Croydon Safeguarding Adults Board

Annual report
2021 / 2022

"Working together safeguarding, supporting and making services better for adults in Croydon who are at risk of abuse and neglect."

Contents

Foreword by the Independent Chair

Welcome to the 2021/2022 Annual Report of the Croydon Safeguarding Adult Board

This is my fifth annual report and my last as Independent Chair of the Safeguarding Adults Board (SAB) in Croydon. I am delighted to hand over to the former Vice Chair of the Safeguarding Adults Board, David Williams. I'm very aware of the value his considerable expertise and experience will bring to the role.

This report reflects a period of time when lives of all residents of Croydon continued to be heavily affected by Covid. All services responded to ensure the safety of those most vulnerable and became ever more flexible, working hard across previous boundaries, focused always on responding to need. Safeguarding Adults Board Members played their role in working together supporting, challenging and improving services throughout that time.

It has been my honour and my privilege to lead a growing and developing Safeguarding Adults Board (SAB) through those periods of unprecedented change and challenge. I have appreciated the opportunity to do so. The engagement in Safeguarding Adults work coming from extraordinarily busy operational services across all partnerships during a time of extreme pressure, has been remarkable to experience.

The SAB reorganised in 2018 and establish a board with working subgroups all led by experts in their field and attended by relevant managers and staff from each of the services. The Chairs and Vice Chairs of those subgroups informed and led progress that has made services safer for residents of Croydon.

As a group, those Chairs were a source of support to me and informed and shaped our shared agenda. Always helping us remain relevant to services, ensuring high levels of engagement.

They are the Serious Adult Review Sub Group (SAR) led by Dr Shade Alu which assesses whether cases referred meet the criteria for a serious adult review or a different kind of response.

The Performance subgroup, led by Nick Sherlock provides important assurance to the Board about the volume and quality of safeguarding adult services in Croydon informed by cross sector data and narrative from operational managers.

The engagement subgroup led by Nicky Selwyn in recent years quickly engaged senior leaders and managers from a range of organisations providing services, especially those from minority ethnic communities. Through that we are assured that services are working hard to meet the needs of all residents of Croydon.

The Learning and Development Subgroup, led by David Lynch from the South London and Maudsley is focused on making sure we, in all sectors, learn from incidents where services have not, provided what was needed to keep people safe. So improvement continues.

Foreword by the Independent Chair

Welcome to the 2021/2022 Annual Report of the Croydon Safeguarding Adult Board

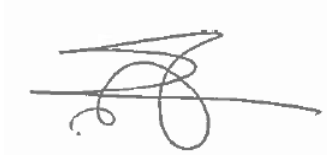
The intelligence Sub Group, developed in Croydon, brings together important information across all sectors about residential nursing and home care services. This is for obvious reasons extremely important to the Safeguarding Adults board and we are fortunate to have Estelene Klassen as it's Chair.

This report is a reflection of the hard work, commitment and expertise of all Sub Group and SAB Members. It reflects their willingness to work together to challenge and support and make improvement in services to the public.

I want to thank all SAB Members for their work and support over the past five years and especially want to thank the safeguarding adults board team Denise Snow and Lesley Weakford for providing much needed support to the Board during my tenure.

I commend this report to you and warmly recommend that you read it and look at everything that's happening in Croydon to make services safer. I wish the board and the ongoing work on Safeguarding Adults in Croydon every success.

Annie Callanan
Independent Chair



Welcome to David Williams, the newly appointed Independent Chair

After 17 years of safeguarding experience in my previous role I am excited to take on this new role. I firstly would like to thank Annie, the previous chair, for her commitment and determination in progressing the board's agenda and profile over the last 5 years. My focus going forward will be on the Voice of the Community, helping to encourage prevention strategies across all partners to reduce risk. I want to ensure the profile and learning from the board and its vibrant sub-groups, helps to inform and develop best practice across agencies with the aim of improving outcomes for the most vulnerable. In addition, I am very pleased to announce that Andrew Brown, Chief Executive of the Croydon BME Forum, has agreed to take on the role as the Vice Chair of the Board and is also passionate about taking the progress of the Board forward

Voice of the People

Mr X feels so much better after speaking to me and appreciates me contacting him. It was agreed that xxx could call me if he thinks of anything and I will be in touch.
[Feedback to S42 Team]

Mind in Croydon have picked up more safeguarding alerts than ever as we provide more services to more people across the borough
[Mind in Croydon]

I know XX agree that without your concern in the circumstances surrounding XX case we may not have got this far. We asked for our thanks to you to be recorded in minutes of the meeting on Thursday, since you had to leave the meeting before it ended.
[Feedback to S42 SW]

Feedback received from an adult the SW was supporting around domestic abuse. The adult is being supported to move to extra care housing after many years of abuse from her partner.

"I just wanted to thank you from the bottom of my heart for all your advice! Support and kindness. I really do appreciate it. You have been so kind and I do not know how I would have coped without your support and guidance."

Thank you for this and your other reports, and for your support to the family in taking the initiative to establish this safeguarding review.

I know Miss X and Miss Y agree that without your concern in the circumstances surrounding Miss Z case we may not have got this far. We look forward to the SAR and hope to get to the whole truth, to have answers to the many failings that have been identified, and some accountability, so this terrible tragedy doesn't happen to somebody else.

[Comment from family on a S42 Social Worker]

Providers are telling us that they feel more supported and see that Croydon as a total system is supporting a market that supports our residents

Good Practice Across the Partnership

Working along side the National and London SAB Chairs networks it has been proposed to escalate to the DHSC an issue of the lack of strategy when it came to placements/accommodation within the Madeleine SAR.

Other boroughs across London are also taking the learning from the Madeleine SAR by taking the recommendations forward.

What is the adult at risk saying?
There is evidence of partnership working across statutory partners and the voluntary sector.

Working in partnership with Ingram Court youth hostel, NHS SWL CCG hosted a health and wellbeing day recently for young people experiencing homelessness to reduce barriers to accessing health services. In collaboration with partners from local health and care services including Mind in Croydon, Off the Record, Change Grow Live, Aids Healthcare Foundation (AHF) and NHS sexual health, the health promotion event created an opportunity for vulnerable young people to familiarise them with the free health and care services available throughout Croydon.

Mind in Croydon and BME Forum working together on the MHPIC , Mind in Croydon have been able to pick up more safeguarding alerts as this service gives them further reach into communities – visiting people at home.

SLaM and the BME Forum jointly hosted a ADHD and Autism support group in February 2022 for clients while waiting to be seen by the neurodevelopment team at SLaM.

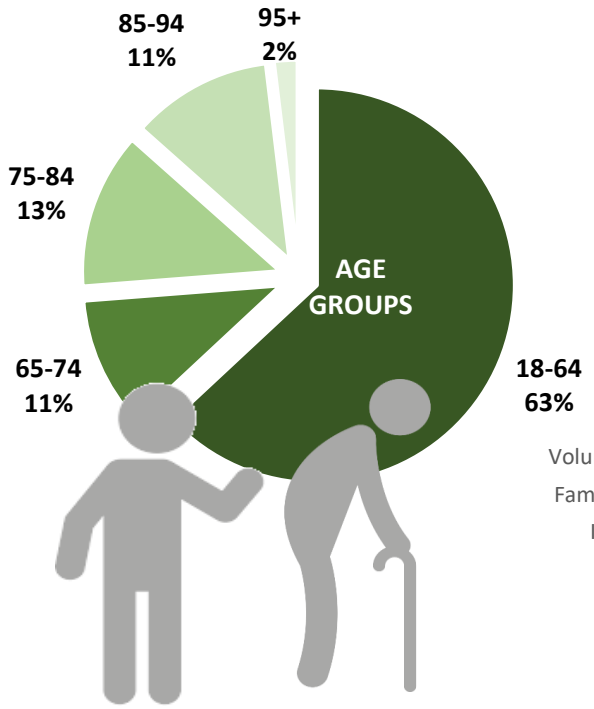
The Police established a one front door approach for strategy meetings to increase the number of strategy meetings the police are able to attend. This has included establishing a weekly escalation meeting between partners to ensure learning and best practice are shared.

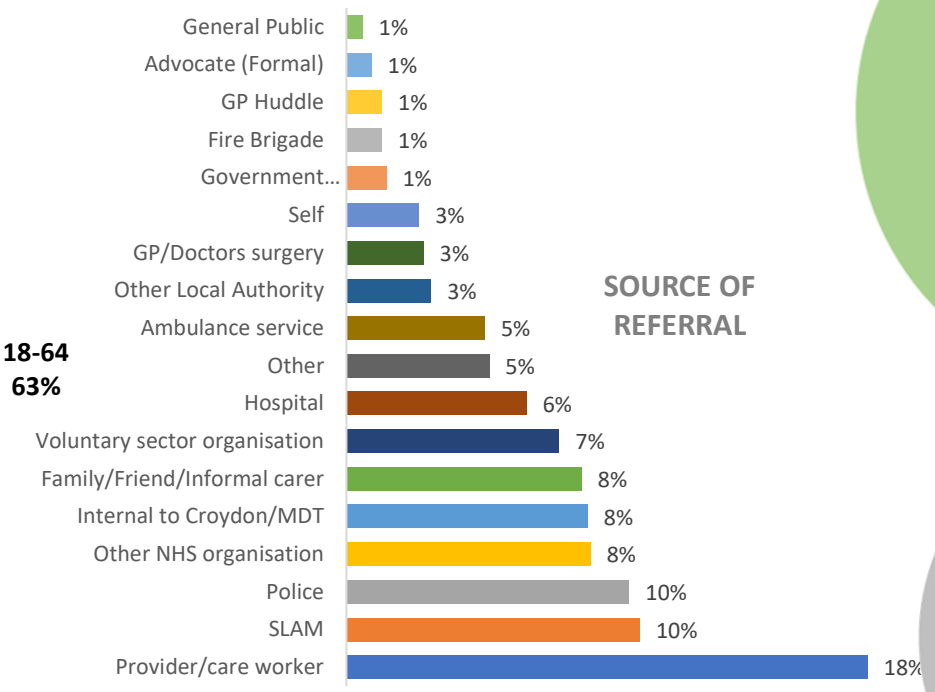
A new collaboration between Mind in Croydon, Croydon BME Forum and the South West London CCG – the Croydon Health and Wellbeing Space (CHWS) – a space for early intervention and BME engagement

Response to provider failure – increased amount of inspections of provisions happened in the second half of 2021/22 as pandemic shift changed. Several examples of cross partner work to increase quality of care and see sustainable improvements

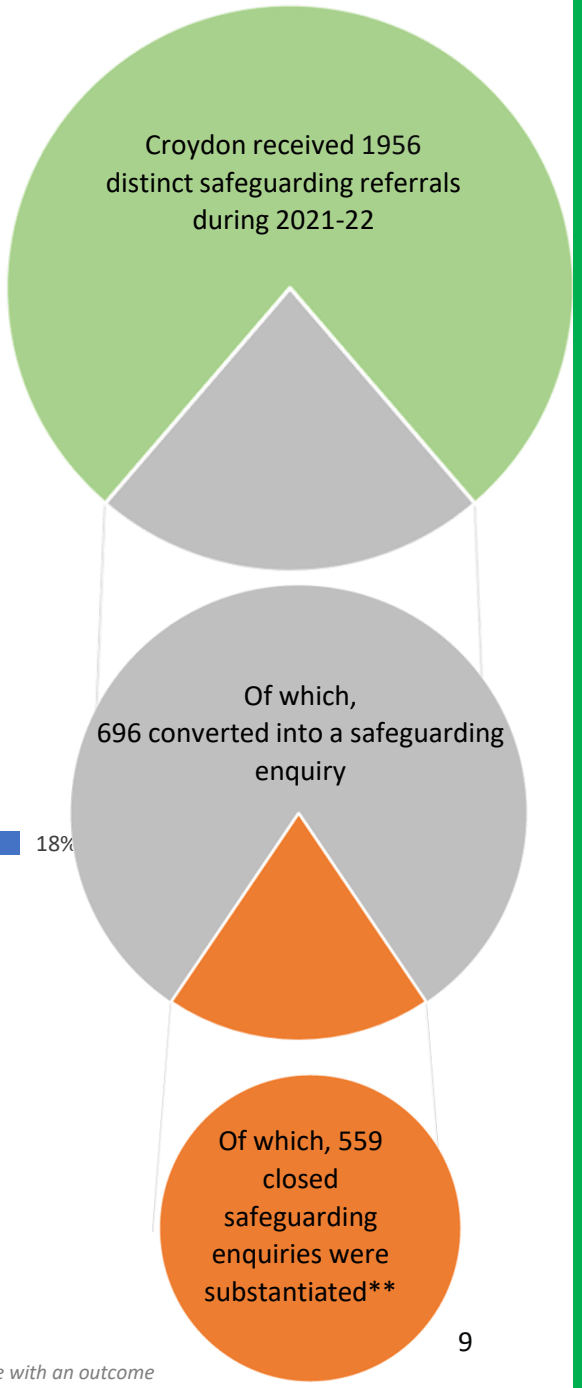
Safeguarding Statistics 2021 / 2022

Safeguarding Referrals Received during 2021-22

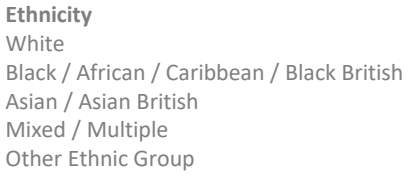


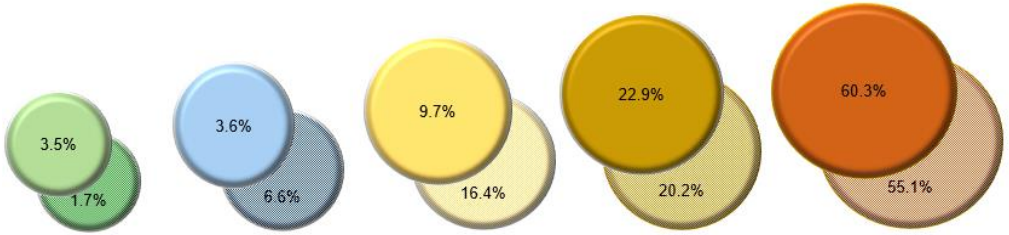


SOURCE OF REFERRAL



ETHNICITY OF REFERRALS vs ETHNICITY OF CROYDON POPULATION





Compared to the ethnicity of Croydon population, Asian / Asian British are underrepresented for Safeguarding Referrals.

Black / African / Caribbean / Black British safeguarding referrals are 1% below its Croydon population percentage.

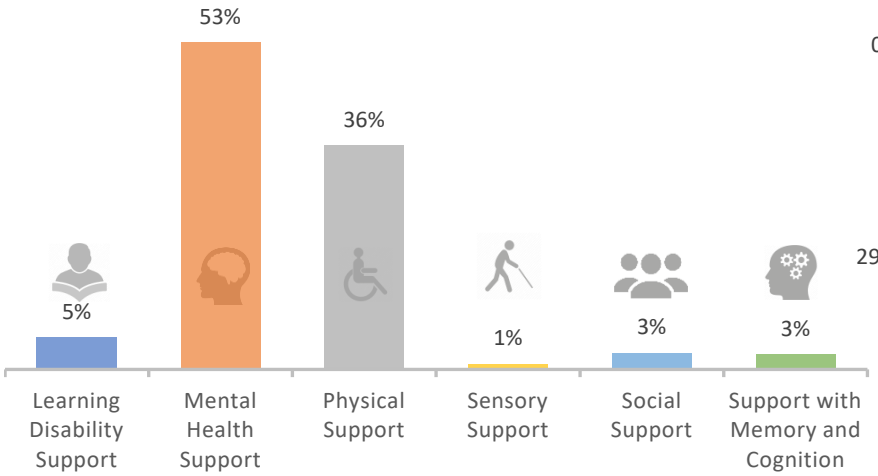
***Of those with an outcome*

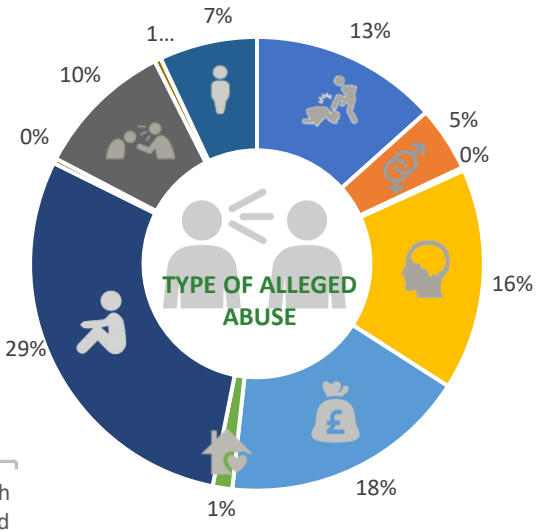
Safeguarding Enquiries Started during 2021-22

Of the

698

Safeguarding Enquiries started in 2021-22 (up from 524 in 2020-21)





Of which, 76% of closed safeguarding enquiries were located within the community *(compared to 77% in 2020-2021)*

Of which, 25% of closed safeguarding enquiries were located in a Care Home *(up by 3% from 22% in 2020-2021)*

Of which where a risk was identified, 94% resulted in risk reduction or emoval *(up by 7% from 87% in 2020-2021)*

251	Neglects and Acts of Omission
152	Financial or Material Abuse
136	Psychological Abuse
115	Physical Abuse
85	Domestic Abuse
60	Self-Neglect
40	Sexual Abuse
12	Organisational Abuse
4	Sexual Exploitation
3	Discriminatory Abuse
2	Modern Slavery

Of which, 98% of adults felt they lacked mental capacity but they were all supported by an advocate, family member or friend *(up by 24% from 74% in 2020-2021)*

Of which, those that were asked their desired outcomes, 94% were either fully or partially achieved. *up by 8% from 86% in 2020-2021)*

Lay Member

The role of Lay Member

A Lay Member will act as an independent voice and offer a wider perspective that recognises the diversity of our local communities in Croydon. Croydon SAB currently has one Lay Member who provides this contribution to the Annual Report and sits on both the Board and the SAR Sub Group.

Lay Members play an important role in the oversight, scrutiny, decisions and policies made by the Croydon Safeguarding Adults Board.

The CSAB are keen to recruit further Lay Members going forward.

CSAB Meetings

The meetings of the Board have been enriched by the presentation of cases. The complexity and challenges of some people's lives and the need for effective and timely support are well demonstrated.

Safeguarding Adult Review [SAR] Sub Group

The SAR sub-group has commissioned more SARs and learning reviews. The completed SARs have provided a large number of important recommendations to improve services and provide more effective and co-ordinated interventions. A particular challenge involves people (often young people) being placed n Croydon by other local authorities.

Safeguarding Adult Reviews

The CSAB published four SARs during this year and below you will find the summaries for each of the reviews outlining the background and recommendations. The link below will take you to the full reports and the 7 Minute Briefings which provides updates on the recommendations.

https://www.croydonsab.co.uk/about-us/safeguarding-adult-reviews/

Mr Hong
Duncan
O1
Madeleine

Safeguarding Adult Reviews – Mr Hong

Background

Mr Hong was 59 years old when he died. He came from the People's Republic of China and was a failed asylum seeker in the UK, where he had been living on his own for over 17 years. Mr Hong's first language was Mandarin and he had limited use of English.

Mr Hong had kidney failure and received regular kidney dialysis in hospital. He was also lonely, depressed and anxious about his future. Following a long stay in hospital, Mr Hong was discharged to a nursing home where, three weeks later on 12.07.17, he killed himself by hanging using the alarm pull cord in his room.

Key Learning

History taking, identifying risk factors, spotting patterns and escalation are essential activities in managing suicide risks. Mr Hong had chronic health problems, reduced quality of life and little social support. He was isolated and lonely since he had little understanding of English. Mr Hong was a man who had experienced stressful life events and was from an ethnic minority group. His asylum claim and right to appeal had been rejected and he faced deportation. Find out about people's lives and how their experiences and understanding of them might increase their risk of suicide. Suicide can be hard to predict and prevent so make sure that everyone involved in a suicide safety plan, including the person at risk of suicide, agrees and understands what the plan is and what their role is. Do not be falsely assured that just because a plan is in place, it will be followed properly. Mr Hong's alarm cord was removed but was then returned to him so he could call for help. Always check.

Use interpreters and advocates for people who do not speak English and who are isolated. Do not rely on ad hoc interpreting arrangements and contact community groups and other cultural and language-based services even if they are not in your local area. Mr Hong was maintained in isolation. Make sure that someone who does not speak English understands what is happening to them and what the options available to them are.

Work together with social and health services, care providers and the Home Office to support people who are seeking, or have failed to claim, asylum. Share information and concerns and agree how best to meet social and health care needs.

What has changed

The Home Office has introduced local safeguarding teams to improve how asylum decisions are served to potentially vulnerable people. The Language Line interpreting service provides Mandarin speakers. The London Borough of Croydon is introducing a Dynamic Purchasing System to expand the range of providers who can meet specific cultural needs. The LB of Croydon social workers, in an emergency, can authorise services for up to three days without managerial approval.

Safeguarding Adult Reviews - Duncan

Background

Born on 29 April 1983 and died at the age of 35 on 5 October 2018. He was White British and had fallen from a building and the cause of death was regarded as a possible suicide. Records indicate he had been adopted at the age of 7 but later his relationship with his adopted parents is said to have broken down but he didn't speak about his life.

Duncan had a longstanding mental health problems dating back to around 2008, with several hospital admissions under sections 2 & 3 of the Mental Health Act 1983. He had various diagnoses recorded including paranoid schizophrenia. There is an history of concerns around suicidal ideation. He experienced periods of homelessness and of living in hostels. He was known to misuse substances.

Making Safeguarding Personal

Duncan did not readily engage with offers of support. There is a repetitive cycle of hospital admissions, hostel accommodation, substance misuse, lack of compliance with medication. Duncan wished to live independently but his option was not pursued.

How well are we working with people who present multiple needs who find it difficult to engage?

- Are they not engaging with us or are we not engaging with them?
- How do we know the people we are working with?
- Is there sufficient focus on the impact of trauma and adverse experiences?

Terms of Reference : To consider

- Assessment and risk assessment
- Mental Capacity assessments (executive functioning)
- Responses to homelessness and temporary accommodation
- Agencies working together
- Information Sharing
- Responses to substance misuse
- Provision of Mental Health Services and support.

Lines of Enquiry:

- Responses to Mental Health
- Responses to substance misuse
- Staff support
- Working together and multi agency meetings
- Risk assessment
- Making Safeguarding Personal
- Street-based living and hostel provision

Safeguarding Adult Reviews – O1

O1 was a white British man who lived with his wife and his daughter who was known to mental health services. O1 had retired early to help care for his daughter. His wife described him as jolly, outgoing and optimistic but said he could also be short-tempered, aggressive and dependent on alcohol. O1 was the dominant person in the household; no-one in the family was prepared to challenge his views, especially around seeking help.

Concerns were raised in 2014 around self-neglect and hoarding. O1 was reluctant to engage and offers of support were declined. Four years later, a family member contacted Adult Social Care expressing concerns about the state of the home. Advice was given but the concern was not progressed and O1 remained on a waiting list.

In October 2018 O1 was admitted to hospital suffering from pressure ulcers and in a critical state. He was later discharged to a care home due to the state of the family home. In December 2018 O1 discharged himself from the care home and was not seen by agencies until early January 2019. He had been lying on the floor for several weeks and had significant pressure ulcers across multiple areas of his body. O1 was again admitted to hospital and recovered. He moved permanently to a nursing home and died in May 2020 aged 87.

The SAR noted lack of follow up when concerns were raised, missed opportunities for preventative work, risks not being considered.

Recommendations

- Improved understanding of safeguarding referral processes for GP practices and mental health staff.
- Safeguarding training, highlighting self-neglect, for hospital staff.
- Develop effective ICS governance around understanding safeguarding.
- Ensure clinicians know how to highlight safeguarding concerns.·
- All agencies to review and audit safeguarding supervision arrangements.
- Professional Curiosity must be challenged and aired in supervision with time for critical reflection.
- Adult Social Care to: Improve internal communication between teams and external communication with other agencies; Improvements made following key changes implemented in ASC to be reviewed.
- Improved communications between and across all agencies to be audited by CSAB.
- GP registration to be better understood across agencies.
- Improvements to be made in commissioning guidance on discharge summaries and audit; also on commissioning guidance for care homes.
- Learning across agencies around risk and risk assessing practice and creation of a CSAB single risk management strategy.

Safeguarding Adult Reviews - Madeleine

Background

Madeleine was of mixed ethnicity (White British/Black Nigerian), she was 18 years old when she died and was well known to many services. She had a long history of mental health (CAMHS) support from a very young age, including being an inpatient when she was 9. At 16 her parents were told that CAMHS had 'tried everything' so they should ask for help from social care. Madeleine had a diagnosis of Autistic Spectrum Disorder, 'emotional dysregulation' and Obsessive-Compulsive Disorder. She had an education, Health and Care Plan but despite this had been excluded from schools because of her behaviour which was challenging. She was first assessed by social care services when she was 12 and at 16 she was taken into care. She experienced 8 different placements in 5 months and was then placed in secure accommodation in Scotland. Shortly before her 18th birthday she moved from there to an Independent Living placement in Croydon. Despite having reached adulthood, coordination of her care needs remained the responsibility of LB Wandsworth's Children's Social Care.

On the evening of the 13 August 2020, whilst at her placement, Madeleine took Ketamine. Staff called 111 for advice. A short time later, staff found her suspended from her door. She was taken to hospital and died on 16 August 2020.

Recommendations

- To review case files of young people with complex needs who require robust transition planning to protect them against harm. This must included information about how the voices of young people have been included within the care plans.
- To support practitioners in improving their legal literacy, particularly in relation to mental capacity for young people and knowledge about autism and how practitioners can made reasonable adjustments to services and care plans, in accordance with guidance and legislation.
- To improve multi-agency care planning for young people who transition into adult services and involve young people at every stage.
- To review protocols of oversight of young people with care and safety needs who are the responsibility of one l one local authority but placed in another.
- To provide more extensive information and guidance about the Transitional Safeguarding needs of care experienced by young people.

CSAB Priorities 2021/2022




CSAB Priorities 2021 - 2022

PREVENTION

What has been done

- The data shows a drop in contacts which become adult safeguarding concerns / referrals. This is a result in the changes in process. Croydon Adult Support team now screen all 'at risk contacts' to ensure they are appropriate for a safeguarding response. What we have found in the past is many such contacts are better dealt with outside the safeguarding process in a more supportive / preventative model which generally results in better outcomes for Croydon residents. This has a positive impact through the safeguarding system ensuring that the safeguarding process of S42 Enquires is focused on those people who would benefit from this intervention. This change in process has enabled a stronger focus on prevention.
- A central transformation team with a multi-agency group from health and the police established the new NHS 0300 process to enable officers to have up-to-date information and advice when dealing with mental health incidents. This gives greater confidence to officers dealing with incidents, greater knowledge and clearer decision making processes based on evidence from medical practitioners.
- A central transformation project has also been working to improve the police response to mental health incidents. The creation of a new digital process is due to go live in the next few weeks so that officers can share information to the mental health team for those in mental health crisis which reduces handover times and allows the medical team have the information in advance of the individual arriving.

What needs to be done

- Police to continue to work towards a fully embedded "one front door" approach for vulnerable adult enquiries. This builds on the successful one front door for children which has reduced delays and improved information sharing with our partners. This approach will encourage strategy discussions between police and partners and provide a central point of contact for partners.
- The dedicated mental health team will continue to work with high volume service users
- Police to continue training on mental health, wellbeing, neurodiversity and the anticipated changes as a result of the Liberty Protection Safeguards (LPS)
- Police continued focus on Violence Against Women and Girls (VAWG)
- Police continued focus on Serious Youth Violence
- Mind in Croydon would like to see further building on the training offer for delivery partners, improving front line staff members ability to pick up on safeguarding issues.
- Continue the work of the VOTP sub-group around awareness of how to report abuse as this is pivotal so residents act if they have concerns.

CSAB Priorities 2021 - 2022

PREVENTION

What has been done

- Police have continued to focus on serious youth violence which causes fear, ill-health and loss affecting individuals and communities.
- The continuation of the Crisis Assessment Team (CAT) care programme where health professionals and the police jointly respond to urgent crisis calls with the aim of reducing the need for Section 136 and ensuring early diversions and support are put in place.
- The designated nurse has been proactively involved in the Safe and Wellbeing Reviews Integrated Care System Oversight Review Panel. This was set up following the publication of SARs by Norfolk SAB Joanna, Jon and Ben - published September 2021 | Norfolk Safeguarding Adults Board
- Development of the LA Autism service, moving back to face-to-face work.
- SARs will always highlight the failings but there has been good work taking place between ASC and Mental Health and we need to keep this in mind.
- The Police created a local violence against women and girls plan to drive activity locally in line with the Metropolitan Police Strategy. This has included the creation of the Predatory Offender Unit who focus on arresting high harm domestic abuse suspects.

South West London Integrated Care System

Integrated Care Systems [ICS] have four key purposes:

- Improving outcomes in population health and healthcare
- Tackling inequalities in outcomes, experience and access
- Enhancing productivity and value for money
- Supporting broader social and economic development

Croydon are part of the SWL ICS along with the boroughs of Sutton,

Background: Living Independently For Everyone (LIFE)

Both current and traditional ways of working need to change fundamentally if we want to further improve the health and wellbeing of the people of Croydon. Too many of our services are focussed on supporting those in crisis rather than preventing them getting to that point. One Croydon is developing transformational models of care so that we work to support people to stay well for longer.

LIFE

We have created a 'One team, One name, One resource' approach to the delivery of services through the LIFE service. LIFE is an integrated, community-based single team of staff drawn from across reablement, rehabilitation, intermediate care, health and social care professionals, clinicians, and colleagues from related community organisations within the 3rd Sector.

What we want to achieve:

Building on success of the LIFE service, we want to take our integration to the next level by having fully integrated teams between acute and community, integrated IT & financial systems and integrated leadership. We want to expand by creating 6 integrated teams in each locality to support people remain in the community (Integrated Community Networks ICN+)

ICN+ core team

A physical space in each locality for co-working and joint clinics

IT solutions for virtual MDT meetings and flexible working

Management of locality health and care budget

- Integrated manager
- Social workers
- Community Nursing
- Occupational Therapists
- Physiotherapists
- Pharmacist
- Network Facilitator
- Talking Therapist
- Mental Health Practitioners
- Live Well Service
- Community Builders
- GPs
- Geriatricians
- Personal Independent Co-ordinators

CSAB Priorities 2021 - 2022

COMMISSIONING

What has been done

- The Police continued to review all incidents involving vulnerable adults and care homes and consider a SAR referral when an adult dies or is seriously harmed as a result of suspected abuse or neglect and there is concern that partner agencies could have worked together more effectively to protect the adult.
- CHS appointed a DVA support worker to work alongside the IDVA and drive improvements with the management of domestic abuse in the Trust.
- Regular meetings with providers to give training and updates on policies/procedures were carried out by the Commissioning Team at the L.A. This was a new approach which started in 2020/21.
- Regular monthly report showing quality of provider provision in the borough. This is to help prioritise concerns and to focus areas of where improvements are to be made.

What needs to be done

- CSAB to be an active partner in the Integrated Care System and engage with partners at Place level.
- Provider Training to continue by the Commissioning Team and plan for this to expand in 2022/23.
- An action plan is to be developed as part of the Social Care Provider Strategy Group which will feedback into the Localities Board and CSAB which is from all partners.
- To have a full understanding of the quality of the market.
- To support the development and sustainability of providers especially around workforce recruitment and retention.
- Review of the Provider Concerns Policy which gives a framework to manage safeguarding enquiries in respect to Providers of social care.

CSAB Priorities 2021 - 2022

COMMISSIONING

What has been done

- Commissioning being a part of ASC ensuring a more integrated development of services and a response to safeguarding issues.
- New commissioning structure which will reflect client cohorts so relates to the needs of the Croydon resident. This has involved bringing staff together in one team to refocus on working with the market.
- The CSAB Intelligence Sharing sub group continue to have oversight of the provider market, high engagement from all agencies across the partnership.
- Championing what maters to you: Healthwatch Croydon Annual Report 2021 – 22. Croydon Healthwatch represented on the CSAB and sub groups. Link to full report: https://www.healthwatchcroydon.co.uk/wp-content/uploads/2022/06/Championing-what-matters-to-you-Healthwatch-Croydon-Annual-Report-2021-22.pdf

CSAB Priorities 2021 - 2022

Making Safeguarding Personal

What has been done

- A dedicated police mental health team continues to work with a cohort of high volume service users working with partners to reduce calls to service and ensure an effective tailored response.
- Established a new Risk and Demand team which provides a 24/7 investigation response for missing people within the early hours of the investigation. Officers are specially trained to identify and manage risk and work alongside our response teams to provide the most appropriate response . Enhanced supervision within the team ensures police use all resources and opportunities to protect and safeguard. [Police]
- Working in partnership with Ingram Court Youth Hostel, NHS SWL CCG hosted a health and wellbeing day for young people experiencing homelessness to reduce barriers to accessing health services.
- Reshaping of the LA safeguarding process ensuring that all referrals receive a measured and personalised response. Introducing an 'at risk' contact stage to see if there is a better way of managing the matter than going through the s42 process. Outcome has been to have a more balanced response with better outcomes.

What needs to be done

- Support Local Authority, NHS and other partners transition from DoLs to LPS . Ensuring it is a safe and effective process
- Have a robust transitional safeguarding process across the partnership.
- New provider networks for home care, over 65s and working age adults have been set up for 22/23.
- Engagement and support to the market is critical in ensuring excellent quality care. Over the next year we want to get the voice of the providers and residents into action plans to support this around improved use of technology, workforce and voice of the resident.
- To continue to work together to ensure what is referred as a safeguarding issue is appropriate.
- Work across the partnership on the transition from DoLs to LPS when implemented.
- Review of the Self Neglect Policy.

CSAB Priorities 2021 - 2022

QUALITY & IMPROVEMENT

What has been done

- Learning from Safeguarding Adult Reports cascaded throughout the Police. Lessons learnt are shared to maximise the opportunity to better safeguard adults with care and support needs, who are or may be at risk of abuse or neglect.
- The Police continued to deliver internal training and events to our staff focused on mental health, wellbeing and neurodiversity to increase knowledge and share best practice.
- The Police continued focus on providing support and advice to investigating officers to improve their knowledge around mental health and access to partner leads.
- Restructure of the Quality & Market Support Team at the L.A., this team has total responsibility for the quality of the market and is now one centralised team: 1 Quality & Market Support Manager and 5 Care Quality Officers.
- Better use and understanding of the new LA Liquid Logic system – seeing more accurate recording and data quality leading to more robust data to support future planning and to support the changes to the process as outlined above.

What needs to be done

- Health to support Adult Social Care to strengthen the process to provide referrers feedback on the outcomes of safeguarding concerns.
- CSAB to embed the statutory guidance, agree a framework for the People in Position of Trust (PiPoT) process and communicate this with all relevant partners.
- CSAB to be sighted on the potential changes in children safeguarding from the independent review May 2022 and assess areas of learning for adult safeguarding.
- While the new Quality & Market Support team are in place, they do not yet have full oversight in monitoring all care providers. The team will come up with a full monitoring plan by the end of July 2022 to show how all provision can be monitored.
- Out of Borough placements was an action for improvement in 21/22 by commissioning, they are now looking to introduce a system of regular check ins with local authorities at the start of Quarter 3.

CSAB Priorities 2021 - 2022

QUALITY & IMPROVEMENT

What has been done

- CHS hosted a domestic abuse conference and key speakers included the NHSE Safeguarding Lead and representative from the Domestic Abuse Commissioner's Office.
- The stability of ASC coming out of the pandemic: DASS appointed, reshaping of disability service for a more localised response, continued development of integrated localised multi-disciplinary services in older people and the reduction of the DoLs waiting list.
- There has been a positive change in who Safeguarding Adult Review requests are submitted by, these are now being received from across the partnership.
- ASC data is more accurate and is telling us that we are focusing on the right areas – fewer concerns but more enquiries.
- Presentation given to the CSAB members by the S42 team outlining the referral process and providing case examples. This was rolled out to the GP Forum, Health colleagues and to the London Lived Experience Group.

What needs to be done

- More focus required on homelessness, workshop planned for October 2022 following recommendations from the 'Duncan' SAR.
- Work on transitions is underway however, to continue this work and the development of the Transition Service.
- To continue the on-going re-shaping of the ASC safeguarding processes.
- Continue to work on the dashboard with colleagues who work with data collection such as Public Health, FJC and what are the overlaps between the CSCP and the CSAB.
- Identify the good practice and how can we share that learning widely.
- Refresh the current Training & Improvement sub-group beginning with the Terms of Reference and the name of the group. Group to focus on knowing what training is out there and translating SAR outcomes into training.

CSAB Priorities 2021 - 2022

VOICE OF THE PEOPLE

What has been done

- Members of the VOTP sub group have presented 'Keeping you Safe' to forums and groups in Croydon. These have included provider forums, Care Home Managers, Dom Care Forum, BME Forum with further events being planned.
- List collated of groups to engage including updates on where the VOTP/CSAB team reps have presented. This has proved a helpful document.
- S42 presented the work they are doing around the Service User feedback questionnaire with the aim to receive feedback.
- Keeping you Safe leaflet – this has moved forward with the development of a consent form to obtain photos and quotes for the leaflet from residents with visits planned to obtain photos.
- Chair of the VOTP being an active member of the London Lived Experience Group bringing information back for the CSAB and also sharing Croydon's work with the London wide group.

What needs to be done

- CSAB and VOTP members to attend and share the work of the board and group to the Selsdon and Sanderstead Rotary, Asian Resource Centre, HearUs, and Councillor meeting.
- On 20th July 2022 a visit to the Memory Café in Thornton Heath has been organised with the aim to also, with consent, to take photos for the Keeping You Safe leaflet.
- A need to continue to tidy up governance around SARs with the review of the framework alongside the regional SAR Protocol work.
- Working together across the partnership for adult safeguarding to get parity with children's safeguarding using the opportunity of the ICNs.
- Learn more from the work planned to be undertaken around Hard to Engage with the need to upskill the workforce around engagement.

CSAB Priorities 2021 - 2022

Communication & Engagement

New Service – Mental Health Personal Independence Co-ordinator Service [MHPIC]: Croydon BME Forum and Mind in Croydon have formed an exciting new partnership. The MHPIC Service offers one to one support for people with a serious mental health illness. It will focus on what matters most to people and to see how best we can support in arrears such as managing their mental health.

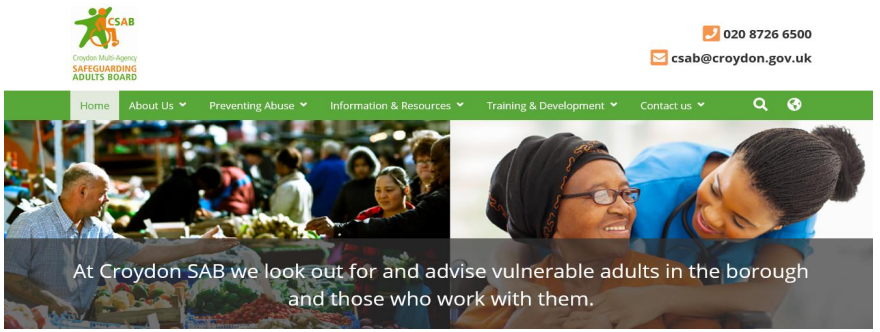
The Recovery Space is now fully rolled out and adopted, essentially this is a Crisis Café and offers a safe, non-clinical, supportive environment for people experiencing a social mental health crisis from 6.00 – 11.00 pm 7 days a week in East Croydon. This acts as an alternative to using other crisis services.

Crisis Support workers seek to:

- Manage crisis
- Identify triggers
- Identify strengths & coping methods
- Explore self-help tools and apps
- Improve your self-confidence, esteem and independence
- Develop personalised wellbeing tool kit.

The CHWS is a new service and opened in January 2022. It provides MH and Wellbeing support and services for Croydon's residents. It also includes finance, housing, education, training & employment and social inclusion. It provides access to support including clinical, and advice and information for people to overcome barriers to manager their MH and independence.

People can self-present at the Space, without a need for referral, or alternatively, can be formally referred by the Central Croydon Mental Health clinical teams. Support includes help in looking after your health and wellbeing when you are in a time of crisis.



CSAB Priorities 2021 - 2022

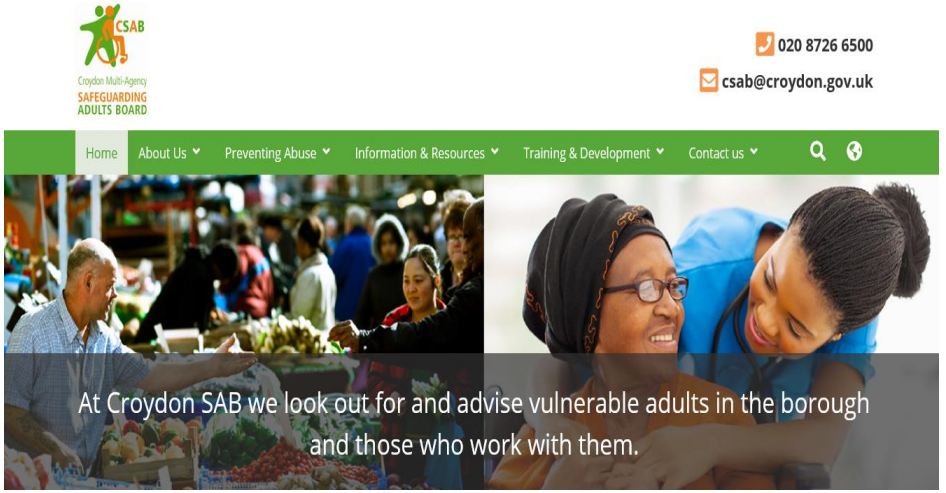
COMMUNICATION & ENGAGEMENT

What has been done

- The CSAB has excellent engagement across the partnership and this is evidenced by the attendance at both the Board meetings and sub groups. Partners are represented across all agencies and with partners keen to take on the roles of Chair and Vice Chair of the sub groups.
- Strong links made with other SABs in London with increased engagement with both national and London networks, this enables the CSAB to share information developed in Croydon and to learn from other SABs.
- We have developed a list of contacts for SAR authors which is growing with more authors expressing an interest to undertake commissioned SARs.

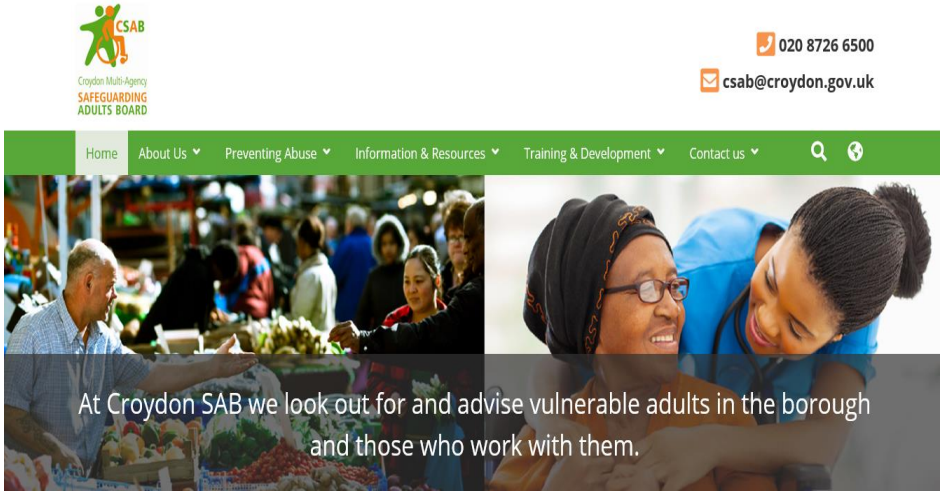
What needs to be done

- Making the public more aware of what is already out there for them to access.
- The use of simple language around Domestic Abuse and Domestic Violence – including the awareness of the different forms of abuse and promotion around the language.
- Following the CSAB Development Day to refresh the three year Strategic Plan in line with the new priorities.
- Look to appoint a second Lay Member to the membership of the CSAB.



CSAB Priorities 2021 - 2022

COMMUNICATION & ENGAGEMENT



www.Cbmeforum.org

Development Day – 23 February 2022

The focus and outcomes for the day was to:

- Review the relevance of the 3-year strategic plan in a changed Croydon.
- Reflect on the impact of world events over the past 20 months
- Reset the SAB's focus in light of our experience
- Refresh the SAB working together culture
- Revise the SAB priorities to represent the needs of the Croydon residents
- Require commitment from all SAB members

Priorities for 2022/23 were discussed and agreed as follows:

- **Prevention**
- **Commissioning**
- **Quality and Improvement**
- **Cross sector working** – transition between children and adults, link with CSP and to include the locality developments across these to support safeguarding.

Prevention, Commissioning and Quality & Improvement remains with a new priority of Cross Sector Work.

Making Safeguarding Personal to become a common thread through sub-groups along with Voice of the Croydon resident and Communication & Engagement.

It was agreed there is still work to be done by the sub-groups however, the group members are very much engaged with the work of the CSAB and this forms a solid sub-group foundations with absolute commitment to move forward.

Governance & Accountability arrangements

Care Act 2014

SAB Membership includes: Local Statutory & voluntary sector organisation and a Lay Member. Chaired by an Independent Chair

Safeguarding Adult Board [SAB]
Statutory Partners are:
Local Authority, Police, Clinical Commissioning Group

Core duties of the SAB

- Publish an Annual Report
- Develop and publish an Annual Strategic Plan
- Arrange Safeguarding Adult Reviews

The SAB will embed the requirements of the overarching Care Act to:

- **Assure that local safeguarding arrangements are in place as defined by the Act and working well across all relevant agencies**
- **Prevent abuse and neglect where possible**
- **Provide timely and proportionate responses when abuse or neglect is likely or has occurred**

Six Safeguarding Principles

The national guidance says that six principles should guide all safeguarding adults work

Empowerment

Talk to me, hear my voice

Protection

Work with me to support me to be safe

Prevention

Support me to be safe now and in the future

Proportionality

Work with me, to resolve my concerns and let me move on with my life

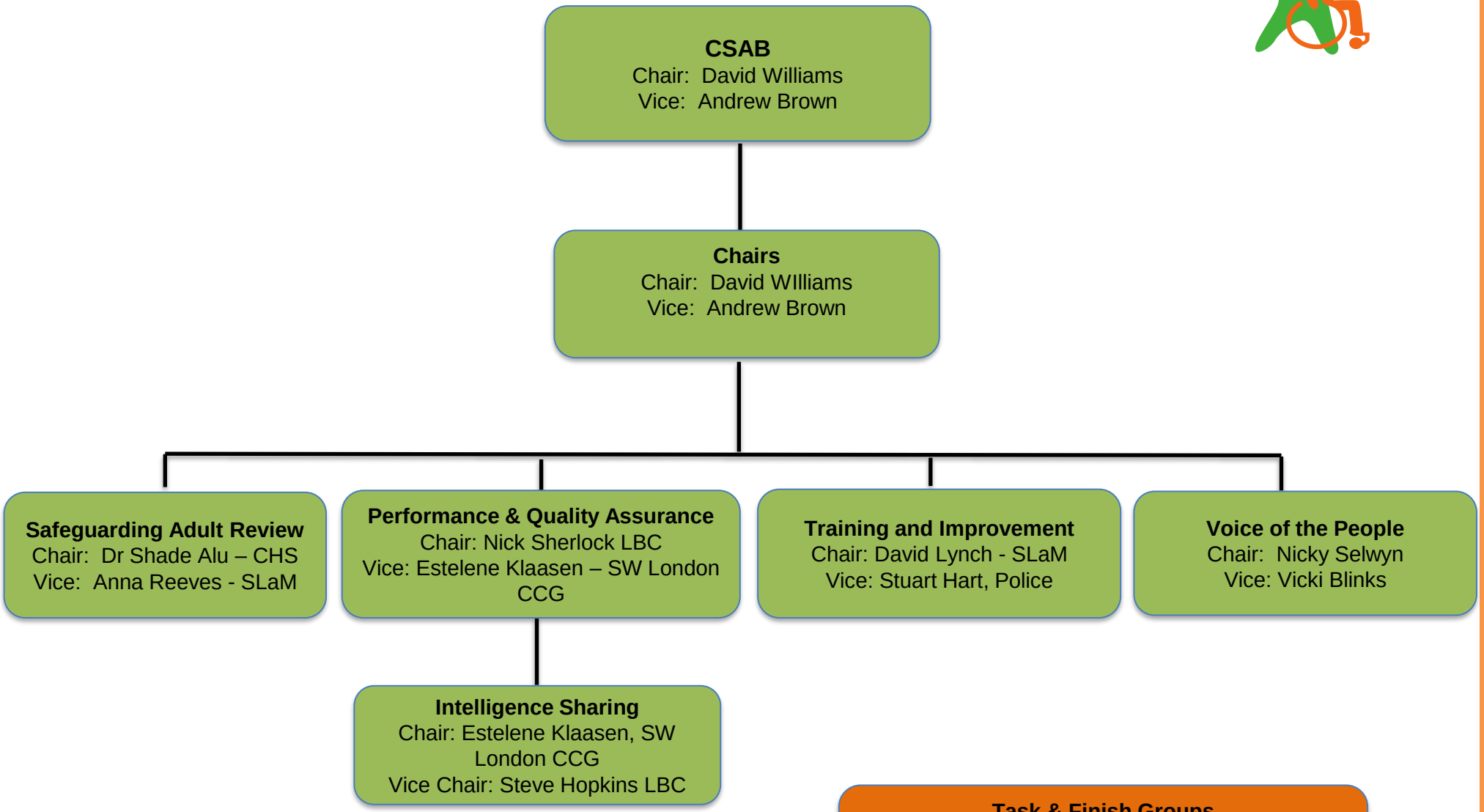
Partnership

Work together with me

Accountability

Work with me, know you have done all you should

CSAB Structure



Task & Finish Groups	
Health	Estelene Klaasen [SW London CCG]
MCA/DoLS	Ernest Johnson [LBC]

CSAB Structure

All sub groups will have a Chair & Vice Chair agreed by the Board to ensure governance and accountability. Each Sub group develops a work plan reporting to the board on progress against the strategic priorities and this will inform the Safeguarding Annual Report. The Health and MCA Task & Finish Groups undertake specific projects as and when required.

Chairs Sub Group

The Chairs monitor and review the CSAB Strategic Plan progress and priorities. Have oversight of the Board's work through its sub groups.

Performance & Quality Assurance

Working together to oversee, support and monitor the quality of care across the partnership in order that safeguarding standards keep people safe and minimise risk.

Safeguarding Adult Review

Considers requests which may meet the statutory criteria, to make arrangements for and oversee all SARs ensuring recommendations are made, messages are disseminated and lessons learned.

Training & Improvement

To explore and implement the training and learning needs of partners in order to deliver a co-ordinated training programme. It will be focussed on improving the outcomes for adults at risk in Croydon, have oversight of training and identify gaps and duplication.

Voice of the People

Support a person centred approach and focus on demographic groups which are under represented in safeguarding data. Raise awareness of safeguarding and what it means to the resident with the voice of the resident heard and acted on.

Intelligence Sharing

Support the CSAB with regards to prevention by managing the provider market through frequent market oversight. It allows colleagues from all aspects of health and social care to share good practice and concerns.

Funding arrangements for the CSAB

The Safeguarding Board is jointly financed by contributions from partner agencies and it is acknowledged that organisations give their time and resources to support the functioning of the board. The Board has again successfully managed a balanced budget, despite there being no increase in member contributions.

Income 2021/2022

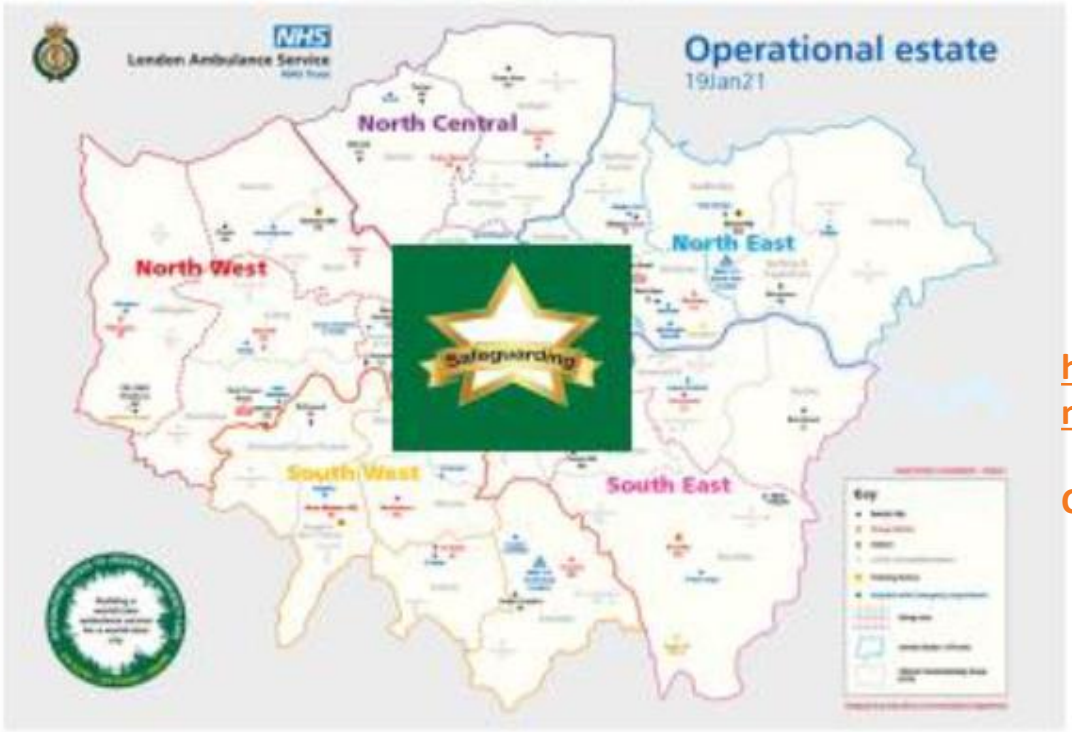
£15,000	South London & Maudsley
£21, 670	Clinical Commissioning Group
£21,670	Croydon Health Services
£101,928	London Borough of Croydon
£5,000	Met Police
0	London Fire Brigade
Total	**£165,268**

2021/2022 Expenditure:

£126,899	Staffing
£239	IT Equipment
£864	Website design & support
£1,975	Training
£35,291	SARs [includes SAR legal costs] Reserves have been carried over and the budget for 2021/22 proposes to utilise some of the reserves for future SARs as the national/local picture shows a trend of commissioning SARs is increasing.
Total	**£165,268**

NHS
London Ambulance Service
NHS Trust

Safeguarding Annual Report 2021 – 2022



https://www.croydonsab.co.uk/information-resources/

Click here for full report

Glossary

ADASS	Association of Directors of Adult Social Services	**MCA**	Mental Capacity Act
ASC	Adult Social Services	**MSP**	Making Safeguarding Personal
BME	Black and Minority Ethnic	**MASH**	Multi agency Safeguarding Hub
CCG	Clinical Commissioning Groups	**MPS**	Metropolitan Police Service
CHS/ CUH	Croydon Health Services/Croydon University Hospital	**NHSE**	National Health Service England
CSAB	Croydon Safeguarding Adult Board	**PIC**	Personal Independence Coordinator
CQC	Care Quality Commission	**SAR**	Safeguarding Adult Review
DoLS	Deprivation of Liberty Safeguards	**SAPAT**	Safeguarding Adult Partnership Audit Tool
DWP	Department of Working Pensions	**SLaM**	South London & Maudsley NHS Foundation Trust
HMPP	Her Majesty's Prisons and Probation	**SI**	Serious Incident
ICN+	Integrated Community Networks Plus	**VOTP**	Voice of the People
IRIS	The Identification & Referral to Improve Safety	**DASS**	Director of Adult Social Services
LD	Learning Disabilities	**LPS**	Liberty Protection Safeguard
LFB	London Fire Brigade [Croydon]	**CHWS**	The Croydon Health and Wellbeing Space
LAS	London Ambulance Service	**MHPIC**	Mental Health Personal Independence Co-Ordinator Service
LGA	Local Government Association		

How to contact the CSAB

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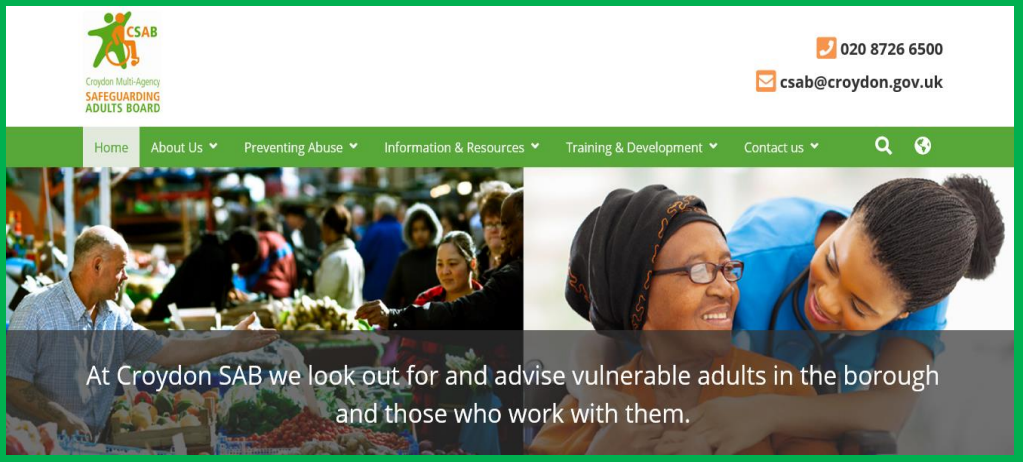
or csab@croydon.gov.uk



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