

Annual Adult Safeguarding Report

For:	Information
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Summary:	This Annual Report provides the Board with a review of the activity taking place across the Trust to ensure the Trust is able to meet its statutory obligation in relation to Safeguarding Vulnerable Adults.
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Action:	The Board is asked to receive annual report and continue to support the Safeguarding Adults agenda
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Presented by:	Jo Thomas (Chief Nurse)
Author:	Fiona Crimmins (Operational Safeguarding Lead)

Trust objective:	1. Safe, High Quality Coordinated Care
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Legal:	Mental Capacity Act
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Regulation:	Care Quality Commission, NHSLA, supports improved governance and meets requirements in key line of enquiry (e.g. ALE)
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Annual Adult Safeguarding Report

Date	16 November 2011
Author	Fiona Crimmins
Department	Safeguarding Adults, Integrated Governance & Risk
Audience	Members of the trust board

Introduction

This report outlines the work undertaken by the Trust's Safeguarding Adult Team over the past year. The Safeguarding agenda continues to develop in response to both local and national drivers.

The DH (Department of Health) recognises that there are concerns about the identification and reporting of crime against vulnerable adults in care settings and agree that local multi – agency codes of practice are the best way forward. Close links continue with external agencies, in particular with both Sussex and Surrey Social Care Teams and the police. There is a greater awareness amongst staff regarding vulnerable adults and of the occurrence and impact of adult abuse on individuals.

We are looking forward to another busy year and working together to hopefully improve the outcomes and experience of vulnerable people who use our service.

Performance

There have been considerable developments over the last year within the Safeguarding Team. We now have two part time posts. These are the Safeguarding Lead and Safeguarding Facilitator.

Having both posts in place has allowed for a more robust process when responding to allegations of abuse. All wards and departments are aware of the reporting procedures, allowing an effective referral system to Social Services.

Following the recent CQC inspection regarding Dignity and Nutrition, the medical Matrons and the Safeguarding Lead devised a weekly teaching session over a three month period on medical wards and departments discussing the importance of using the IMCA (Independent Mental Capacity Advocate) service and when it is appropriate to request IMCA input. The referrals to

KAG (Kingston Advocacy Group) have shown a good understanding of the IMCA service and the use of the service continues to increase. Whenever possible the Safeguarding Team attends any Best Interests meetings with IMCA involvement.

Monthly IMCA referral numbers are sent to the Safeguarding Team for data collection. There have been 57 referrals in total for the period September 2010 to August 2011. This is down slightly from the previous year; the total for 2009-2010 was 70.

The Safeguarding Team and Human Resources colleagues have worked closely together and the Trust has made a second referral to the ISA (Independent Safeguarding Authority) relating to an allegation made against a member of staff.

The relationship between the Tissue Viability Nurse (TVN) and the Safeguarding Team has continued to develop and there has been a significant increase in referrals to the Safeguarding Team from the wards of Pressure Ulcers grade 3 and 4. This has become more apparent over the last few months.

The Safeguarding Action Plan is still in place. This is continuously changing and being updated.

Excellent working relationships have continued to build between the Safeguarding Team with PALS / Complaints / Safeguarding Children's Team / Governance / Risk / Matrons and other senior clinical staff in identifying trends, gaps and other potential Safeguarding issues.

With two posts now in place, the Safeguarding Team is now more visible throughout the hospital. The team makes regular ward visits picking up any Safeguarding concerns or

issues. By visiting the wards and departments, this has encouraged staff to make enquiries and keep Safeguarding at the forefront of their mind and at the top of the patient safety agenda.

Surrey and Borders Partnership Trust have been successful in appointing a part time LDLN (Learning Disability Liaison Nurse) for Surrey. The LDLN has now been in post since August 2010 and is based at Surrey & Sussex Healthcare NHS Trust two days a week. The LDLN role has proven to be extremely effective. The LDLN has assisted staff with support when faced with challenging situations thus allowing for better experience for patients with learning disabilities. The post holder has worked very closely with the Safeguarding Team and is a fundamental part of team. Sussex Partnership are currently recruiting to mirror the service there.

The LDLN and the Safeguarding Team have successfully enlisted Link Nurses from the majority of wards and departments throughout the Trust.

Training

Training is an integral part of the Safeguarding agenda. The Safeguarding Team has been able to raise the awareness of the MCA (Mental Capacity Act), DoLS (Deprivation of Liberty Safeguards) and Best Interests in a number of settings.

Over the past year, the training includes one session with doctors and both clinical and non clinical staff. The team has also been involved in assisting with the Staff Nurse Preceptorship Programme and teaching for nurses that have joined the Trust from other over seas.

The Safeguarding Team also ran a “Drop in Day” in May with rolling awareness sessions. This was for staff to attend as many sessions as they wished throughout the day. The topics discussed included MCA, DoLS, Domestic Violence, Forced Marriage, Learning Disabilities, Discharging Vulnerable Patients and the role of Social Services.

In June of this year, the DCN (Deputy Chief Nurse) was approached by a local acute Trust and asked if we could assist in providing four days training for their staff. Over the four days, approximately 1000 members of staff attended an awareness sessions

covering the types of abuse, MCA and DoLS, IMCA and Safeguarding facilitated by the DCN and the Safeguarding Team.

The Statutory and Mandatory training continues to be well evaluated. 1446 Staff have had some training in Safeguarding for the period from September 2010 to August 2011.

One of the biggest challenges continues to be the lack of robust training for doctors. This has not progressed since last years Annual Report and is still an area of concern despite efforts by the team. The Safeguarding Team and the DCN are working with the Medical Director and Medical Education Lead on this.

Challenges

The main challenge continues to be the lack of robust doctor training and a named doctor for Safeguarding Adults. There have been some discussions; however there is yet to be a named doctor for the role.

Excellent communication for patients is essential to ensure safety and the best possible experience. Communication between Surrey & Sussex Healthcare NHS Trust and some community settings has been an area that could be more effective. Unfortunately breakdown in communication has caused problems for staff and patients and carers. This has mainly been when patients are admitted to hospital and have not brought relevant information or paperwork, such as Hospital Passports, information or details of a patients needs such as one to one care. This has often led to added pressure of difficult and challenging behaviour where staff has been faced with unpredictable behaviour and difficult situations to deal with.

Even though there are now two part time posts within the Safeguarding Team, workload is a challenge as commitments to teaching and alerts have continuously risen over the last year. Protected time to update paperwork, databases and policies and procedures has been difficult to maintain as the team currently have no access to administration and clerical support.

Activity

Following television programmes as Panorama's "Undercover Care" in Bristol about Winterbourne View Hospital and Dispatches on Channel 4 in February in which Surrey & Sussex Healthcare NHS Trust was named, Safeguarding has been high on the agenda. This is obvious from the increase in Safeguarding Alert Forms completed. This has heightened staff awareness of the issues surrounding abuse and neglect, both in the community and in the acute setting, including institutional and professional abuse.

There have been 168 referrals to the team for the period from September 2010 to August 2011. The Medical Directorate was the main referrer. Alerts peaked in March and August at 22 referrals each for these months. March may be explained following the Dispatches programme which was aired a month before. There is no explanation for August's high reporting rate. Godstone Ward was the highest reporting ward, with the Emergency Department, Meadvale and Nutfield following closely behind. Of the 168 referrals, 17 were raised where the patient had a learning disability.

Neglect was the main form of abuse that was reported, with physical abuse and pressure ulcers following closely behind.

However these numbers do not show all other referrals or enquires that are made to the Safeguarding Team. We are presently gathering data regarding this and will be providing quarterly reports to the Safety and Quality Committee.

The Year Ahead

The Safeguarding intranet page is to be redesigned and with links to important national documents as well as information for staff. There will also be a public facing internet page.

The reporting system will become paperless, alert forms will be completed online and sent directly to the Safeguarding Team, therefore ensuring that no alert raised is lost.

The introduction of Cerner's flagging process will be another system in place ensuring that patients that are at risk are highlighted. This will assist with communication if patients are flagged on arrival and will encourage better liaison between hospital and community staff which will lead to more effective patient centred care.

The team is working towards 24 hour cover for Safeguarding and plans are in place to train senior staff to "signpost" junior staff with a baton bleep system. This will ensure that staff will be able to access support and information. This will lead to any Safeguarding concerns regarding patients being dealt with swiftly and robustly.

The Safeguarding Team will become further involved with the Violence and Aggression Working Group. This will be to highlight issues about patients without capacity who have challenging behaviour e.g. dementia and learning disabilities. The issue of restraint will also be addressed by this group and the Safeguarding Team will work with the group to ensure there is no breach of the deprivation of liberty safeguards.

The Adult and Child Safeguarding Teams now do joint training on the Mandatory and Statutory Update Days.

The Safeguarding Team are planning to pilot the "Sit and See" Framework. This is an observational tool which monitors staff kindness and interaction with patients. This is for all members of staff, both clinical and non clinical across all bands and roles within the Trust.

The Safeguarding Team will introduce a Safeguarding Resource Folder for all wards and departments and audit their use to see if they have assisted staff when faced with Safeguarding issues.

The Safeguarding Team will continue to work on the Action Plan that has been developed in conjunction with Healthcare for All, CQC guidance and other National Reports and drivers.

The team will continue to work with the Medical Director and the Education Team towards a robust solution for doctors training.

The team will also continue to work closely with Local Authorities and Police and continue to make links with other agencies such as ESDAS (East Surrey Domestic Abuse Service) and WORTH services in Sussex.

The team will review policies and guidelines and introduce a “Self Neglect” Policy to promote choice and positive risks for patients with capacity that make “unwise decisions”.

The Trust is continuously learning from previous alerts and putting systems in place allowing us to move forward in Safeguarding the people who use our services.

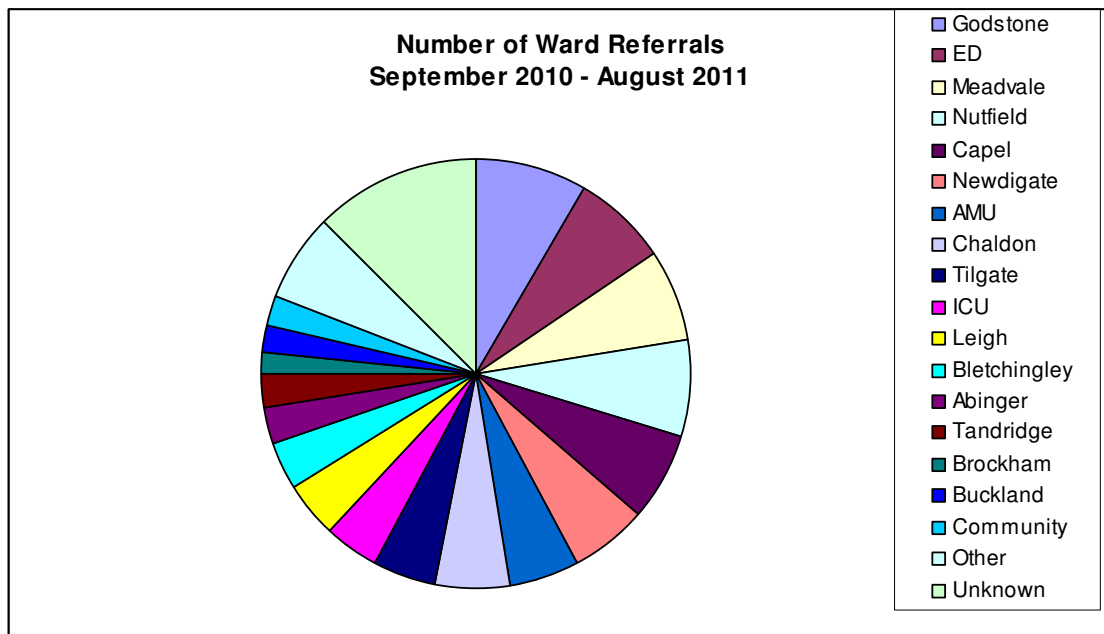
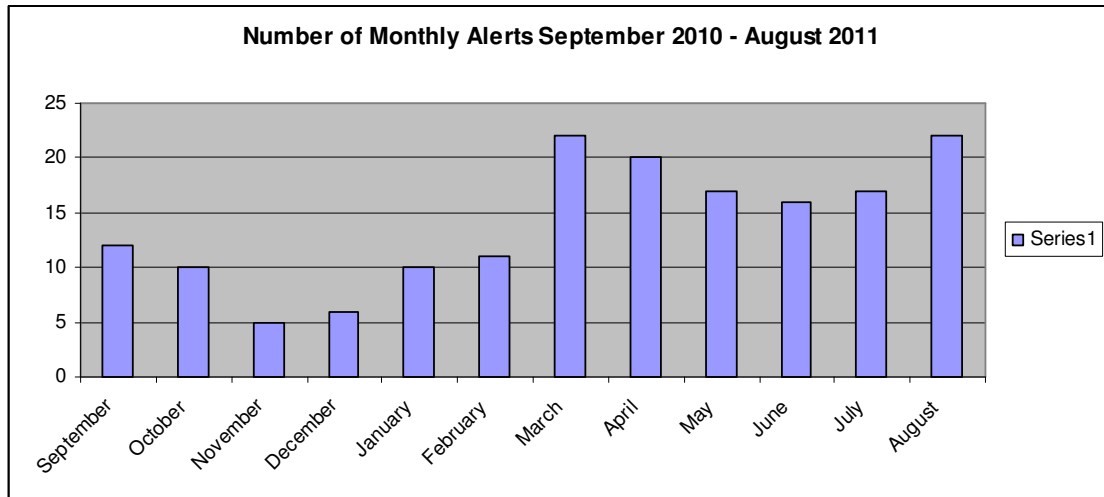
Conclusion

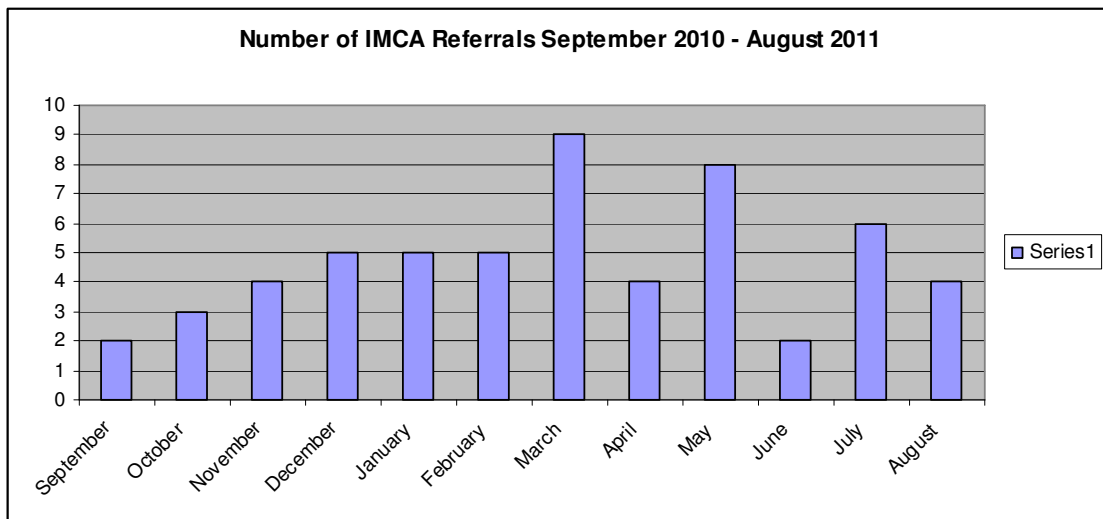
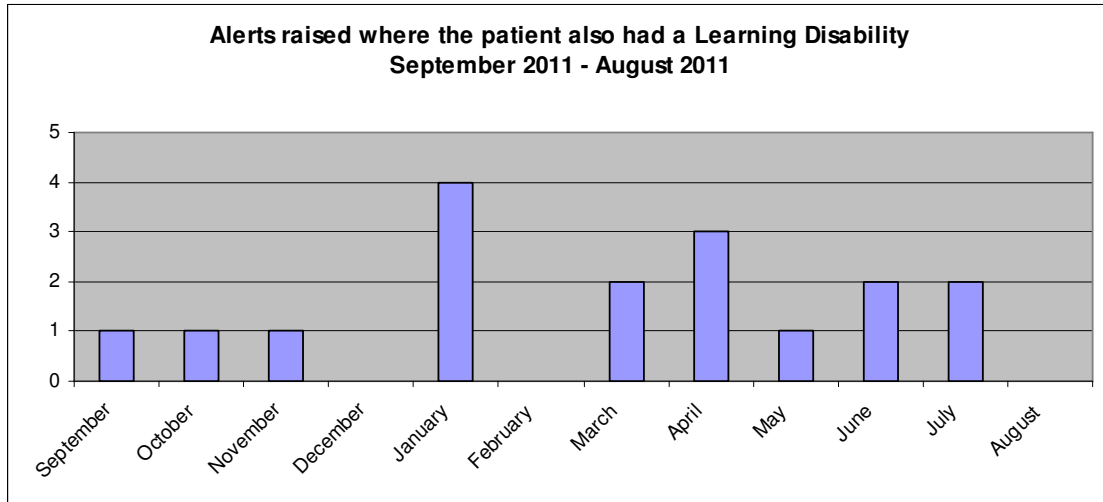
The Safeguarding Team will continue to raise awareness and ensure that across the Trust Safeguarding Adults is seen to be everyone’s business. The activity information herein demonstrates that there is an increase in referrals. This demonstrates positive reporting and indicates that more staff are concerned about actual or potential abuse of vulnerable adults and know how to report this.

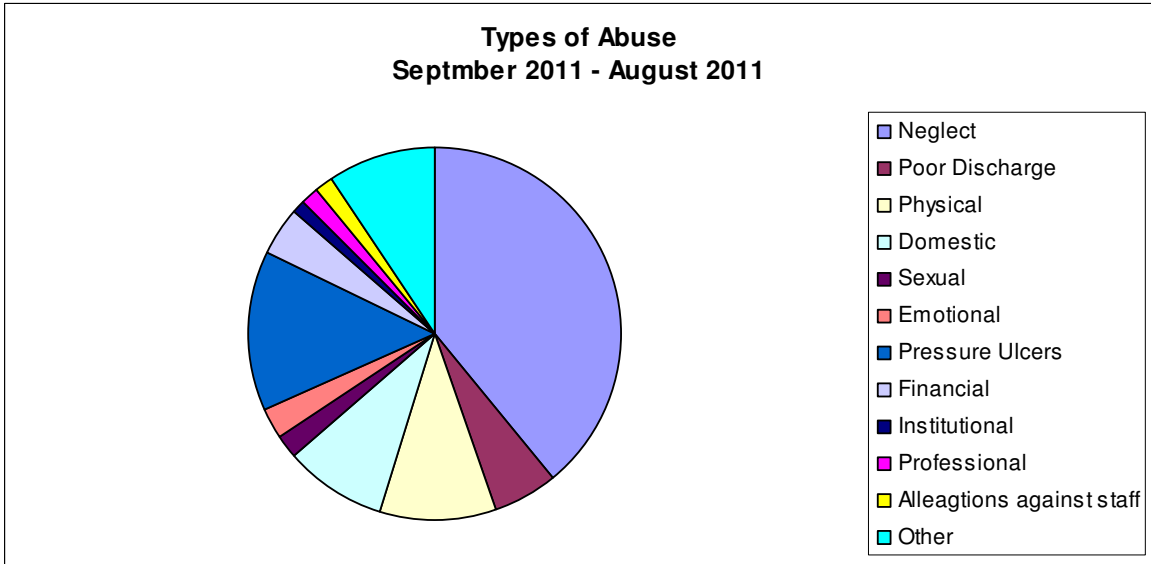
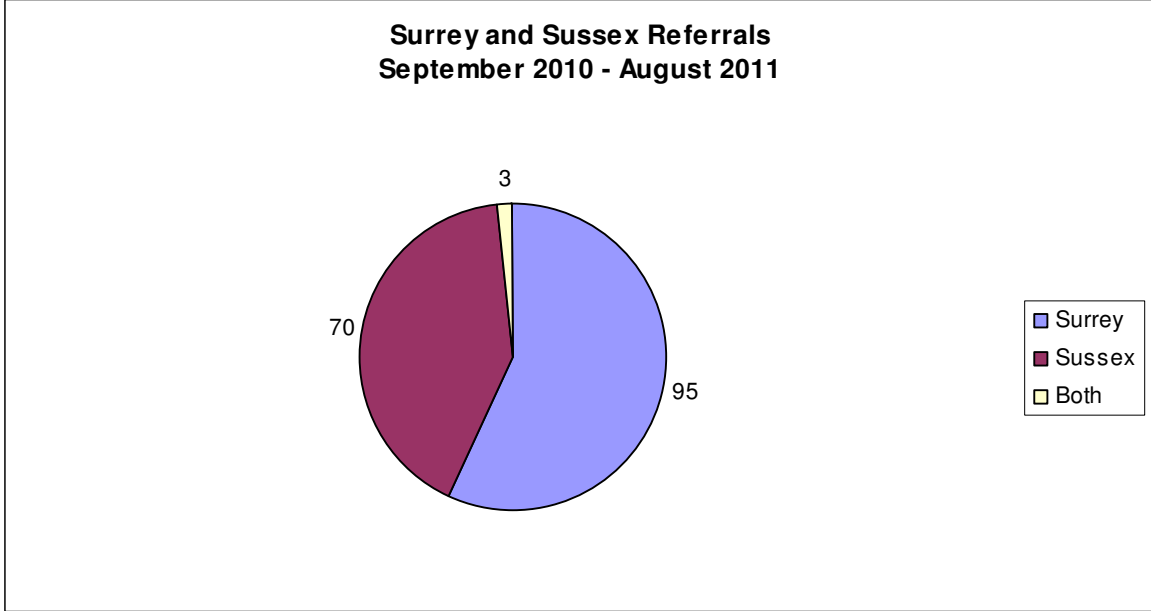
However, there is still work to be done to raise awareness across the Trust so that all staff groups recognise the signs of abuse. Work will continue with both internal and external agencies to create a climate of zero tolerance to abuse of vulnerable adults.

The Trust Board is asked to receive this report and to continue to give its full support to the Safeguarding Adults agenda.

Breakdown of Referrals from September 2010 to August 2011







Neglect	66	Pressure Ulcers	23
Poor Discharge	9	Financial	7
Physical	17	Institutional	2
Domestic	15	Professional	3
Sexual	3	Allegations against staff	2
Emotional	5	Other	16

Ward Referral Breakdown September 2010 - August 2011

WARD/MONTH	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	TOTAL
Godstone	2	1	1		1		4	1		1	1	2	14
ED	2	2			3	1	1		1		2		12
Meadvale	2	1	1				2	1	1		3	1	12
Nutfield		3			1				3	3	1	1	12
Capel		2	1			1	2			2	1	2	11
Newdigate				1		1	2	1	1		2	2	10
AMU	1			2			1		2		1	2	9
Chaldon				1			1	3		1	1	2	9
Tilgate		1							2	2		3	8
ICU					1				1		3	2	7
Leigh	1					1	1	2	1	1			7
Bletchingley	1				1		1				1	2	6
Abinger	1			1		1		1	1				5
Tandridge							1		1	1	1		4
Brockham							1					2	3
Buckland	1						1		1				3
Community			1				2		1				4
Other			1	1	1	2	1	1	1	2		1	11
Unknown	1				2	4	1	10		3			21
TOTAL	12	10	5	6	10	11	22	20	17	16	17	22	168