults Multi Agency Policy and Procedures document was available in the PCC internal document library. The most recent revision/review took place in June 2011 and resulted in the publication of Version 3 which can be found on the PCC public website. However, page five of Version 3 shows that it is Version 4 whilst the introduction on page six starts "This document is the third version". | document in the Plymouth City Council internal document library should be updated to the current version to ensure that staff have the best and most recent guidance in relation to the safeguarding of adults. It should be ensured that when the policy is reviewed or |
| | The current policy should be updated to ensure that it consistently shows the correct version number. |

Version 3 of the Plymouth Multi-Agency policy and procedures has now been uploaded onto the Safeguarding Adult Website and the project officer will ensure it is also updated in the internal document library.

Follow Up - Action Taken to Date

Review of the Safeguarding Adults Multi Agency Policy and Procedures on the PCC intranet and the PCC public website.

| Conclusion | Status |
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| Although it was suggested that this issue had been actioned, review of the current documents found this to be inaccurate as the documents still contained the issues originally identified. | Not Implemented |

| Matter Arising 3 | Recommendation | |
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| The Safeguarding Adults Manager has access to a role profile for the Independent Chair (Adult Safeguarding). The Plymouth City Council role profile listing does not contain a role profile for the Independent Chair (Adult Safeguarding). | le Council Human Resources to enable them to add the Independent | |
| Original Management Response | | |
| Due to the recent PCC restructure the issue of the chair and their role profi | le is currently under discussion. | |
| Follow Up - Action Taken to Date | | |
| Due to the on-going changes within the PCC People Directorate this item of | annot be assessed at this point in time. | |
| Conclusion | Status | |
| Further work is required in 2013/14 to confirm the recommendation has been | en actioned. On-going | |

| Matter Arising 4 | Recommendation |
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| A formal Partnership Agreement is not in place for the Multi Agency Safeguarding Adults Board. | The implementation of a Partnership Agreement will ensure that the governance structure in place to safeguard adults is clearly defined along with the responsibilities of the partners involved, ultimately strengthening the adult safeguarding provision. |
| Original Management Personne | |

A formal Partnership Agreement is to be presented in draft to the SAB on 21st Oct 2011 for discussion.

Follow Up - Action Taken to Date

It has been confirmed that a partnership agreement has been drawn up and the final version was dated 4th January 2012. This was reviewed by the auditor and as of 1 June 2012 had been signed by some but not all of the partners. The minutes of the SAB meeting held on 13th January 2012 show under point 7 that the partnership agreement has been agreed in principle. The Adult safeguarding Manager advised that work is on-going to obtain the signatures for all partners.

| Conclusion | Status |
|--|-----------------------|
| Further work is required in 2013/14 to confirm the recommendation has been actioned. | Partially Implemented |

| Matter Arising 5 | Recommendation |
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| Although there are agreements in place for the sharing of information between local agencies such as the NHS, PCT and Police, a specific agreement relating the sharing of information for the safeguarding of adults was not identified. Without a formal agreement in place staff and the board could be in breach of Data Protection legislation. | advised that a description of the information that is being exchanged between all parties and how the exchange occurs |

Original Management Response

Devon and Cornwall Police are currently reviewing the Information Sharing Protocol. There will be a delay in the new document being completed due to the retirement of the force's information officer. This is an ongoing agenda item of the quarterly Pan- Devon safeguarding meetings and is a concern to all four L.A's.

Follow Up - Action Taken to Date

Review of the SAB Partnership Agreement found that section 14.1 states "This partnership agreement will uphold the principals of the Information Advice (No Secrets 2000)". Discussed with the PCC Adult Safeguarding Manager who advised that this is almost complete and will be forwarded in due course to be signed up to.

| Conclusion | Status |
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| Although underway, a formal information sharing agreement has not yet been finalised for use. Reliance on a partner agency limits the ability to expedite the process. | On-going |
| The state of the s | |

| Matter Arising 6 | Recommendation | |
|---|---|--|
| Karen Howard (Safeguarding Manager, Health Service) has access to the Plymouth City Council Systems including an email account. The listing on the Carefirst register shows an expired account, however formalisation of access could not be identified. | employees must be formally reviewed and recorded. A request for | |
| 0.1.1 | | |

Karen Howard is the joint PCT/PCC Domestic Abuse Lead Officer. Contact will be made with the systems administrator to ensure that a formal record and request is in place for access by non PCC employed staff.

Follow Up - Action Taken to Date

Contacted Timothy Anderson on 21 June 2012 to request confirmation of notification. As at 30 July 2012 no response has been received.

| Conclusion | Status |
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| Further work is required in 2013/14 to confirm the recommendation has been actioned. | On-going |

| Matter Arising 7 | Recommendation |
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| An adult safeguarding risk register is not in place. | Consideration should be given to drafting a risk register for the adult safeguarding area. Areas that should be considered include but are not limited to: • Continuity of the safeguarding provision; • Financial risks to the safeguarding provision; • Maintenance of governance structures and memberships; • Changes in government legislation; • Ability to comply with statutory returns. |

Original Management Response

A meeting has been arranged with the Commissioning Team to address the issues raised.

Follow Up - Action Taken to Date

This was discussed with the Safeguarding Adults Manger who advised that the register was with PCC Legal for review, however no problems are anticipated.

| Conclusion | Status |
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| A risk register has been drafted but has not yet been formally finalised as it is currently being reviewed by the PCC Legal Department. Further work should be undertaken in 2013/14 to confirm that the original recommendation has been actioned. | Cliquing |

| Matter Arising 8 | Recommendation |
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| Section 3.18 of the No Secrets document shows details of the "Annual Policy and Service Audit" to be carried out by the multi agency management committee. There are a number of self review and improvement processes in place including annual reports, Joint Improvement Programme and the multi agency policy review but they do not fully meet the needs of section 3.18. | the Safeguarding Adults Board. The nature of existing reviews carried out by each member, including this audit, should be considered against the requirements detailed. |
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At the July 2011 SAB, members were asked to complete a short review of their safeguarding arrangements. These will be presented to the October 2011 SAB. If necessary a fuller audit of members safeguarding arrangements will be required.

Follow Up - Action Taken to Date

The October 2011 Safeguarding Adults Board minutes show discussion under point 3 of "Top 20 TIPS" the requirement for agencies to self assess their safeguarding policies which would seem to link into the overall requirements for an annual Policy and Service Audit. The minutes recorded that only three partner agencies had returned information and the remaining partners were requested to complete for the January 2012 meeting.

| Conclusion | Status |
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| Although work appears to have been started to implement this recommendation, the October 2011 SAB minutes do not clearly record that the work being undertaken is linked to section 3.18 of the No Secrets document. Furthermore the lack of completion by partner agencies reduces the effectiveness of the process and review of the January 2012 SAB minutes found no further mention of the item. Further work is required in 2013/14 to confirm the recommendation has been actioned. | r dradily implemented |

| The Safeguarding Adults Board's Terms of Reference (TOR) are very basic and provide no detail on frequency of meetings or minimum quorate numbers. The Safeguarding Adults Board (SAB) Terms of Reference should be reviewed and updated to include basic details of the operation of the Board. This includes the appointment frequency of the Chair, the number of SAB meetings to be held each year, the target members such as NHS, Fire Service, Police Authority, creation of sub groups and any other items which will clarify the operation of the Board. Detailed governance and operational information and requirements should be set out separately in the SAB partnership agreement. | Matter Arising 9 | Recommendation |
|--|---|---|
| | basic and provide no detail on frequency of meetings or minimum | be reviewed and updated to include basic details of the operation of the Board. This includes the appointment frequency of the Chair, the number of SAB meetings to be held each year, the target members such as NHS, Fire Service, Police Authority, creation of sub groups and any other items which will clarify the operation of the Board. Detailed governance and operational information and requirements should be set out separately in the SAB partnership |

Original Management Response

The SAB have agreed Version 3 of the Multi-agency policy and procedures which included a whole section on values and beliefs of agencies signed up to Version 3. This document is a robust statement of commitment for SAB members to work to. In addition, the new partnership agreement sets out governance information and the LOG terms of reference sets of operational guidance.

Follow Up - Action Taken to Date

The Partnership Agreement has been reviewed and was found to include a comprehensive Terms of Reference. The minutes of the SAB meeting held on 13th January 2012 show under point 7 that the partnership agreement has been agreed in principle.

| Conclusion | Status |
|---|-----------------------------|
| The SAB partnership Agreement is in the process of being signed by all Safeguarding Adult Board members. Once signed this item will be fully addressed. Further work is required in 2013/14 to confirm the recommendation has | i ditidily illipicilicitica |
| been actioned. | |

| Matter Arising 10 | Recommendation |
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| The minutes for the Safeguarding Adults Board do not show that members have been given an opportunity to declare any interests relevant to items on the meeting agenda. | |
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Original Management Response

This is covered in the new partnership agreement due for initial review by the SAB on 21st October 2011.

Follow Up - Action Taken to Date

The Partnership Agreement was reviewed and found to contain the requirement for members to declare relevant interests and review of the January 2012 minutes show the opportunity to declare interest was given and used.

| Conclusion | Status |
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| The inclusion of the requirement to declare interests at meetings in the partnership agreement and the evidence of the recent SAB meeting confirms that this item has been addressed. | Implemented |

| Matter Arising 11 | Recommendation |
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| , , , , , , , , , , , , , , , , , , , | Terms of Reference should be in place for all Safeguarding Adults Board sub groups. These should be periodically reviewed and approved by the Safeguarding Adults Board. |

Original Management Response

Terms of Reference for the Quality and Performance Group will be written in draft following the safeguarding risk review meeting with the Commissioning Team.

Follow Up - Action Taken to Date

The SAB Partnership Agreement was reviewed, responsibilities for the supporting subgroups were found to be detailed in Appendix 4. The minutes of the SAB meeting held on 13th January 2012 show under point 7 that the partnership agreement has been agreed in principle.

| Conclusion | Status |
|---|------------------------|
| Relevant requirements have been documented and when all partners have signed the agreement this item will be considered fully implemented. Further work is required in 2013/14 to confirm the recommendation has been actioned. | i ditidily implemented |

| Matter Arising 12 | Recommendation |
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| The annual Section 75 Letter of Agreement states "This Letter of Agreement applies to the financial year 2010-11 only, and should be reviewed prior to the financial year 11-12". The requirement for review prior to the next financial year was also recorded on the 2009-10 agreement letter. The PCT contribution to the Joint Deprivation of Liberty and Safeguarding 2010 -11 budget was agreed in June 2010, invoiced on 18th November 2010 and received by Plymouth City Council on 18th January 2011. The funding arrangements for each financial year are not being agreed prior to the financial year, as required by Section 75 of the National Health Service Act 2006. In addition invoicing and payment are not | prior to each financial year, as documented. This will help to ensure consistent provision of an effective safeguarding service and allow invoices to be raised in a timely manner. |

occurring within a reasonable time-scale.

Updated Letter of Agreement is currently being drawn up by Kerrie Todd and Karen Howard.

Follow Up - Action Taken to Date

The letters were requested and supplied by Christine Vowles via Kerrie Todd. Agreement information was sent for 2010/11 and 2011/12.

| Conclusion | Status |
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| Specific agreements have been drafted for the funding to be provided by not only the PCT but the NHS and Devon and Cornwall Police to PCC for the safeguarding provision and training. | Implemented |

| Matter Arising 13 | Recommendation |
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| The information contained within the general ledger shows that budget areas do not have a provision entered, when based on previous years, there should be an expected cost. Advertising and agency are two examples. Additionally, a number of areas show inadequate/inaccurate budget estimates. | and realistic expectations for the year ahead. |
| Original Management Response | |

Original Management Response

This is annually reviewed with input from PCC Finance.

Follow Up - Action Taken to Date

The 2012/13 budget figures from the general ledger were obtained and reviewed.

| Conclusion | Status |
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| As at the 1 st quarter of 2012/13 the number of areas with a spend but no budget was minimal and included two areas where costs had not been incurred in 2011/12. However it should be noted that comment has been made in Matter Arising 16. | iiiipioiiioiitoa |

| Matter Arising 14 | |
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A sample of 18 Service users with an alert date after 31st March 2010, were selected. The electronic protection files in the councils "A to Z" electronic filing system were reviewed. The aim was to confirm the use of the paperwork put in place to support the adult protection process, implemented in January 2011. All 18 had an alert form in place which had been completed by the single point of contact. Only four contained the new response form and three contained a strategy meeting form. The remainder were using either the SS2A form for a variety of purposes or contained no additional paperwork. An additional three closed cases, with a total of five alerts, were reviewed with the Adult Protection Administrator. The lack of adult safeguarher53 ding paperwork and use of SS2A forms was consistent with the 18 cases.

The testing undertaken during the audit clearly shows that staff are not using the correct documentation which combined with the lack of protection information within the A to Z, is increasing the risk to

The specifically designed supporting paperwork is the main evidence of the process and work undertaken, therefore it must be fully and consistently completed. The Safeguarding Adults Team have previously visited staff to provide guidance, this action should be continued where it is felt that staff require further training. It is noted that a new proof of concept team is in place and new processes may be implemented based on the working practices of the Proof of Concept Team.

Recommendation

Original Management Response

vulnerable adults.

Due to the introduction of the new Proof of Concept Team and the planned reorganisation of Adult Social Care there are now more discussions about the value of the new paperwork. These discussions are being held with the Chair of the Safeguarding Quality and Performance Sub Group and the Safeguarding Managers from both PCC and the NHS.

Follow Up - Action Taken to Date

No further review undertaken at this time due to the implementation of the new HUBs changing the process.

| Conclusion | Status |
|--|----------|
| Further work is required in 2013/14 to confirm the recommendation has been actioned. | On-going |

| Matter Arising 15 | Recommendation | |
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| 21 electronic files on the A to Z were reviewed in order to establish that protection plans were designed to give specific outcomes. Although protection plans were not relevant in all cases, only one file contained a protection plan and that plan did not use the document created to support the safeguarding process. | safeguarding is required and there is specific documentation in place to support this. | |
| | | |

Original Management Response

Due to the introduction of the new Proof of Concept Team and the planned reorganisation of Adult Social Care there are now more discussions about the value of the new paperwork. These discussions are being held with the Chair of the Safeguarding Quality and Performance Sub Group and the Safeguarding Managers from both PCC and the NHS.

Follow Up - Action Taken to Date No further review undertaken at this time due to the implementation of the new HUBs changing the process. Conclusion Further work is required in 2013/14 to confirm the recommendation has been actioned. On-going

| Matter Arising 16 | Recommendation |
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| The training budget and actual figures as shown in the Plymouth City Council financial records since 2008 are: | Budgeted figures should accurately reflect the costs expected to meet the provision of services. This will allow a balanced budget to be set so that resources can be committed throughout the year as |
| • 2008/09 budget was £10,000 with an actual spend of £27,129. | needed without concerns over affordability. |
| • 2009/10 budget was £43,627 with an actual spend of £37,778. | |
| • 2010/11 budget was £10,000 with an actual spend of £11,700. | |
| • 2011/12 budget is £10,000 with an actual spend of £25,103 and a further £10,077 committed. | |
| The provision of training to those who may make an alert or be involved in the safeguarding process is an essential part of providing an effective safeguarding service to users. | |
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Original Management Response

This issue will be addressed with the safeguarding adult's workforce development officer when she returns from sick leave. LOG will continue to oversee the training arrangements.

Follow Up - Action Taken to Date

A review of the General ledger was carried out to confirm the end of year figures for 2011/12 and the year to date position for 2012/13. The budgeted figure for 2012/13 was set to £10,000.

| Conclusion | Status |
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| The budgeted figure has remained at £10,000 for the 2012/13 year and has already incurred costs of around £3,000 with another £4.5k committed. Based on the 1 st quarter actual expenditure alone, the budgeted provision is again insufficient therefore it is not considered that this recommendation has been fully implemented. | |

| Matter Arising 17 | Recommendation | |
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| A review of the Keep Yourself Safe Alerter Training was carried out in 2011 by the Social Inclusion Unit which identified areas where changes could be made in order to make improvements. | | |
| Original Management Response | | |
| A detailed independent review of this training element is being presented to the October 2011 SAB and is available to the audit team. | | |

Follow Up - Action Taken to Date

The October 2011 SAB minutes were reviewed and found to contain detailed information on a multi-agency training strategy.

| Conclusion | Status |
|---|-------------|
| The information presented to the SAB is considered sufficient to confirm that work has been undertaken in respect of alerter training and therefore it is considered that this item has been addressed. | Implemented |
| of alerter training and therefore it is considered that this item has been addressed. | Implemented |

| Matter Arising 18 | Recommendation | on |
|--|---|----------|
| Currently an email is sent to notify an investigating team that a referral has been received. | The potential to send a notification of an alert within Carefirst 6 should be investigated. Although not able to store all required information, Carefirst should be considered as the prime record and link to the A to Z. The correct use of Carefirst including the sending of alerts will ensure that there is evidence in place to support the actions taken by staff. | |
| Original Management Response | | |
| The reorganisation of adult social care will ensure this recommendation is met. | | |
| Follow Up - Action Taken to Date | | |
| Further review work has not been carried out. | | |
| Conclusion | | Status |
| The implementation of the HUBs should have addressed this issue. Furth the recommendation has been actioned. | ner work is required in 2013/14 to confirm | On-going |

| Matter Arising 19 | Recommendation |
|--|---|
| Discussion with the Safeguarding Adults Manager identified that the service user feedback provided by the Plymouth Highbury Trust is not providing enough quality information. Statistical information is useful to monitor trends but detailed information is needed to improve services. | safeguarding provision is meeting its objectives. A review of the |

An alternative option for reviewing service user feedback will be presented to LOG in December 2011. The option would entail a more personal approach than the use of a set questionnaire.

Follow Up - Action Taken to Date

Requested update from Adult Safeguarding Manager who advised that this has not been reviewed but the Assistant Director for Joint Commissioning and Adult Social Care has requested that this be reviewed. 2010/11 results were forwarded.

| Conclusion | Status |
|--|-------------------|
| Work has not yet been undertaken in relation to this issue although the Safeguarding Adults Manager advised that this is something that will be undertaken. Further work is required in 2013/14 to confirm the recommendation has been actioned. | 1 10t inipicinica |