



01429 284 284



999 in emergencies



01642 771 500



01642 527 764



01642 726 004

Out of Hours

08702 402 994



Ensuring our safeguarding arrangements act to help and protect adults

2014 - 15

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Executive Summary

I am very pleased to introduce the 2014-15 Annual Report of the Teeswide Safeguarding Adults Board in my second year as Independent Chair.

This has been a significant year. The Care Act 2014 moved the Safeguarding Board onto a statutory footing. The decision to establish the Board across the four Local Authorities builds on positive collaboration, and I am encouraged by the ongoing commitment of all the partners. These innovative arrangements are beginning to work well, and there has been significant investment of resources in the Board, reflecting the priority given to safeguarding across Tees.

The Business Unit is now fully staffed, supporting and linking the four Local Executive Groups to the Teeswide Board. This enables strong local operational partnerships and ensures that the voice of those who receive services informs both the strategic and operational agendas.

At a time of major organisational and legislative change the safeguarding adults agenda has never been more important. Nationally there has been a focus on the quality of services, particularly for those adults who rely on others to help them in their day to day lives. Protecting adults at risk will always be the main priority, but the Board will also concentrate on developing ways of raising awareness and preventing harm.

In this report you will find information about what happened last year and our plans for the future. The Board has an ambitious work plan and is responding to the challenges of the year ahead.

I am confident that the Board can build on the good work to date to ensure that together we support adults to live with their rights protected, in safety, free from abuse, and make a difference to the lives of vulnerable people. I am conscious that a report such as this can only summarise the work going on every day. I would like to take the opportunity to thank everyone working with dedication and vigilance across the partnership and our communities for their continuing support in making Tees a safer place to live.

Ann Baxter

Independent Chair

Introduction

The Teeswide Safeguarding Adults Board was established in order to meet the requirements of the Care Act 2014. This created a legal framework for adult safeguarding, requiring that Local Authorities set up a Safeguarding Adults Board (SAB) in their area. Historically across Tees the four Local Authorities and partners have worked together to promote co-operation and consistency in relation to adult safeguarding work. This collaborative working practice has continued and statutory responsibility now rests with the Teeswide Safeguarding Adults Board.

In order to meet these new requirements, the governance arrangements and structure of the Board were revised (as shown below) and will continue to be reviewed in line with strategic planning activities and consultation with stakeholders.

The Local Executive Groups (LEGs) and Sub-Groups play an important role in delivering the operational activities linked to the Board's Strategic Plan, and also enable a wider range of organisations to engage with, and inform the work of the Board. The work of these groups is outlined on pages seven to 11.



Structure



Key:

- HBC Hartlepool Borough Council
 MBC Middlesbrough Borough Council
 RCBC Redcar & Cleveland Borough Council
 SBC Stockton-on-Tees Borough Council
 LEG Local Executive Group

 CE Communication & Engagement
 LEB Learning, Training & Development
 PAQ Performance, Audit & Quality
 PPP Policies, Procedures & Practice
- CR Case Review

Membership

The following organisations are represented on the Board:

Statutory Partners

Hartlepool Borough Council	Director of Child & Adult Services (7)		
Middlesbrough Borough Council	Executive Director of Wellbeing, Care & Learning (5)		
Redcar and Cleveland Borough Council	Corporate Director of People Services (7)		
Stockton-on-Tees Borough Council	Director of Children, Education and Social Care (7)		
Hartlepool and Stockton-on-Tees CCG	Executive Nurse (7)		
South Tees CCG (Clinical Commissioning Group)	(Same as above)		
Cleveland Police	Detective Superintendent Specialist Crime (7)		

Non Statutory Partners

NHS England Durham, Darlington & Tees	Deputy Director of Nursing (6)
Tees, Esk & Wear Valley NHS Foundation Trust	Director of Nursing and Governance (6)
South Tees Hospitals NHS Foundation Trust	Head of Nursing (Safeguarding) (7)
North Tees and Hartlepool NHS Foundation Trust	Deputy Director of Nursing (7)
Public Health	Director of Public Health (5)
National Probation Service: Cleveland	Head of Area (4)
Care Quality Commission	Inspection Manager (1)
Holme House Prison	Head of Residence & Services (4)
Healthwatch Hartlepool	Development Officer (0) Active LEG member
Healthwatch Tees	Manager (3)
Cleveland Fire Brigade	Director of Community Protection (7)

Lead members for Local Authorities sit on the Board as non-voting participant observers.

The Board met on seven occasions in 2014-15 and in brackets is the number each organisation was represented.

Review 2014-15

Overview

Last year the work programme of the Board focussed on enabling us to meet the requirements of the Care Act 2014, making us 'fit for purpose' and ensuring a smooth transition to our statutory footing from April 2015.

The underpinning issues were carefully considered at the Board's Annual Development Day in July 2014, where the wider impact of the changing environment was considered and the key themes for the future agreed.

This included a robust review and revision of our governance arrangements (as illustrated on page three), and the creation of a new Sub-Group and LEG structure. We also completed the recruitment process during the year to establish a new Business Unit to support the work of the Board.

Work commenced on the development of a new longer term Strategic Plan, which was informed by a comprehensive Consultation and Engagement exercise with a wide range of stakeholders including people that use social care services, their carers and members of the general public.

Our Inter-Agency Safeguarding Adults Policy was revised and a range of policies and procedures were reviewed and further developed including the completion of an Induction Pack for new Board members.

As members of the Tees Commissioning Group, we contributed to the response to the Cheshire West judgement* and 'Transforming Care: A National Response to Winterbourne View Hospital*' and also considered other national safeguarding adults issues providing informed responses throughout e.g. the 'Supreme Court judgement in relation to the Mental Capacity Act, Deprivation of Liberty Safeguards (MCA DoLS*).
*Definitions in Glossary pages 25 & 26

We continued to assess the needs of vulnerable individuals moving through and beyond the criminal justice system, and a protocol to support such people was launched. This approach is currently under review with other similar protocols in order to find the most effective method of communication, support and co-ordination for the future.

As a Board, we continued to promote awareness of Adult Safeguarding issues, including the delivery of a Financial Abuse Workshop and through support of the region wide radio campaign 'See it - Report it.'

Performance, Audit and Quality Assurance (PAQ) Sub-Group

The PAQ Sub-Group's remit is to provide assurance in relation to the safeguarding practice of the Board's partners. In order to achieve this the Sub-Group has identified two work streams; the development of a Quality Assurance/Self-Audit Framework, and a Performance Management Framework, thereby reflecting the inter-agency nature of Adult Safeguarding work. During 2015-16 the Sub-Group will continue to provide the Board with the required performance information through the evaluation of best practice. This will provide a clearer emphasis on assessing the desired outcomes of adults entering the formal safeguarding process (Making Safeguarding Personal*). *Definition in Glossary page 26

Communication and Engagement (CE) Sub-Group

The CE Sub-Group was reformed under the new Board structure with refreshed membership and revised terms of reference aligned to the strategic aims of the Board. The group developed, produced and published the Annual Report for 2013-14, and created branding guidelines and a new logo for the Board. A key component of the remaining work plan is to complete the new Communication and Engagement Strategy. This will ensure that work is underpinned through consultation with a wide range of stakeholders including safeguarding service users and their families, carers and advocate groups. A new website for the Board is currently in development, which will provide a valuable resource for service users, the general public and practitioners.

Learning, Training and Development (LTD) Sub-Group

The LTD Sub-Group was re-established in September 2014 and identified a number of key partners to join the group, including the Police; the Fire Service; the NHS (across Tees), and Healthwatch. The group now has a clearer understanding of the resources and training programmes in place across the four Local Authorities and a Training Needs Analysis has been undertaken. This identified that there is limited inter-agency training taking place although single agency training, albeit at different levels, is being delivered within most agencies. The Sub-Group is now working to develop a training strategy with a focus on e-learning. The group is also considering how appropriate assurance around the quality of training delivered by service providers, such as Care Home and Care at Home providers, can be achieved.

Review 2014-15

Policy, Procedures and Practice (PPP) Sub-Group

The PPP Sub-Group strengthened its membership during the year and implemented its work programme in accordance with the strategic priorities of the Board. The work included producing and agreeing an 'Inter-Agency Mental Capacity Act, Section 44 Protocol' and responding to the impact of the Supreme Court judgement in relation to the 'Mental Capacity Act, Deprivation of Liberty Safeguards (MCA DoLS*). *Definition in Glossary page 25

The Sub-Group also considered the Government's response to the Lords Committee Review of the Mental Capacity Act 2005, and the Serious Concerns Protocol was monitored with updates being provided to the Board. The Boards Inter-Agency Safeguarding Adults Policy and Procedures are currently under review and a revised policy with associated procedures will be fully implemented across Tees in September following a trial period.

Case Review (CR) Sub-Group

The CR Sub-Group fulfils the duty of the Board in respect of Serious Case Reviews (Safeguarding Adults Reviews from April 2015) and ensures that they are completed in line with national and regional guidance.

The Sub-Group's purpose is to decide the appropriate type of case review and then to determine where responsibility rests for leadership, oversight and co-ordination of the chosen review process. The CR Sub-Group promotes a culture of continuous learning and improvement across organisations and identifies opportunities for the promotion of good practice. It is committed to adhering to the North East Regional Guidance regarding any Safeguarding Adult Reviews and to ensure that relevant cases are considered through an integrated model of review.

The CR Sub-Group considered three individual cases during 2014-15:

Case 1

This case was previously discussed by the Hartlepool Safeguarding Vulnerable Adult Committee in October 2012. It was agreed at the time that the case met the requirements for a Serious Case Review (SCR), but that this should be delayed due to other proceedings. It has subsequently been confirmed that an SCR should now proceed and that this be managed by Hartlepool Borough Council.

Case 2

This matter was considered by the CR Sub-Group at a series of meetings and it was ultimately agreed that the criteria for an SCR was not met and that a Lessons Learned Review would be the most appropriate course of action. This recommendation was accepted by the Board's Independent Chair and a Lessons Learned Review was progressed under the Leadership of Middlesbrough Borough Council.

Case 3

This was a complex matter regarding the death of a vulnerable adult and also involving two young people. Decisions were made in respect of the three individuals concerned and agreement reached that they all met the requirements for an SCR. A combined meeting of representatives of both the relevant Safeguarding Children Board and Safeguarding Adults Board considered all of the key information and confirmed that a combined process for all three reviews should be progressed. This process is ongoing with two independent reviewers commissioned to lead the process utilising a systems methodology. A report in respect of the vulnerable adult will ultimately be published and shared with the Teeswide Safeguarding Adults Board.

In addition a further Serious Case Review, Case 4 was commenced by Hartlepool Safeguarding Vulnerable Adults Committee in June 2013 and concluded in November 2014. This related to a vulnerable adult with mental and physical health needs, who was also alcohol dependent. The outcome of the review was presented to the Teeswide Safeguarding Adults Board within the 2014-15 reporting period. A number of recommendations were made as part of the review and an action plan has now been developed with progress reported through the Teeswide Board.

Review 2014-15

The following is a summary of some of the main recommendations/lessons learned from the Case Reviews held in 2014-15:

- That the effectiveness of the systems in place for sharing information should be reviewed to inform risk assessment and decision making processes
- That all Health and Social Care professionals should be reminded of accessing all available information about a person in order to inform assessments and decision making
- That all practitioners should be reminded that 'specialist' services should be considered as part of the initial assessment process
- That all practitioners should be reminded that an Independent Advocate should always be offered to a person where there is any indication that they need assistance to make their views known and to protect their rights
- That all Health and Social Care professionals who take on the role of Care Co-ordinator should be reminded of their responsibilities in co-ordinating the care process
- That all staff should be reminded that people should not be discharged into the community until the necessary support is in place to secure a safe environment
- That multi-agency safeguarding training opportunities should be reviewed and refreshed.

The CR Sub-Group will continue to meet in the future as required and will ensure that reports are provided to the Independent Chair and the Board as appropriate.

Local Executive Groups (LEGs)

In Hartlepool the newly formed LEG focussed on involving individuals in the safeguarding process through the 'Expert by Experience' and 'Making Safeguarding Personal' programmes and by lessons learned from case reviews. The LEG is committed to sharing information and good practice, learning lessons and most importantly on improving outcomes for vulnerable adults. It is confident that in the future it will continue to develop as a valuable forum for addressing local issues, improving practice, and ensuring that Hartlepool priorities inform and are reflected in Teeswide plans.

In Middlesbrough, a workforce restructure led to the recruitment of Safeguarding Adults Officers and a review of Wellbeing, Care and Learning. Adult Social Care also underwent a Peer Review/Review of Service Delivery by 'Peopletoo.' The LEG is now chaired by the Assistant Director for Safeguarding and Children's Services. The work has focussed on preparing for the implementation of the Care Act 2014 in conjunction with the Teeswide Safeguarding Adults Board; and on the 'Making Safeguarding Personal*' programme. Work has also included the development of a comprehensive training plan for staff.

In Redcar and Cleveland some of the issues considered during the year included the agreement of action plans arising from two Serious Case Reviews initiated in 2013-14, the implementation of the requirements of the Care Act 2014, the Cheshire West judgement* and the 'Transforming Care: A National Response to Winterbourne View Hospital*' Report. In addition the LEG has recently expanded its membership to include representatives from the Care at Home and Care Home Sectors, which have already proved to be valuable additions to the group.

In Stockton-on-Tees the commitment to adult safeguarding continued by building on previous work to develop a performance framework, completing work through the Learning Disability Partnership Board and increasing the number of Safe Place venues. The LEG worked with partners to prepare for the implementation of the Care Act 2014, led work in response to the Supreme Court judgement relating to DoLS* and supported Children's Services colleagues to ensure that these statutory duties were addressed for people aged between 16 and 18 years old. The Transforming Care work stream was considered with NHS partners and in particular those issues in relation to information sharing were discussed.

*Definitions in Glossary pages 25 & 26

Review 2014-15

Safeguarding Activity

The Teeswide Safeguarding Adults Board receives data collected by the Local Authority and other Partner's Performance Teams via the Performance, Audit and Quality (PAQ) Sub-Group.

The following is a summary of some of the data collected for 2014-15. Teeswide Safeguarding Adults alerts* have risen by 40% since 2011-12, but referrals* have decreased by 5% during the same time period. *Definitions in Glossary page 25 & 26

97% of safeguarding referrals related to white British adults, 2% to ethnicity unknown, and a demographically disproportionate 1% from Black, Asian and Minority Ethnic Groups (BAME).

56% of the allegations linked to the abuse and neglect of adults were committed by 'Other-Known to Individual' and 34% by 'Social Care Support.' Care Homes (45%) and Own Home (39%) accounted for most of the 'Location of Abuse and Neglect.' The remainder being Hospitals/Health (5%); Supported Living (3%); Other (5%); Day Centre/Service (1%); and Alleged Perpetrators Home (2%).

The two biggest categories of abuse within the safeguarding referrals were 'Neglect and Acts of Omission' 44%, and Physical Abuse 22%. Sexual Abuse increased from 2.8% in 2013-14 to 4% and was more prevalent in NHS Trusts where this accounted for 10% of all safeguarding reports. (Full tables can be seen on page 20).

The rise in the number of Safeguarding Adults alerts appears not only to indicate the positive and increased awareness of Safeguarding Adults issues and concerns, but also highlights that some alerts did not meet the threshold criteria for further investigation. Although as a consequence of this the 'no further action' outcome decreased by 7% from the 2013-14 figure, there were more substantive outcomes for the referrals that were investigated.

Demographics

37% of the population aged 64+

5-6% population

Black, Asian & Minority Ethnic (BAME)

2.5% Hartlepool

12% Middlesbrough

1.5% Redcar & Cleveland

5.5% Stockton-on-Tees

ONS Census 2011 - estimated



2013-14	2014-15	2013-14	2014-15
305	415	146	113
1059	1163	401	354
879	1034	518	510
1127	1280	325	315
3370	3892	1390	1292

Alerts



61% are for men

ONS Census 2011

54% of all safeguarding referrals are for people aged 75 or over

Teeswide
Context of
Safeguarding
Adults Work



64% of abuse and neglect in 'own home' is carried out by 'other known to individual' 20% increase in neglect referrals in 12 months

Abuse and Neglect

Referrals

16%
of referrals are for financial abuse
See page 23: 'Under the Radar'

Protection



1000%

See page 25: Cheshire West judgement

718 Advocacy referrals

The same



109 Safe Place venues

See page 16



31% said the public are safe from being victims of abuse and neglect

Board Survey March 2015

What you told us



59% said promoting awareness of how people can protect themselves from abuse and neglect was the top priority

Board Survey March 2015

ONS - Office for National Statistics

Case Study

A safeguarding alert was raised by the physiotherapist working with Mr. A who lived with his brothers and who had a diagnosis of a chronic condition which affected his mobility.

He disclosed that following the death of his mother, he had started to notice money going missing from his wallet, and stated that he was not allowed to use the washing machine or the fridge freezer.

The situation was having a negative impact on his health and well-being. Mr. A consented to a safeguarding alert being raised.

Mr. A was visited by a social worker. He stated that he had not reported any of the alleged thefts to police. Further more he felt that mediation with his family was not possible.

Mr. A attended the subsequent strategy meeting, which was co-ordinated by the social worker to decide what actions were needed and to enable the development of a Protection Plan.

Information was shared with the Police who conducted an investigation of the alleged financial abuse.

Given the identified risks it was agreed that Mr. A would remain at risk living with his brothers and therefore emergency accommodation was arranged. Mr. A was then supported to find suitable accommodation where his independence could be sustained into the future.

This case is a good example of 'Making Safeguarding Personal' with Mr. A involved from the start and with the adoption of an outcome focused approach concentrating on Mr. A's independence and well-being.

Mr. A was restored to a position of control and the risk of further abuse was prevented.

Provided by Stockton-on-Tees Borough Council

Review 2014-15

Cleveland Police

Protecting vulnerable people is a key priority for Cleveland Police, with the Chief Constable and the Police and Crime Commissioner (PCC) committed to improving policing services to victims and witnesses.

The Police Force has well-established mechanisms for referring concerns about vulnerable people to health and social care teams. A dedicated team of detectives continues to work closely with partners to safeguard victims and to investigate crimes committed by those who have responsibility for caring for vulnerable adults.

During 2014-15 the police focused on a number of areas:

- Domestic Abuse: worked with partners to research ways in which victims
 of domestic abuse could be best supported and reduce repeat victimisation.
- Mental Health: worked alongside mental health professionals as part of the street triage scheme to provide improved outcomes for people with mental illness.
- Hate Crime: promoted the focus, resulting in a welcome increase in reporting.
- The Safe Place Scheme: ensured that staff in identified public places were aware of vulnerability issues and could offer help to people that they come into contact with.
- Modern Day Slavery: co-hosted a regional seminar for Safeguarding Professionals with the Police and Crime Commissioner in September 2014 to raise awareness of Human Trafficking and Modern Day Slavery. Work is now taking place to build upon this with training for 250 staff provided by the charity, 'Hope for Justice.'

Safe Place Scheme Contacts

There is a Local Authority lead in each of the local Policing areas:

Hartlepool: Jayne Brown

Tel: 01429 523 526 Email: Jayne.Brown@hartlepool.gov.uk

Middlesbrough: Jane Hill

Tel: 01642 728 112 Email: Jane_Hill@middlesbrough.gov.uk

Redcar & Cleveland: Derek Birtwhistle

Tel: 01642 776 931 Email: Derek.Birtwhistle@redcar-cleveland.gov.uk

Stockton-on-Tees: Sarah Allen

Tel: 01642 528 458 Email: SarahJane Allen@stockton.gov.uk

If you are a venue who would like to become a Safe Place, or you support a vulnerable person who would benefit from being a member of the scheme please contact your area lead.



Clinical Commissioning Groups

As commissioners of local Health Services the Clinical Commissioning Groups (CCGs) continued to work with providers and partners to further raise the profile and impact of Safeguarding Adults across the health and social care economy. This included the sharing of intelligence, information and actions in relation to safeguarding concerns for the shared populations across Tees. The CCG's refreshed Quality Assurance Framework outlines the approach to the monitoring, reviewing and challenging of commissioned health services and is supported by both Governing Bodies.

Cleveland Fire Brigade

Cleveland Fire Brigade undertook a significant restructure in 2014-15, which brought about a change in the designation of lead responsibility for safeguarding within the organisation. This resulted in a review of Safeguarding Procedures, and the Brigade becoming more active partners in the work of the Teeswide Safeguarding Adults Board through the provision of the chair for the Communication and Engagement Sub-Group. The principal safeguarding activity across the service remains the provision of Home Fire Safety visits and in particular those associated with the 'Stay Safe and Warm' campaign. A total of 325 urgent referrals were received in 2014-15, which is the highest number of referrals to date. This was in addition to the thousands of Warmth Assessments undertaken Teeswide.

National Probation Service

On 1st June 2014 Probation Trusts were replaced by the National Probation Service (NPS) and Community Rehabilitation Companies. Whilst NPS is not one of the named statutory partners, locally it is important to increasingly engage with and support the work of the Board following the implementation of Part 1 of the Care Act 2014. NPS Cleveland has acknowledged and reinforced the importance of safeguarding adults work, and over the next 12 months will continue to prioritise public protection whilst continuing to deliver a service that is underpinned by strong partnership working.

Consultation and Engagement

During the early part of 2015 we facilitated a series of engagement activities, which involved 515 people from a wide range of stakeholder groups, of which 53% were members of the general public. The analysis and evaluation of this work will assist with the development of a Communication and Engagement Strategy, as well as informing other parts of our work. As highlighted on pages 13-14 there were several themes to the feedback received and this combined with the outcomes from comments illustrated below will provide valuable insight into our strategic priorities.

"Isolation is a huge problem. Sometimes services are on the doorstep of people but these are not being accessed due to lack of awareness and knowledge"



I know of carers who have abused a vulnerable adult and are still working within the industry. This is a major issue as trust is a key issue for the adults I work with.

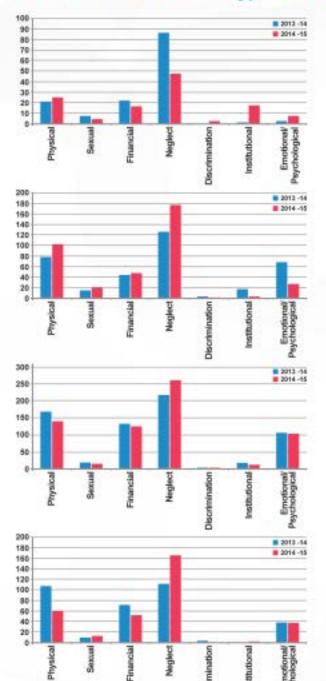
Strategic Plan 2015-18

This is our first Strategic Plan since the Teeswide Safeguarding Adults Board moved onto a statutory footing in April 2015. The Plan has been developed following several months of extensive consultation and is underpinned by the feedback provided by the general public, safeguarding adults service users, their families and carers; and advocates and professionals working across a range of sectors. The Plan outlines our five longer-term Strategic Aims for 2015-18 together with our 10 Business Plan objectives for 2015-16.

Vision: Ensuring our safeguarding arrangements act to help and protect adults

Strategic Objectives 2015-16 Strategic Aims 2015-18 Strategic Aim One: Take into account the views of key Personalisation stakeholders. We will take account of the views of adults Measure and evaluate what adults at risk in developing policies and procedures, and support the wider principles of experiencing the safeguarding process say. personalisation. Strategic Aim Two: Better promote and connect existing Prevention preventative strategies. We will develop preventative strategies that aim to reduce the risk of abuse or Reduce barriers to reporting abuse neglect of adults. and neglect. Provide effective responses to reported Strategic Aim Three: Protection abuse and neglect. We will work together to ensure the protection of adults experiencing, or at risk Monitor complaints, grievances and of abuse or neglect. professional/administrative malpractice. Strategic Alm Four: Develop assurances for effectively linking Partnership with other strategic bodies. We will work together to ensure that adult safeguarding links to other parts of the Evaluate how well each member agency health and social care system to protect is co-operating and collaborating. adults at risk of abuse or neglect. Strategic Aim Five: Take timely and appropriate action in Professional Accountability relation to safeguarding adults. We will work to ensure the accountability of all partners in protecting adults Challenge one another and hold other experiencing, or at risk of abuse or neglect. Boards to account.

Annex A: Referrals - Types of Abuse and Neglect



Hartlepool

Middlesbrough

Redcar & Cleveland

Stockton-on-Tees

Annex B: Care Act 2014 Overview

The Care Act 2014 sets out a clear legal framework for how Local Authorities and other parts of the system should protect adults at risk of abuse or neglect. Local Authorities have new safeguarding duties.

They must:

- Lead a multi-agency local adult safeguarding system that seeks to prevent abuse and neglect and stop it quickly when it happens
- Make enquiries, or request others to make them, when they think an adult with care and support needs may be at risk of abuse or neglect and they need to find out what action may be needed
- Establish Safeguarding Adults Boards (SABs), to include the Local Authority, NHS and Police, to develop, share and implement a joint safeguarding strategy
- Carry out Safeguarding Adults Reviews (SARs) when someone with care and support needs dies or suffers serious harm as a result of neglect or abuse, and there is a concern that the Local Authority or its partners could have done more to protect them
- Arrange for an independent advocate to represent and support a person who is the subject of a safeguarding enquiry or review, if required.

The Care Act also places duties to co-operate on relevant agencies over the supply of information.

The broader definitions of abuse and neglect have also been amended, and these are outlined overleaf on page 22. Further detailed guidance on the whole of the Care Act can be accessed using the links highlighted on page 23.

Teeswide this means that the implementation plan has focussed on:

- Reviewing and refreshing the information provided for the general public about safeguarding adults
- Reviewing policies, procedures and practice guidance
- Reviewing systems and processes
- Delivering Care Act specific training for staff.

The Care Act 2014 Implementation Plan also acknowledged the need for greater consistency across agencies in relation to Adult Safeguarding work.

Annex C: Definitions of Abuse and Neglect

The Care Act 2014 provides ten definitions of abuse and neglect. This includes three new definitions (*). In addition, the term 'Organisational Abuse' is now used as an alternative to that of 'Institutional Abuse'.

Types	Definitions		
Discriminatory Abuse	including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion		
Domestic Violence *	Including psychological, physical, sexual, financial, emotional abuse; so called 'honour' based violence		
Financial or Material Abuse	Including theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including wills, property, inheritance or financial transactions		
Modern Slavery *	Encompasses slavery, human trafficking, forced labour and domestic servitude		
Neglect & Acts of Omission	Including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and suppor or educational services		
Organisational Abuse	Including neglect and poor care practice within an institution of specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to ongoing ill treatment		
Physical Abuse	Including assault, hitting, slapping, pushing, misuse of medication or restraint		
Psychological Abuse	Including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber - bullying		
Self-Neglect*	This covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding		
Sexual Abuse	Including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pomography or witnessing sexual acts.		

Annex D: Useful Links

Teeswide Safeguarding Adults Board Strategic Business Plan 2015-16

https://www.stockton.gov.uk/adult-services/safeguarding-adults/

Care Act 2014

http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted

Making sure the Care Act works

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/365345/

Making Sure the Care Act Works EASY READ.pdf

Care Act fact sheet: Safeguarding

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/366087/

Factsheet 7 - Safeguarding.pdf

What the Care Act will mean for safeguarding: A legal view - Community Care

http://www.communitycare.co.uk/2014/03/03/care-act-2014-will-mean-safeguarding-legal-view/

Financial abuse 'Under the Radar'

https://www.citizensadvice.org.uk/about-us/how-citizens-advice-works/media/press-releases/ financial-abuse-going-under-the-radar/

Age UK fact sheet: Safeguarding Older People from Abuse

http://www.ageuk.org.uk/Documents/ENGB/Factsheets/

FS78 Safeguarding older people from abuse fcs.pdf?dtrk=true

Mental Health Act: Revised Code of Practice 2015

https://www.gov.uk/government/publications/code-of-practice-mental-health-act-1983

Mental Health Act: Section 44

http://www.legislation.gov.uk/ukpga/1983/20/section/44

Mental Capacity Act 2005 (DoLS)

https://www.gov.uk/government/publications/mental-capacity-act-deprivation-of-liberty-safeguards

Transforming care - A national response to Winterbourne View Hospital

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213215/ final-report.pdf

Social Care Institute of Excellence (SCIE)

https://www.scie.org.uk

Association of Directors of Adult Social Services (ADASS)

https://www.adass.org.uk

Health and Social Care Information Centre (HSCIC)

https://www.hscic.gov.uk

Care Quality Commission (CQC)

https://www.cgc.org.uk

Office for National Statistics (ONS)

http://www.ons.gov.uk/ons/index.html

A range of relevant services signposted by Cleveland Police

http://www.cleveland.police.uk/advice-information/17786.aspx

All age liaison and diversion service - NHS England

http://www.tewv.nhs.uk/Trust-News/Archive-News/Working-with-police-to-support

vulnerable-people-/

Teeswide Advocacy Hub

http://www.middlesbroughcab.org.uk/

Annex E: Contact Details

Name	Organisation	Telephone	Email / Website
Business Unit	Teeswide Safeguarding Adults Board	01642 527 263	tsab.businessunit@stockton.gov.uk
First Contact and Support Hub	Hartlepool Borough Council	01429 284 284	customer.servica@hartlepool.gov.uk
Adult Access Team	Middlesbrough Borough Council	01642 726 004	adultsafeguardingalert@ middlesbrough.gov.uk
Adult Access Team	Redcar & Cleveland Borough Council	01642 771 500	adultaccess@redcar-cleveland.gov.uk
First Contact Team	Stockton-on-Tees Borough Council	01642 527 764	firstcontactadults@stockton.gov.uk
Protecting Vulnerable People	Cleveland Police	101 or 999 in emergencies	
	Tees Esk & Wear Valley (TEWV) NHS Foundation Trust	01325 552 000	tewv.enquiries@nhs.net
	South Tees Hospitals NHS Foundation Trust	01642 850 850	
Patient Experience Team	North Tees and Hartlepool NHS Foundation Trust	01642 624 719	patientexperience@nth.nhs.uk
General Enquiries	Care Quality Commission	03000 616 161	enquiries@cqc.org.uk
General Enquiries	Healthwatch Hartlepool		www.healthwatchhartlepool.co.uk
General Enquiries	Healthwatch Tees		healthwatchstockton@pcp.uk.net

Annex F: Glossary of Terms

Adult with care and support needs

(previously described as a vulnerable adult)

An adult receiving a care and support service, or an adult requesting an assessment. This maybe a mixture of practical, financial and emotional support for adults who need extra help to manage their lives and remain independent.

Alerts

Raising an alert means passing on a concern. An alert may be made by an adult at risk, their family or friends, care workers, volunteers or other professionals. Concerns should be passed immediately to the person responsible for dealing with safeguarding alerts, or Adult Social Care directly. They must decide without delay on the most appropriate course of action.

Capacity

Someone who lacks capacity cannot, due to an illness or disability such as a mental health problem, dementia or a learning disability, do the following:

- understand information given to them to make a particular decision
- retain that information long enough to be able to make the decision
- · use or weigh up the information to make the decision
- communicate their decision.

Cheshire West judgement

The Supreme Court handed down this judgment on 19 March 2014, which determined that there is a Deprivation of Liberty (DoL) when a person is under continuous supervision and control and is not free to leave, and the person lacks capacity to consent to these arrangements. This has resulted in a 10 fold increase in DoLS assessments Teeswide in the last 12 months (total of 2185 for 2014-15).

Deprivation of Liberty Safeguards (DoLS)

Part of the Mental Capacity Act 2005 is to ensure that a care home, hospital or supported living arrangement only deprives someone of their liberty in a safe and correct way, and that this is only done when it is in the best interests of the person.

Annex F: Glossary of Terms

Direct Payment and Personal Budgets

Payments made directly to someone in need of care and support by their Local Authority to allow the person greater choice and flexibility about how their care is delivered. It includes the amount that the adult must pay towards that cost themselves (on the basis of their financial assessment), as well as any amount that the Local Authority must pay.

Expert by Experience

People who have experience of the safeguarding process either personally or as a carer.

Independent Advocacy

(the process of actively supporting and representing a person)
Local Authorities must arrange the use of an Advocate during: the assessment
process; in the preparation and review of their care and support plan; during
safeguarding enquiries and SARs, if two conditions are met: the person
would have substantial difficulty in being fully involved in these processes
if an Advocate was not involved, and if there is no other person to support
and represent the adult who is not a paid professional or carer.

Making Safeguarding Personal (MSP)

Person-centred responses to safeguarding circumstances, creating a range of responses for people who have experienced harm and abuse, so that they are more empowered and their lives improved.

Referra

Refers to an adult safeguarding issue (alert) that meets the local safeguarding threshold and invokes a full investigation.

Transforming care: A national response to Winterbourne View Hospital

The scandal surrounding the exposure of the criminal behaviour and poor care by staff at Winterbourne View Hospital in 2011. The Department of Health responded to this with the publication of Transforming care: A national response to Winterbourne View Hospital, Department of Health Review: Final Report Dec 2012. (See page 23 Useful Links).