To: Deputy Leader and Members of the Resources Board Councillors D Wright, Davey, Davis, N Dirveiks, Henney, Simpson, Smitten, E Stanley and Waters)

For the information of other Members of the Council

For general enquiries please contact Emma Humphreys/Amanda Tonks on 01827 719221 or via email – emmahumphreys@northwarks.gov.uk or amandatonks@northwarks.gov.uk.

For enquiries about specific reports please contact the Officer named in the reports.

This document can be made available in large print and electronic accessible formats if requested.

RESOURCES BOARD AGENDA 18 April 2016

The Resources Board will meet in the Committee Room at The Council House, South Street, Atherstone, Warwickshire on Monday, 18 April 2016 at 6.30pm.

AGENDA

- 1 Evacuation Procedure.
- 2 Apologies for Absence / Members away on official Council business.
- 3 Disclosable Pecuniary and Non-Pecuniary Interests.

4 **Minutes of the Resources Board held on 25 January 2016** – copy herewith, to be approved as a correct record and signed by the Chairman.

5 **Public Participation**

Up to twenty minutes will be set aside for members of the public to ask questions or to put their views to elected Members. Participants are restricted to five minutes each. If you wish to speak at the meeting please contact Amanda Tonks/Emma Humphreys on 01827 719221 or email democraticservices@northwarks.gov.uk.

6 Presentation from Angela Coates, Assistant Director (Housing) on the work of her Division.

PART A – ITEMS FOR DISCUSSION AND DECISION (WHITE PAPERS)

7 **Borough Care Service** – Report of the Assistant Director (Housing)

Summary

This report sets out the feedback the Council has received from its customers in response to the consultation letter about the proposal for introducing a charge for the service.

The Contact Officer for this report is Angela Coates (719369)

8 Internal Audit – Performance for Third Quarter 2015-16 – Report of the Deputy Chief Executive

Summary

The report allows the Board to monitor the progress of the Council's Internal Audit function against the agreed plan of work for the year.

The Contact Officer for this report is Barbara Haswell (719416).

9 Adoption of a Revised Discretionary Housing Payment Policy – Report of the Assistant Chief Executive (Community Services)

Summary

The purpose of this report is to request that Members adopt a revised Discretionary Housing Payment Policy (DHP) following an update of the Discretionary Housing Payments Guidance Manual issued by the Department of Works and Pensions in February 2016.

The Contact Officer for this report is Bob Trahern (719378).

10 **Safeguarding Adults – Policy Update** – Report of the Assistant Director (Housing)

Summary

This report provides the Resources Board with information about how the Borough Council supports the work of the Warwickshire Safeguarding Adults Board and sets out a revised Policy for comment and agreement.

The Contact Officer for this report is Angela Coates (719369).

11 **Homelessness Service Update** – Report of the Assistant Director (Housing)

Summary

To provide an update on the current homelessness service and current trends. To report progress against the Housing Strategy Action Plan and to propose a way forward for the review of the service.

The Contact Officer for this report is Helen Hughes (719494)

PART C – EXEMPT INFORMATION (GOLD PAPERS)

12 Exclusion of the Public and Press

Recommendation:

That under Section 110A(4) of the Local Government Act 1972, the public and press be excluded from the meeting for the following item of business, on the grounds that it involves the likely disclosure of exempt information as defined by Schedule 12A to the Act.

Housing Management Section – Review of Tenancy and Neighbourhoods Service – Report of the Assistant Director (Housing)

The Contact Officer for this report is Angela Coates (719369)

JERRY HUTCHINSON Chief Executive

NORTH WARWICKSHIRE BOROUGH COUNCIL

MINUTES OF THE RESOURCES BOARD

25 January 2016

Present: Councillor D Wright in the Chair

Councillors Davey, N Dirveiks, Henney, Simpson, Smitten, E Stanley and Waters

Councillor Humphreys, Jones and Smith were also in attendance.

56 Disclosable Pecuniary and Non-Pecuniary Interests

Councillor Henney declared a Pecuniary Interest in Minute No 70, Land at Sheepy Road, Atherstone, left the meeting and took no part in the discussion and voting thereon.

57 Minutes of the Resources Board held on 16 November 2015

The minutes of the meeting of the Board held on 16 November 2015, copies having previously been circulated, were approved as a correct record and signed by the Chairman.

58 **Corporate Plan 2016-17**

The Chief Executive sought approval for the Corporate Plan Targets for which the Board was responsible and Members were asked to agree the 2016-17 Service Plans for the Housing, Finance and Human Resources, Community Services and Corporate Service Divisions and the Internal Audit Service.

Recommendation to the Executive Board:

a That those Corporate Plan Targets, as set out in Appendix A to the report of the Chief Executive, for which the Resources Board is responsible be agreed; and

Resolved:

b That those elements of the Service Plans that are the responsibility of the Resources Board, as set out in Appendix B to the report, be agreed.

59 General Fund Fees and Charges 2016/17

The Assistant Chief Executive and Solicitor to the Council, Assistant Director (Streetscape), Assistant Chief Executive (Community Services) and Assistant Director (Housing) reported on the fees and charges for 2015/16 and the proposed fees and charges for 2016/2017.

Resolved:

That the schedule of fees and charges for 2016/2017, set out in the report of the Assistant Chief Executive and Solicitor to the Council, Assistant Director (Streetscape), Assistant Chief Executive (Community Services) and Assistant Director (Housing) be agreed.

60 General Fund Revenue Estimates 2016/17 – Services Recharged Across All Boards

The Deputy Chief Executive reported on the revised budget for 2015/16 and an estimate of expenditure for 2016/17, together with forward commitments for 2017/18, 2018/19 and 2019/20.

Resolved:

a That the revised budget for 2015/16 be accepted; and

Recommendation to the Executive Board:

- b That the Estimates of Expenditure for 2016/17, as submitted in the report of the Deputy Chief Executive, be included in the budget to be brought before the meeting of the Executive Board on 9 February 2016.
- 61 General Fund Revenue Estimates 2016/17 Services Remaining within the Board

The Deputy Chief Executive reported on the revised budget for 2015/16 and gave an estimate of expenditure for 2016/2017, together with forward commitments for 2017/18, 2018/19 and 2019/20.

Resolved:

a That the revised budget for 2015/16 be accepted; and

Recommendation to Executive Board:

b That the Estimates of Expenditure for 2016/17, as submitted in the report of the Deputy Chief Executive, be included in the budget to be brought before the meeting of the Executive Board on 9 February 2016.

62 General Fund Revenue Estimates 2016/2017 – Summary

Summary

The Deputy Chief Executive reported on the revised budget for 2015/16 and gave an estimate of expenditure for 2016/17, together with forward commitments for 2017/18, 2018/19 and 2019/20.

Recommendation to Executive Board:

That the following items be recommended to the Executive Board for consideration in setting the Council Tax of the Borough Council:

- a The revised budget for 2015/16; and
- b The schedule of expenditure requirements totalling £8,784,430 for 2016/2017, and the growth items set out in paragraph 7.2 of the report of the Deputy Chief Executive.

63 Housing Revenue Account Estimates 2016/17 and Rent Review

The Deputy Chief Executive reported on the revised budget for 2015/16 and gave an estimate of expenditure for 2016/17, together with forward commitments for 2017/18, 2018/19 and 2019/20.

Resolved:

- a That the revised estimates for 2015/16 be accepted;
- b That rent decreases of minus 1%, as required by the Government, be adopted;
- c That the proposed fees and charges for 2016/17, as set out in Appendix D to the report of the Deputy Chief Executive, be approved;
- d That the service charges for the cleaning of communal areas, as detailed in Appendix E to the report of the Deputy Chief Executive, be approved from April 2016;

- e That the service charges for window cleaning, as detailed in Appendix F to the report of the Deputy Chief Executive, be approved from April 2016;
- f That the Estimates of Expenditure for 2016/17, as submitted, be approved.

64 Capital Programme Bids 2016/17 to 2018/19

The Assistant Director (Finance and Human Resources) identified proposals for schemes to be included within the Council's capital programme over the next three years.

Recommendation to the Executive Board:

- a That the schemes shown in Appendix A to the report of the Assistant Director (Finance and Human Resources), previously approved within the Council's three-year capital programme, including any 2018/19 additions relating to previously approved schemes be approved;
- b That the schemes shown in Appendix B to the report of the Assistant Director (Finance and Human Resources) which will not be included within the capital programme be noted; and
- c That the proposed vehicle replacement schedule, shown in Appendix C to the report of the Assistant Director (Finance and Human Resources) be approved.

65 Internal Audit – Performance for First Half 2015-16

The Deputy Chief Executive detailed the progress of the Council's Internal Audit function against the agreed plan of work for the year.

Resolved:

That the report be noted.

66 Progress Report on Achievement of Corporate Plan and Performance Indicator Targets April – December 2015

The Chief Executive and Deputy Chief Executive informed Members of the progress with the achievement of the Corporate Plan and Performance Indicator targets relevant to the Resources Board for April to December 2015.

Resolved:

That the report be noted.

Treasury Management Strategy Statement, Minimum Revenue Provision Policy Statement and Annual Investment Strategy for 2016/17

The Deputy Chief Executive outlined the Treasury Management Strategy, Minimum Revenue Provision Policy Statement and Investment Strategy for 2016/17.

Resolved:

That the proposed strategies for 2016/17 be approved.

The Introduction of the Microchipping of Dogs Regulations 2015

The Assistant Director (Housing) sought Members' approval on the enforcement of the Microchipping of Dogs Regulations 2015.

Resolved:

a That the enforcement proposal of the Microchipping of Dogs Regulations 2015, as detailed within the report of the Assistant Director (Housing) be approved; and

Recommended:

b That necessary amendments as set out in the said report are made to the Council's Constitution to allow the enforcement of the regulations.

69 Exclusion of the Public and Press

It was proposed by Cllr Henney and seconded by N Dirveiks that the matter to be considered under Agenda Item No 19 — Borough Care Service be considered in the public session. Upon being put to the vote the Chairman declared the proposal to be lost.

In accordance with Standing Order No 29 the vote was recorded as follows:

For the recommendation – Councillors N Dirveiks, Henney and E Stanley It was then proposed by Councillor D Wright and seconded by Councillor Davey and

Resolved:

That under Section 100A(4) of the Local Government Act 1972, the public and press be excluded from the meeting for the following items of business, on the grounds that they involve the

likely disclosure of exempt information as defined by Schedule 12A to the Act.

In accordance with Standing Order No 29 the vote was recorded as follows:

Against the recommendation – Councillors N Dirveiks, Henney and E Stanley

70 Land at Sheepy Road – Further Update

The Assistant Director (Streetscape) updated Members on the progress with Health and Safety concerns at property owned, but not managed and operated, by the Borough Council, the action taken by officers to date to try to address those concerns and the response of the site operators.

Resolved:

- a That the contents of the report be noted; and
- b That, subject to the receipt of satisfactory documentary evidence, no further action be taken.

71 Borough Care Service

The Assistant Director (Housing) set out considerations and proposals from the Borough Care Task and Finish Group set up to review the service in May 2013. The Board was invited to consider a suggested course of action.

Recommended to the Executive Board:

That recommendations (a) to (j) as set out in the report of the Assistant Director (Housing), be agreed.

In accordance with Standing Order No 29 the vote was recorded as follows:

Against the recommendation – Councillors N Dirveiks, Henney and E Stanley

72 Irrecoverable Local Taxation Debts

The Assistant Chief Executive (Community Services) detailed the amounts recommended for write off in accordance with the write off policy agreed by the Resources Board on 25 March 2013.

Resolved:

a That the write off of balances over £5,000 totalling £31,603.53 in respect of unpaid Non Domestic Rates and £6,019.87 in respect of a Housing Benefit Overpayment as

- outlined in Appendix A of the report of the Assistant Chief Executive (Community Services) be approved; and
- b That Appendix B of the report of the Assistant Chief Executive (Community Services) which summarises the total amount of write offs in the year to date including those written off under his delegated powers be noted.

D Wright CHAIRMAN

Agenda Item No 7

Resources Board

18 April 2016

Report of the Assistant Director (Housing)

Borough Care Service

1 Summary

1.1 This report sets out the feedback the Council has received from its customers in response to the consultation letter about the proposal for introducing a charge for the service.

Recommendation to the Resources Board

- a That the consultation feedback be considered;
- b That the recommendations agreed by the Executive Board be considered in light of the consultation feedback;
- c That alternative methods of payment to Direct Debit be offered to current customers by agreement and exception on request;
- d That customers who currently pay for the service be charged the same as other current customers following the Resources Board's decision as proposed in paragraph 6.2;
- e That the principle of full cost recovery be used when applying a charge to other organisations for their customers as proposed in paragraph 6.3; and
- f That the principle of full cost recovery be used when applying a charge to legacy customers who live outside of North Warwickshire as proposd in paragraph 6.4.

2 Consultation

2.1 The report has been sent to the Councillors who are on the Borough Care Task and Finish Group (Councillors D Wright, Smith, Bell, Davey, Chambers and Phillips) for information and comment.

3 Background

3.1 A report which made proposals following the review of the Borough Care service was considered by the Resources Board on 25 January 2016, the Executive Board on 9 February 2016 and Full Council on 24 February 2016.

One of the recommendations was to consult with current customers about the proposal to charge for the service.

- 3.2 The recommendations relevant to this report were:
 - "To reward loyalty and sustain our customer base that a charge of £2.50/week + VAT be considered for current customers for a fixed period from 1 July 2016 with the full rate applicable after 1 April 2018;
 - That the proposal to change the charging structure and review the model of the service be subject to consultation with current customers to ascertain views and comments with the feedback considered by the Resources Board at a special meeting on 18 April 2016;
 - That the Resources Board be given delegated authority to consider and determine responses received from the consultation;
 - That all customers in receipt of the service pay monthly in advance by Direct Debit or annually in advance when billed;
 - That following the consultation there is further communication about the Council's intentions and the reasons for the change in policy with information about the new arrangements and advice proactively offered"
- 3.3 The consultation letter was sent to all households receiving the service (reported as 3,162 in the last Resources Board Report) and asked for views about the Council's proposal to charge £2.50 per week plus VAT as well as for opinions about what customers find most valuable about the service and for suggestions about future improvements or changes they would welcome. The consultation period ended on 4 April 2016. This report provides a summary of the content of the responses received.

4 Response to Consultation

- 4.1 The survey format encouraged customers to give their personal perspective about the proposals being made by the Council. This is the first comprehensive, formal, conversation the Council has had with its Borough Care customers and their feedback provides the Council with invaluable information.
- 4.2 Over 800 customers returned the consultation form. Some gave a view about the proposal to charge for the service whilst others chose to share their experience about the service they have received. Some customers have contacted us by telephone to discuss the proposals and some requested a visit to enable them to have a conversation about the content of the letter. All customers were asked to provide formal written feedback in the format suggested however a small number asked for their feedback to be provided from the telephone conversation.
- 4.3 This report provides a summary of the written responses that have been received. All of the written responses have been collated and will be provided in

- an anonymised form for Members to consider in advance of the Resources Board meeting as well as a summary of the consultation feedback.
- 4.4 Whatever their views about whether the Council should charge for the service the comments made by the majority of our customers giving feedback have been complimentary and supportive of the service with many taking the opportunity to say how it assists them.
- 4.5 This section reflects what customers said about the proposal to make a charge for the service. The consultation proposes £2.50 plus VAT for current customers until 1 April 2018 and then £3.50 plus VAT.
- 4.6 Just over 400 of the customers who gave a written response to the consultation said that they would continue receiving the service if the Council charged for it. Many said that they thought the level proposed is reasonable and commented that it would be value for money for them. Others said that it would stretch their limited budget but the service is valuable to them so they would pay a charge. On balance most of these customers welcomed the visiting service and the personal contact it gives them with the service. However some who stated that they would pay for the service also asked whether the visiting element should be reviewed.
- 4.7 A number of customers who stated that they that they would continue with the service and that they would pay for it also stated that they are concerned about affordability for them given the plan to increase the charge to £3.50 in April 2018 and about future increases.
- 4.8 A number of respondents said that they would not want to pay by Direct Debit whilst others would prefer it. Several asked whether they could pay for the service using the same method that they use for their Council Tax.
- 4.9 Many respondents referred to the VAT element of the charge. Several questioned whether it is payable on this type of service. Some felt that if it was payable it would push the charge to an unaffordable level and others asked for clarity about exemptions and whether they would apply.
- 4.10 A number of customers stated that they think that if a charge is made all customers should pay it and make a contribution to the service costs. A few customers said that they thought concessions should be available to ensure affordability.
- 4.11 Just over 300 of the customers who gave a written response stated that they would not continue with the service if the Council made a charge as proposed.
- 4.12 Some customers told us that their circumstances have changed or that they have decided they don't think they need the service at the moment because they are a couple, have moved in with their family or see themselves as fit and independent or had it for a partner who has now died and they don't need it themselves. Many thanked the Council for the service they have received to date but on reflection they have decided not to continue with it.

- 4.13 The feedback from some customers who would end the service rather than pay for it indicated that they would not regard the service as value for money if a charge was made. For many this is because they haven't really made use of the service. This means that if there is a charge it would make it like an insurance policy paying for something for which they may never make a claim. Nonetheless some customers who have benefitted from the service have also said that they would not continue with it if a charge is made because of affordability concerns. All of these customers have been offered a referral to Warwickshire Welfare Rights.
- 4.14 Some of the respondents who do not intend to pay a charge if it is introduced have been clear in their comments that they think the Council is penalising older people. Many simply said proposing to charge is unfair. Some customers said that their view is that the Council Tax in the area is relatively high and having this service free should be part of local taxation.
- 4.15 A number of customers specifically mention visits and ask whether they are necessary. Some have been very direct about their view that visits for them are a not necessary when the equipment can be tested remotely and updates on circumstances given over the telephone.
- 4.16 With regard to the level of charge there has been a range of comments. Some have stated that they understand that a charge has to be made but for them the proposal is too much on a fixed income. Others have reflected the same concern as those who are willing to pay the initial charge it is £2.50 today but if the Council moves to £3.50 and then increases it further that would be difficult for them to afford. Several indicated that it is just too big a leap from nothing to £2.50/week. Some customers have put forward suggestions:
 - Start with a smaller charge (£1/ week; no VAT);
 - Keep it free for current customers;
 - Have it free for some ages (over 70, over 75, over 90);
 - Have a single occupancy rate; (with one consultee commenting it wasn't fair that a couple would pay the same charge as a person living alone)
 - "stick a bob or two on the Council Tax"
 - Give a discount to customers who pay annually in advance
 - Enable customers to pay for the equipment and don't make any further charge.

Adding a charge for Borough Care on top of the BT line that they have to pay was mentioned by some as making the service too expensive for them because they use mobile telephones and therefore only keep their BT line for this service.

4.17 The consultation asked customers what they value about the service. The majority have indicated that they have benefited from the service they receive and have particularly commented on the high standard of support provided by the staff in the team. Peace of mind is mentioned frequently as is the ease of

the system to use - one press of a button and they have support and assistance. There are many personal testimonials from customers who have had cause to use the system and have found it invaluable. Members will be able to read these in the transcripts provided in the Group offices.

- 4.18 A strong theme through the consultation feedback is the benefit the service provides for people who live on their own. One customer said that they live on their own and feel safe being active in their home and garden because they know the service will help if they need it. When expressing the value of the system for them customers said:
 - "I can press my button if in trouble because I live alone"
 - "...trying to find telephone numbers at night or when ill is difficult"
 - It makes me feel "safe and secure"
 - It gives me a "sense of security"
 - "I can get help if needed"
 - "You know that you are not alone"
 - The system is "effective and not complicated"
 - "Immediately in an emergency can get someone to help"
 - "Immediate assistance day or night"
- 4.19 Customers have taken the opportunity to give feedback about the shape of the service. The benefit of the visiting service elicits quite polarised views. Some customers very much welcome it whilst others have indicated that it could be reviewed and revised to be more directed. Several customers picked up on the suggestion in the consultation that the service could be more tailored and with a more tailored service there could be different levels of charging.
- 4.20 Most of the feedback we have had indicates that customers are happy with the service that they receive now and there is no overwhelming demand for fundamental change however as well as views on providing a choice of service levels or extending the technology available customers made the following comments:
 - If the charge does increase please be clear and transparent about why it is going up.
 - If you are making a charge for the service please ensure the funding supports service and is not re-directed to provide other services
 - It would be useful to be able to use the technology a little way from home
 - Bed sensors or sensors on the door would be of assistance
 - The system works "keep it simple"
 - Could a morning call be introduced to ask if a customer is 'OK'?
 - Having more, guaranteed visits would be useful for some living alone to help with loneliness
- 4.21 If a choice of service is offered it could be confusing:
 - If choice was introduced could customers switch one to the other?
 - Visits and calls which proactively provide advice and signposting would be helpful

- Please replace the old equipment
- It might help to make good links with social care and health
- Give the Council's budget to social care and let them deliver the service as part of the services they provide
- Promoting the service could mean that charges would drop
- Providing a visiting service overnight if required would be helpful
- 4.22 A number of questions arose from the consultation. The most prevalent one was about VAT. This on top of the proposed charge comes up throughout the consultation whether the customer is willing to pay or not and many asked for clarification about the exemption criteria. Many customers asked how they would be expected to pay the charge. A large number favoured Direct Debit but several also asked if they could pay it in the same way that they pay their Council Tax. One customer asked what would happen if someone fell behind with their payments.

5 Considerations following the consultation feedback

- 5.1 The Resources Board is asked to consider and comment on the feedback and either continue with the recommendations relevant to the consultation process made to Full Council or make amendments. Essentially this report is concerned with the charging proposals for current customers. Whilst views have been elicited from the consultation about the future shape of the service, these will be considered in the forthcoming months as the other recommendations agreed by Full Council are acted upon and reported to the Resources Board in January 2017.
- 5.2 When the Council writes to customers again following this Board the letter will need to include the following information:
 - The initial monthly charge payable and when it will be reviewed
 - VAT payable for the service and exemptions
 - Whether other methods of payment can be offered to current customers in addition to Direct Debit
 - The charge is applicable to a household rather than individuals in the household

6 Other charges

- 6.1 The Resources Board is asked to make a decision about the charging levels and mechanism for current customers who are made up of individual households that live within the Borough. There are three matters arising from the charging considerations.
- 6.2 The Council currently charges customers who are aged under 62 for the service they receive. This is means tested. 6 customers currently pay a charge of £3.75 per week plus VAT. It is proposed that when the Resources Board makes a decision about the level of charge to be requested from current customers that the same charge is applicable to the customers who currently pay. This will mean a reduction for them.

- 6.3 The Council has contractual arrangements with other organisations to provide a monitoring service for their customers. Often this involves support overnight when the organisations wardens go off duty. These organisations provide the lifeline equipment to their own premises. It is proposed that the principle of full cost recovery is applied to these contractual arrangements and that a charge is agreed with them in accordance with this principle and the level of service they receive from the Council.
- 6.4 The Council has seven customers who do not meet the agreed criteria for the receipt of this service because they live outside North Warwickshire. They live in Coventry, Birmingham, Nuneaton, Tamworth and Hinckley. These are legacy customers who were provided with the service many years ago. The Council could end the service to these customers as it does not meet their agreed policy criteria. Sufficient notice could be given to allow them the opportunity to find another provider. Alternatively we could continue to provide a service for them. They are currently charged £63.58 per annum. This covers the cost of equipment and for monitoring. The visiting service is not available to them because of where they live however if the equipment fails a visit has to be made. If the Resources Board agrees to continue the service for these customers it would be appropriate to apply the principle of full cost recovery and the charge would be reviewed and be in the region of £120 + VAT per annum.

7 Report Implications

7.1 Finance and Value for Money

- 7.1.1 The 2015/16 budget for the Borough Care service specifically is currently £567,000 plus £23,000 for equipment.
- 7.1.2 Charges attract VAT at 20% for any customers who do not qualify for zerorating under HMRC Notice 701/7. Those that sign a self-declaration form stating that they are 'chronically sick or disabled' will have VAT subtracted from the charge by the Council. It should be noted that to be classified as 'chronically sick and disabled' the person must:
 - Have a physical or mental impairment which has a long-term and substantial adverse effect upon his/her ability to carry out everyday activities: or
 - Have a condition which the medical profession treats as a chronic sickness, such as diabetes: or
 - Be terminally ill Older people who are frail but otherwise able bodied, or anyone with a temporary disability or illness would not qualify."
- 7.1.3 In order to promote the service it has been agreed that £2,000 of earmarked reserves will be used for a small marketing exercise.
- 7.1.4 It is administratively efficient to take payments for the service by Direct Debit. However to support current customers an exception could be made to allow them to make payments using the same method as they use for their Council

Tax payments which is by way of a bar code. If this method is chosen quarterly payments would be required to reduce administrative costs.

7.2 Safer Communities Implications

7.2.1 The service can act as a good neighbour for vulnerable residents. It can be proactive in advising residents about risks to their security and can be easily contacted for advice if someone has a concern.

7.3 Human Resources Implications

- 7.3.1 Over the next 12 months if the service structure is reviewed staff and unions will be consulted about the implication of any changes.
- 7.3.2 There are a number of temporary positions in the Community Support Team. It is intended that they remain temporary until the design of the service is reviewed and the staff structure needed to meet it is considered.
- 7.3.3 If the charging structure is simple and a policy agreed that all fees must be paid by Direct Debit no additional capacity will be required to apply the charge. If a more complex system of charging is proposed consideration will be required with regard to how to resource its application.

7.4 Equality Implications

- 7.4.1 The Council's current policy criteria is open to challenge as it does not provide equal access customers under the age of 62 are expected to pay and those over that age have to pay for the service.
- 7.4.2 The revised policy criteria meets Equality Act requirements. It is open to adult applicants of all ages and there is an intention to make the same charge to all.

7.5 Risk Management Implications

- 7.5.1 Residents aged over 62 have enjoyed the Borough Care Service free to date. When a charge is made it is possible that some residents will opt out. This will have an impact on income revenues and also the staff capacity required to meet the needs of the service. The impact will be monitored throughout the year and be subject to a formal review in January 2017.
- 7.5.2 The intention is to ask paying customers to pay a rate for the service they receive that is less than most competitors and less than will be charged to current customers. Some residents may be concerned about their ability to pay for the service. If this is the case advice and support can be given. This will include advice about income maximisation. The Council is aware that residents who need support can ask for a Care Act assessment which would consider their eligibility for a Personal Budget (367 are currently provided in the Borough) and Personal Independence Payments or Attendance Allowance which are intended to pay for services that support people's independence in their homes or additional living costs of being disabled. The Warwickshire Welfare Rights

Service is assisting the Council to support customers where income levels and affordability is of concern.

7.6 Legal and Human Rights Implications

7.6.1 Recent case law gives a strong indication about how the Council should consult current customers about the proposed changes to the Borough Care policies. The Council has undertaken the consultation on this service in a way that accords with the relevant requirements.

The Contact Officer for this report is Angela Coates (719369).

Agenda Item No 8

Resources Board

18 April 2016

Report of the Deputy Chief Executive

Internal Audit – Performance for Third Quarter 2015-16

- 1 Summary
- 1.1 The report allows the Board to monitor the progress of the Council's Internal Audit function against the agreed plan of work for the year.
- 2 Recommendation to the Board

That the report be noted.

- 3 Introduction
- 3.1 The PSIAS -Public Sector Internal Auditing Standards on Internal Audit in Local Government defines standards of best practice for internal audit. The Standard requires that Members both approve the Internal Audit Section's strategic work plan and receive periodic reports on performance against plan. This report summarises performance for October to December 2015.
- 4 Summary of Work Completed
- Appendix A to the report summarises progress on the approved audit plan for the period, identifying audits completed and indicating the extent of progress on those audits still outstanding from the approved audit plan. The number of audits scheduled has reduced due to the complexity of the reviews currently being undertaken. This revised approach has been agreed with the Deputy Chief Executive as improving the efficiency and effectives of the internal audit function benefitting to the maximum, service provision. Appendix B provides definition for the levels of assurance applied which have been improved for 2014-15 and ensuing years.
- 4.1 The external auditors reviewed the work of Internal Audit in April 2015 and as in previous years were completely satisfied with the work that had been completed. The annual audit survey was undertaken in house at the end of 2014 and this provided additional assurance that the team continue to work effectively and efficiently.

- 4.2 Internal Audit can place a substantial level of assurance on the following: Risk Management, Insurances, Land Charges, Forward Planning and Local Plan and VAT. Training and Development/Appraisals was given a substantial/adequate assurance. Adequate assurance was given on Recycling.
- 4.3 The Internal Audit Section continues to work on a selection of contingency audits. These are reviews carried out either resulting from departmental requests, external audit suggestions, counter fraud activity and monitoring of reporting information from the National Fraud Initiative.
- 4.4 The performance standards set by the Audit Commission require that Internal Audit complete at least 90% of planned work in the year unless there are good reasons otherwise. In calculating that statistic, planned work deferred at client request is ignored if such deferrals have appropriate justification. All client requests for deferrals have been based on sound, service based justifications.

5 Report Implications

5.1 Risk Management Implications

5.1.1 Failure to provide an effective Internal Audit Service may adversely affect the level of internal control operating within the Council and will attract criticism from external assessors such as the Audit Commission and the External Auditor.

5.2 Links to Council's Priorities

5.2.1 The audit programme agreed and delivered is aligned to both the priorities of the Council and the requirements of external assessors.

The Contact Officer for this report is Barbara Haswell (719416).

Background Papers

Local Government Act 1972 Section 100D, as substituted by the Local Government Act, 2000 Section 97

Background Paper No	Author	Nature of Background Paper	Date

Audits Completed quarter 3 2015-16

Audit	Quarter Due	Status	Assurance Level	Tot No. of Recs	Priority1	Priority2 Not Agreed
Risk Management	3	Final	Substantial	3	0	3
Insurances	3	Final	Substantial	6	0	6
Recycling	1-2	Final	Adequate	14	8	6
Land Charges	3	Final	Substantial	3	1	2
Forward Planning & Local Plan	3	Final	Substantial	2	1	1
VAT	3	Final	Substantial	2	1	1
		5 6	Adequate/Sub		•	
Training & Development-Appraisals	3	Draft	stantial	3	0	3

Reasons for not providing a substantial assurance level on final reports ~ Recycling Audit

The TRISCAN fuel monitoring system (which allows for the use of both a vehicle tag and magnetic driver fob during fuel dispensing) whilst used at the Sheepy Road depot, cannot be installed at the Lower House Farm [LHF] facility (where the majority of Waste Management vehicles are now re-fuelled) due to broadband connectivity issues. Thus, monitoring is not as robust in terms of security over fuel dispensing (i.e. to safeguard against potential theft of fuel), since magnetic driver fobs cannot be deployed without TRISCAN. Control is therefore reliant upon less robust fuel monitoring and certain other compensatory controls. Efforts continue to be made to try to resolve the broadband issues so as to ideally allow TRISCAN to be introduced at LHF.

At the time of the audit, Waste Management Driver Risk Assessments had not been introduced. Since then assurances have been given that two members of staff have become suitably accredited as assessors and driver risk assessments are now being undertaken.

The TOM TOM vehicle tracking system was not being used to its full potential to facilitate effective vehicle tracking, in that, no use was being made of the automated 'exception reporting tool' within TOM TOM. Instead, monitoring is undertaken by supervisors using TOM TOM to map sample vehicle journeys which is not as full-proof / robust at identifying potential anomalies and is not deemed to be effective use of supervisory time, given the availability of automated exception reporting. The Vehicle Monitoring Group have recently been working towards procurement of a new vehicle tracking / telemetry system which will include the utilising of automated 'exception reporting' with pre-set parameters to more effectively keep track of vehicle: activity; whereabouts; route variations; speeding; excessive break time, etc.

Driver Accident History Records (including any accidents / incidents from previous employments) were not evident at the time of the audit,

however, action is now being undertaken to address this.

In relation to the overall processing of Comensura invoices for agency workers used in Waste Management, improvements had been made, although there were a few instances where Comensura invoices showed transactions recorded as "hours owed" without indicating the associated dates, making it impossible to verify that payment is only made for hours actually worked and to safeguard against potential duplicate payment. In such cases, supervisors need to dispute invoice payment until missing dates are provided by Comensura and proper supervisory checks to local time records can be undertaken.

Progress Against Audit Plan

Audit	Status	Audit	Status
Risk Management	Final	Recycling	Final
Emptying council houses	Final	Food safety	Final
Commercial properties	Final	Overtime	Final
Training & development-appraisals	Draft	Land charges C House	Final
Insurances	Final	sales	Ongoing
Leisure	Ongoing	Lettings etc	Final
Forward Planning & LDF	Final	VAT	Final

Perf	ormance of Audit 2015-16 for Quarterly Indic	ators	
No.		Suggested Frequency	Performance for Third Quarter of 2015-16
1	Performance reports to Resources Board	Quarterly	January 2016 (First half year together due to long term absence of Head of Audit)
3	Number of audits where time taken to complete the work is more than 10% longer than planned.	Quarterly	2 out of 7. Extra time required due to additional testing.
4	Number of audits completed by set deadline	Quarterly	5 out of 7. Remaining 2 deadline extended for extra work.
5	Final report issued within 4 weeks of completion of fieldwork	Quarterly	6 out of 7.
9	Questionnaire:Feedback obtained from report recipients is good (average 4 out of 5)	Quarterly	All those received are good.
10	% of sickness levels within Audit is below 5%	Quarterly	11.2% due to long term absence of both the Head of Audit and Senior Auditor

Internal Audit Levels of Assurance in Audit Reports.

Opinion Level of Assurance

Substantial Assurance	Overall, an effective control environment appears to be in operation from the review carried out. There may be a few weaknesses identified and there is scope for further improvement.
Adequate Assurance	Overall, satisfactory controls appear to be operating from the review carried out but there are a number of weaknesses identified and a number of improvements to be made.
Unsatisfactory Assurance	Overall, there appears to be a fundamental failure in control from the review carried out and a number of key areas require substantial improvement to protect the system from error and abuse.

Audit Recommendations Categories

Priority 1 Significant risk – action required within 3 months

Priority 2 Moderate risk – action required within 6 months

Agenda Item No 9

Resources Board

18 April 2016

Report of the Assistant Chief Executive (Community Services)

Adoption of a Revised
Discretionary Housing Payment
Policy

1 Summary

1.1 The purpose of this report is to request that Members adopt a revised Discretionary Housing Payment Policy (DHP) following an update of the Discretionary Housing Payments Guidance Manual issued by the Department of Works and Pensions in February 2016.

Recommendation to the Council

To approve the Discretionary Housing Payment (DHP) policy as attached at Appendix A.

2 Consultation

- 2.1 The updated DHP policy has been developed with officers from Nuneaton and Bedworth Borough Council which will ensure a consistent application of this discretionary power within the area.
- 2.2 Consultation with the local Citizens Advice Bureau and Warwickshire Welfare Rights Service took place in 2013 when the original policy was approved. No substantial changes are proposed therefore further consultation has not taken place. An update will be given (should the policy be approved) at the next meeting of the Local Financial Inclusion Partnership scheduled for 20 April 2016.

3 **Background to the Report**

- 3.1 Since 2001, all Councils have been awarded a fixed amount of money by the Government to help people who qualify for housing or Council Tax benefit, but who are having trouble paying their rent or Council Tax.
- 3.2 Using a set of guidelines previously agreed by this board to award DHP, officers decide following receipt of a written application when it is appropriate to top up benefit award payments having regard to individual customer's circumstances.
- 3.3 As such, a DHP may be used to pay for:

- rent deposits
- rent in advance
- rent arrears (but not if you were receiving enough housing benefit to pay all of your rent at the time the arrears built up)
- a shortfall between housing benefit and rent
- reductions caused by a number of the welfare changes that have been introduced in recent years
- 3.4 The Council already have a DHP policy in place which sets out how a DHP can be applied for and the circumstances we will take into account when considering if a payment can be granted. This policy has been refreshed and updated to ensure that the policy remains fit for purpose and reflects the good practice guidance issued by the Department of Works and Pensions.
- The revised DHP policy attached at Appendix A will take effect from 25 April 2016. Whilst it is based largely on the existing policy, it makes it clear what factors will be considered when deciding a DHP award.

4 Report Implications

4.1 Finance and Value for Money Implications

- 4.1.1 In 2015/16, the Council received a DHP budget from the Government of £55,881. A Council was allowed to top this budget up from its own funds up to a maximum spend of £139,703. The Council has never spent over the Government award due to a lack of demand as well as other budgetary pressures.
- 4.1.2 In 2016/17, the Council will receive a DHP budget from the Government of £66,936, increased to reflect the impending changes and is allowed to incur a maximum spend of £167,340 should it choose to top it up from its own funds. At this stage, no proposals are being made to recommend this but this position will be monitored by the Assistant Chief Executive (Community Services) as part of monthly financial monitoring arrangements in place.
- 4.1.3 It is anticipated that the DHP fund will be insufficient to meet the increased demand that will be placed on it by tenants expected to meet increased housing costs in 2016/17. As such, it is anticipated that a number of applications will not be successful even where increased hardship can be proven in these cases appropriate referrals will be made to our Financial Inclusion Partners.
- 4.1.4 Officers will consider with tenants alternative ways of meeting their shortfall but, should it be considered necessary to request a supplementary estimate to increase the DHP budget available in 2016/17, this will be reported to Members at a future Board who will have to consider this, having regard to other competing budgetary pressures.

4.2 Safer Communities Implications

- 4.2.1 The award of a DHP even for a short period of time should ensure a safety net is put in place to help at a time when people are at their most vulnerable. It will provide the time and opportunity for the applicant and support organisations to review a more sustainable and permanent solution to assist the customer to meet their increased financial obligations going forward.
- 4.2.2 Appropriate signposting will be considered for all DHP applicants regardless of whether and award is made.

4.3 Human Resources Implications

- 4.3.1 The Division anticipates a significant number of applications that will need to be considered by officers in 2016/17. In addition, many customers will rely on help to assist them in submitting written applications placing further demands and expectations on the Council and local advice agencies.
- 4.3.2 This number of DHP applications will be monitored to ensure there is sufficient capacity to respond to written applications in a timely way. Following a recent restructure of the Community Services Division, DHP applications will now be dealt with by Benefits Officers creating more resource to consider the applications.

4.4 Legal and Human Right Implications

4.4.1 There is no right of appeal to a tribunal where the Council refuses to make an award of DHP but the applicant can ask the Council to review its decision. This is covered under Section 12 of the policy. If that request fails, the only way to challenge the decision is in the courts by way of Judicial Review.

4.5 Risk Management Implications

4.5.1 Please refer to the risk management document at the end of this report.

4.6 Equalities Implications

4.6.1 The policy includes the identification of priority groups whilst each individual case is considered on its own merits. The priority groups include a number of potential cases relating to young people, people with disabilities, victims of domestic violence and other groups which are included in the protected characteristics in the Equality Act 2010. The monitoring and review of the implementation of the revised policy can help identify if any particular group is adversely impacted by the application of the policy.

The Contact Officer for this report is Bob Trahern (719378).

Background Papers

Local Government Act 1972 Section 100D, as substituted by the Local Government Act, 2000 Section 97

Discretionary Housing Payments Guidance Manual issued February 2016

Background Paper No	Author	Nature of Background Paper	Date

Equality Impact Assessment Summary Sheet

Please complete the following table summarised from the equality impact assessment form. This should be completed and attached to relevant Board reports.

Name of Policy Procedure/Service	Revised Discretionary Housing Policy
Officer Responsible for assessment	Bob Trahern

Does this policy /procedure /service have any differential impact on the following equality groups /people

- (a) Is there a positive impact on any of the equality target groups or contribute to promoting equal opportunities and improve relations or:
- (b) could there be a negative impact on any of the equality target groups i.e. disadvantage them in any way

Equality Group	Positive impact	Negative impact	Reasons/Comments
Racial	-		
Gender	Х		Victims of domestic violence are a priority group. The majority of victims of domestic violence are women.
Disabled people	X		People with disabilities are a priority group in a number of circumstances.
Gay, Lesbian and Bisexual people			
Older/Younger people	Х		Young people are included as a priority group in a number of circumstances.
Religion and Beliefs			
People having dependents caring responsibilities			Some consideration to the circumstances of foster carers and young people in care is set out in the policy.
People having an offending past			The policy sets out an option to consider claimants where circumstances have materially changed.
Transgender people			

If you have answered **No** to any of the above please give your reasons below

Please indicate if you believe that this document	
Should proceed to further Impact assessment	
Needs no further action	

Risk Management Form

NORTH WARWICKSHIRE BOROUGH COUNCIL

Division

Cost Centre or Service

Risk Ref	Risk: Title/Description	Consequence	Likelihood (5 = high, 1 = low)	Impact (5 = high, 1 = low)	Gross Risk Rating	Responsible Officer	Existing Control Procedures	Likelihood(5 = high, 1 = low)	Impact (5 = high, 1 = low)	Net Risk Rating
1	Insufficient funds to meet the demand on the DHP available funds Lack of capacity to	Customers are unable to meet their rent payments in full	4	4	16	Bob Trahern	The Council will review the level of applications and seek alternative ways of providing support if funding is not available e.g. making awards of food	3	3	9
2	deal with a significant increase in the number of requests for DHP and the subsequent appeals	Inability to operate an efficient benefits service	2	4	8	Bob Trahern	We will continue to work closely with customers and partners to mitigate the risk of this happening	2	2	4
3	The DHP scheme is brought into disrepute	Policy is not "fit for purpose"	2	4	8	Bob Trahern	We have experience of operating our current scheme which will mitigate the risk of this happening	1	4	4

Completed By: Bob Trahern Date 21st March 2016

Agenda Item No 10

Resources Board

18 April 2016

Report of the Assistant Director (Housing)

Safeguarding Adults – Policy Update

1 Summary

1.1 This report provides the Resources Board with information about how the Borough Council supports the work of the Warwickshire Safeguarding Adults Board and sets out a revised Policy for comment and agreement.

Recommendation to the Resources Board

That the revised Safeguarding Policy for Adults with Care and Support needs appended to the report be considered and agreed.

2 Consultation

2.1 The Chairman of the Resources Board (Councillor Wright) and the Opposition Spokesperson (Councillor Henney) have been sent a copy of the report.

3 Introduction

- 3.1 Warwickshire has a Safeguarding Adults Board which accords with relevant legislation and regulatory requirements. The Board acts as multi agency forum which considers how agencies should work together to safeguard vulnerable adults from abuse in the County. The Board has an independent Chair.
- 3.2 The Borough Council has had a policy in place which supports the work of the Board for some years. The policy is attached at Appendix B of this report for information.
- 3.3 The Council's policy and the arrangements in place for District and Borough Councils to support the work of the Safeguarding Adults Board have been reported to the Housing Sub Committee to date.

- 3.4 The Borough and District Councils are represented on the Board. Representation is by way of a designated leads which attends on behalf of the Councils. This arrangement is supported by a Borough and District Sub Group which enables all of the leads to meet quarterly to discuss the matters raised at the Board and practical arrangements to support the work of the Board. The Assistant Director (Housing) attends on behalf of the Council.
- 3.5 Safeguarding vulnerable adults is not just a matter for housing authorities. Other services Councils can also support the work of the Board. Officers from all sections of the Council have been trained to recognise signs of abuse and have information about how to report concerns. The County Council is the lead authority in investigating concerns but the Board promotes the importance of safeguarding being everybody's business.

4 Current Position

- 4.1 A lot of the work of the Board recently has been concerned with implementing the requirements of the Care Act 2014. The Act puts the Safeguarding Adults Board on a statutory footing. It continues the historic position in which the County Council is the lead authority with regard to safeguarding enquiries (and working in partnership to manage risks) but makes it into a statutory duty. Decision making in serious case reviews in some situations become mandatory. There is a duty to co-operate over information supply.
- 4.2 The Warwickshire Safeguarding Adults Board produces an annual report. This is attached at Appendix A for the Boards information.
- 4.3 The District and Borough Sub Group has revised the local Policy which supports the work of the Warwickshire Adults Safeguarding Board. The revised policy reflects the requirements of the Care Act 2014 and provides for practical arrangements for the Council's staff to act when they have concerns about an adult with care and support needs. The report is attached for consideration and comment at Appendix B.
- 4.4 At Section 27 the policy statement refers to other arrangements which support the work of the multi agency Board. There are specific arrangements for cases of Domestic Abuse. This is the Multi Agency Risk Assessment Conference (MARAC) which is attended by the Housing Services Manager. There is also the Multi Agency Safeguarding Hub (MASH). This is a new initiative which provides for a multi agency team based in the County's premises in Saltisford which will act quickly to deal with safeguarding reports and concerns. Initially from May 2016 it will be for safeguarding for children however the arrangements for adults will also migrate to the new team from September 2016. The District and Borough Councils will be acting to support these new arrangements.
- 4.5 As part of the countywide safeguarding arrangements the Council has signed up to a scheme called Safe Spaces. This scheme allows people with Learning

Difficulties to have easy access to a safe place to let a trained officer know if they have concerns about how someone is behaving towards them. The One Stop Shop team have taken the lead for the Council with regard to this initiative and there is clear signage to indicate that they will be able to assist and offer support.

5 Report Implications

5.1 Financial and Value for Money

5.1.1 The Council supports the Warwickshire Safeguarding Adults Board with a contribution of £2,000 annually. In general this pays for staff training.

5.2 Equalities

5.2.1 Having equal opportunity with regard to living independently and free from abuse is at heart of the support District and Borough Councils give to the work of the main Board. Early intervention is possible with good awareness from staff who know what signs to look for and where to report concerns.

The Contact Officer for this report is Angela Coates (719369).

Background Papers

Local Government Act 1972 Section 100D, as substituted by the Local Government Act, 2000 Section 97

Background No	Paper	Author	Nature Paper	of	Background	Date



Annual Report 2014-15

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Foreword by WSAB Chair

I have been struck throughout my first year as Independent Chair of your Safeguarding Adults Board by the commitment of members and all those who engage with our sub-committees to meet the challenges of understanding the risk of abuse and of providing an effective and timely response to those in need. There is an established culture of collaborative endeavour coupled with constructive challenge which results in a strong inter-agency approach to safeguarding. All this has provided the Warwickshire Safeguarding Adults Board with a sound base to analyse the changes required by the Care Act which was implemented on 1st April 2015 and to define the work needed to deliver these. One result has been a revision of membership of the Board and the production of a constitution defining our function and our structure. I took opportunity to write to all Members, both those going and those remaining, to thanks them for all their hard work and contribution to safeguarding adults in the County.

The SAB now has to produce a Strategic Plan outlining how we will meet our main objective of being to help and protect adults in our area by co-ordinating and ensuring the effectiveness of what each of our Members does. We have drafted a three year plan which gives us the basis for our work year on year and will be reviewed and published annually. In future our Annual Report will increasingly reflect our performance against this Strategic Plan.

This prime focus for our work means understanding how to support and empower people at risk of harm and anti-social behaviour to resolve the circumstances which caused this and be in control of decisions in their lives. This is reflected in the construct of Making Safeguarding Personal which is referenced in the Care Act and to which we are fully committed. The task for the Board is to ensure that policy and practice across all the member agencies delivers the required outcomes of Making Safeguarding Personal and that we can test performance and report on it. Part of this is the need for us to raise the understanding of abuse and risk with a view to making safeguarding everyone's business. The investment in communication through published material and our website will continue in support of this.

I have greatly valued the engagement and support of the members of the Board and of their agencies. It is essential that our work has senior management and political endorsement both for the considerable time and effort which staff apply and for the profile of adult safeguarding work. I wish to acknowledge the readiness of all concerned to work with us.

Mike Taylor, Independent Chair, Warwickshire Safeguarding Adults Board

Introduction

The Warwickshire Safeguarding Adults Board (WSAB) is a partnership arrangement that includes Warwickshire County Council, Warwickshire Police, the NHS services in Warwickshire, the District and Borough Councils and the local voluntary sector. Its objective is to help and protect adults with care and support needs in the County, who are experiencing, or at risk of abuse or neglect.

The Care Act Guidance 2014 describes care and support as "The mixture of practical, financial and emotional support for adults who need extra help to manage their lives and be independent – including older people, people with a disability or long-term illness, people with mental health problems, and carers. Care and support includes assessment of people's needs, provision of services and the allocation of funds to enable a person to purchase their own care and support. It could include care home, home care, personal assistants, day services, or the provision of aids and adaptations."

Defining abuse or neglect is complex and rests on many factors. The term "abuse" can be subject to wide interpretation. It may be physical, verbal or psychological, it may be an act of neglect, or occur where a vulnerable person is persuaded to enter into a financial or sexual transaction to which they have not, or cannot consent.

Abuse or neglect may be the result of deliberate intent, negligence or ignorance. Exploitation can be a common theme in the experience of abuse or neglect. Whilst it is acknowledged that abuse or neglect can take different forms, the Care Act Guidance identifies the following types of abuse or neglect:

- Physical abuse including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions;
- Domestic violence including psychological, physical, sexual, financial, emotional abuse; so called 'honour' based violence;
- Sexual abuse including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting;
- Psychological abuse including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks;
- Financial or material abuse including theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits;
- Modern slavery encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment;

- Discriminatory abuse including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion;
- Organisational abuse including neglect and poor care practice within an
 institution or 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 on-going ill-treatment. It can be through neglect or
 poor professional practice as a result of the structure, policies, processes and
 practices within an organisation;
- Neglect and acts of omission including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating;
- 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.

The Care Act states "the SAB has a strategic role that is greater than the sum of the operational duties of the core partners. It oversees and leads adult safeguarding across the locality and will be interested in a range of matters that contribute to the prevention of abuse and neglect. These will include the safety of patients in its local health services, quality of local care and support services, effectiveness of prisons and approved premises in safeguarding offenders and awareness and responsiveness of further education services". It further states the three core duties of the SAB, which are set out in sections 43 and 44 and Schedule 2 (Care Act 2014) and Chapter 14 of the Statutory Guidance:

- It must publish a strategic plan for each financial year that sets how it will
 meet its main objective and what the members will do to achieve this. The
 plan must be developed with local community involvement, and the SAB must
 consult the local Healthwatch organisation. The plan should be evidence
 based and make use of all available evidence and intelligence from partners
 to form and develop its plan;
- It must publish an annual report detailing what the SAB has done during the year to achieve its main objective and implement its strategic plan, and what each member has done to implement the strategy as well as detailing the findings of any Safeguarding Adults Reviews and subsequent action;
- It must conduct any Safeguarding Adults Review in accordance with Section 44 of the Act.

More specifically in relation to SAB Annual Reports:

The Care Act 2014 requires all Safeguarding Adults Boards (SABs) to publish an annual report and to specifically include:

- What it has achieved during the previous financial year;
- What it has achieved during that year to implement its strategy;
- What each member has done during that year to implement its strategy;

- The findings of any Safeguarding Adults Reviews (SAR's) completed during the year;
- Details of any SAR's ongoing at the end of that year;
- What it has done during that year to implement the findings of SAR's and the reasons for deciding not to implement the findings of any SAR.

The WSAB agreed an operating budget for 2014-15 with contributions from Warwickshire County Council, Police, Clinical Commissioning Groups (3), District and Borough Councils and Probation. This budget was sound and sufficient and is monitored and overseen by the Governance Group (appendix 2) and adjustments recommended as required.

There have not been any Safeguarding Adult Reviews (SAR's) during this report period and there are none currently in progress.

This report covers the period 2014-15 and is to be viewed as transitional in nature as it overlaps the period pre and post Care Act Guidance being issued in October 2014. It therefore will serve as a conduit between non statutory and statutory changes being implemented, leading to a fully Care Act compliant report in 2015-16.

NB: Since this Report was drafted, the Department of Health has removed the requirement for members of the SAB to have a Designated Adult Safeguarding Manager (DASM). The tasks allocated to this role still need to be fulfilled and the Board will monitor this. References to the DASM in this Report need to be considered in this revised context.

Constitution

A new WSAB Constitution was written and implemented during 2014-15 to be fully compliant with Care Act requirements being introduced in April 2015. This states: 'The Warwickshire Safeguarding Adults Board ['WSAB' or 'the Board'] is established by Warwickshire County Council ('the Council') under section 43 of the Care Act 2014 and the Care and Support Statutory Guidance (October 2014)' ['the Statutory Guidance'].

During 2014-15 WSAB conducted a review of membership and governance arrangements. The new WSAB membership (appendix 1) is now more reflective of the broader scope that adult safeguarding needs to embed and further develop, and alongside the WSAB Sub Committee restructure places the Board in a strong position moving forwards to make meaningful and evidenced progress against the evolving local and national adult safeguarding agenda. The new governance structure (appendix 2) reduces the original 7 sub committees to 5 and converts the Chairs Group to a Governance Group, with refreshed membership and terms of reference. The membership comprises of:

- WSAB Independent Chair;
- DASS or nominated senior manager;
- CCG representative;
- Police representative;
- WSAB Sub Committee Chairs:
- Others as deemed relevant by the SAB Chair to the business of the Governance Sub Committee.

The WSAB Sub Committees comprise:

- Safeguarding Adults Review (SAR);
- Performance, Monitoring and Evaluation;
- Workforce Development;
- Procedures and Guidelines:
- District and Borough Councils.

WSAB Strategic Plan 2015-18

The WSAB Strategic Plan 2015-18 sets the shared multi-agency tone and purpose for the coming three years. It is not a fixed document and will be reviewed and developed annually, but gives definition to what is important for adult safeguarding in Warwickshire and how the Safeguarding Adults Board will work, to ensure that everything is being done to prevent abuse and that a timely and proportionate response is made when it occurs. It is important to acknowledge that some of the priorities outlined will present some challenges and need to be viewed as 'work in progress.' This has particular relevance when meaningfully progressing issues of community engagement/involvement and setting multi-agency priorities in the context and reality of reduced budgets and inconsistent Government guidance in the field of adult safeguarding.

The Strategic Plan also identifies the required links with other strategic partnerships:

- CCG Board(s);
- · Children's Safeguarding Board;
- Community Safety Partnership;
- Overview and Scrutiny Committee;
- · Health and Wellbeing Board;
- Quality Surveillance Groups.

It is also of particular note that it has been identified within the governance arrangements for WSAB to have a reporting relationship with both the Warwickshire County Council Health and Wellbeing Board and Warwickshire Healthwatch.

The Strategic Plan includes a Business Plan for 2015-16 (appendix 3) that has been formulated to provide a clear focus to ensure the most effective use of resources. The Plan is a 'living' document and as such is expected to evolve over time to allow refinements and further developments to be made.

Activity and Performance Measurement

Safeguarding Adults Return (SAR) First Submission Summary

The Safeguarding Adults Return (SAR) replaced the Abuse of Vulnerable Adults (AVA) return and was first reported in 2014. The 2014/15 return (Appendix 4) is the second submission of this return and will be the first to be validated against last year. There are a number of minor changes from the previous year, which will be identified throughout this summary. This dataset combines Safeguarding referrals received by both Warwickshire County Council and Coventry & Warwickshire Partnership Trust, under the section 75 agreement.

Referrals Received

The first section of the return provides a demographic breakdown of the number of referrals received across four tables (SG1a-d). Overall 685 unique referrals were received, relating to 599 unique individuals. This is a reduction from the last year's figure of 697. Quarterly reporting has shown an ongoing slight reduction in the number of referrals received from the previous year, possibly as the alerts form has become fully embedded in the safeguarding process. Prior to the introduction of the alerts form 'marginal' cases may have been recorded as a referral for want of a more appropriate methodology. Although the alerts form was introduced in October 2012 it is possible that the impact was still being felt in 2013/14, and that the 2014/15 data is a more accurate baseline. In addition the CWPT have revised their definitions and reclassified some referrals as alerts, which will also have contributed to the slight reduction.

The greatest proportion of alleged victims was aged between 18-64 (243) with 85-94 year olds making up the second greatest at 148. 369 alleged victims were female with 230 males – consistent with the 60% female/40% male ratio reported throughout the year. Similarly the ethnic breakdown remains consistent with quarterly reporting as 495 victims were white, and assuming the majority of the 82 people for whom no ethnicity was recorded were also white, suggests that just under 4% referrals related to non-white people – closely reflecting Warwickshire's demographics and suggesting that non-white people are not disproportionately likely to be the victim of a safeguarding referral.

One of the more significant differences between the 2013/14 SAR and the current collection is the replacement of the 'current client group' classification with the 'primary support reason'. Previously the 'current client group' would reflect the person's 'main' need. However, it is possible that they received services for a different reason, unrelated to their 'main' need – for example, a person may have a learning disability but the services they receive relate to sensory support. The primary support reason reflects the main reason they receive services, which may be different from other significant needs they have. Overall the greatest proportion of referrals related to people with physical support needs (168 people) with support for memory and cognition (78 people), Learning disability support (73) and mental health support (77 – mainly from CWPT data) making up the other significant totals. In addition, it is possible that a primary support reason may not be recorded, either

because that data is not available of because the person does not receive a WCC-commissioned service. 161 people fell into this category.

To complement the introduction of the primary support reason, the 2014/15 SAR also collects information on the reported health conditions of the people to receive a referral. Only the fields relating to autism and Asperger's are mandatory for this collection but we have populated all available fields. There were 18 recorded instances of people with autism or Asperger's health conditions receiving a referral, and significant numbers with dementia (65) and learning disabilities (49) as well as 'other long term health conditions' (132). These fields are not mutually exclusive, as a person may have multiple health conditions recorded. However, a significant proportion (273 people) did not have any relevant health conditions recorded – either because they do not have any such conditions or because, as this is a new classification, the data has not yet been recorded.

Referrals Completed

Section SG3 relates to the number of referrals concluded in the period, regardless of when they started. All tables are broken down by the source of risk, which was previously known as the 'alleged perpetrator' in the AVA. The three sources of risk are social care staff, other people who are known to the individual and other people who are not known to the individual. In many cases a referral will have multiple sources of risk – in these cases, if the sources of risk all relate to the same area (i.e. a family member and a friend – both of which would be classified as 'other – known to individual') the referral would be counted once in that column. However, if the sources of risk spanned two categories (for instance a social worker and a family member) that referral would be counted twice. 382 referrals related to individuals known to the victim (mostly friends and family members), 181 to social care staff, and 33 to strangers or unknown people.

Table SG3a breaks down the number of referrals closed by the source of risk and the type of alleged abuse. Those breakdowns remain remarkably consistent with the previous year – since multiple entries are permitted on both the source and type of risk it is more helpful to look at the proportions than actual numbers. Financial and material abuse makes up the largest proportion of referrals (29.2% in 2014/15, down slightly from 32.6% last year) with physical abuse alleged in 26.1% referrals this year compared to 27.6% in 2013/14. There has been a slight increase in the prevalence of emotional and psychological abuse, up from 17.4% in 2013/14 to 22.3% this year.

Table SG3b provides a breakdown of the location of alleged abuse by source of risk. As with the previous table, the proportions remain remarkably consistent to the previous year with the majority (55.9% in 2014/15 and 54.9% in 2013/14) of allegations relating to abuse which occurred at least partly in the victim's own home. The other significant location remained care homes, which saw 24.6% allegations in 2014/15, increasing slightly from 22.9% last year.

Table SG3c shows the action taken at the conclusion of a referral. 35.5% referrals saw no further action taken under safeguarding in 2014/15, increasing from 27.5% in 2013/14. Of those referrals which did see action taken, there was a slight reduction in the proportion which saw the risk remain (often because the victim has chosen

that option) from 6.9% last year to 5.5% this year. The proportion of referrals where the risk was reduced decreased slightly from 42.5% to 38.3% year on year, with referrals where the risk was removed decreasing from 23.1% in 2013/14 to 20.7% in 2014/15.

Table SG3d shows the conclusion of referrals, identifying whether the allegation was substantiated or not. 28.8% referrals were fully substantiated (26% in 2013/14) with 14.7% partly substantiated (18.8% previously). 14.7% referrals were inconclusive (rising slightly from 13.1% last year) but a broadly similar proportion (34.9% in 2014/15, 39.5% last year) was not substantiated. There was a marked increase in the number of referrals where the individual concerned refused the process – 6.9% this year compared to 2.6% last, which equates to roughly double the number of referrals with this outcome recorded.

Mental Capacity

The SAR introduced a new table showing the number of referrals completed by the recorded mental capacity of the alleged victim. Of those referrals where the victim lacked mental capacity, the table records the number to receive support from an independent advocate, friend or family member.

The proportion of people who lacked mental capacity fell from 26.8% in 2013/14 to 22.7%. The proportion confirmed as having mental capacity remained static (50.3% last year, 50.4% in 2014/15). In 2014/15 a new option to report that mental capacity was 'not recorded' was added, which differs from 'not known'. In 2013/14 both of these options would have been recorded under 'don't know' with 22.9% referrals falling into this category last year, rising to 26.9% this year. Only 19 referrals did not have any mental capacity recorded, with the remainder or that 26.9% being specifically recorded as 'don't know' on Carefirst.

Serious Case Reviews

Table SG7 in Appendix 4 shows the number of serious case reviews, but none were recorded in 2014/15.

Sub Committee Annual Reports

Performance, Monitoring and Evaluation Sub-Committee

The work of the Performance, Monitoring and Evaluation Sub-Committee has as its primary focus, the development and implementation of assurances processes to ensure that the Board is effective in meetings its statutory responsibilities to safeguard vulnerable adults.

During 2014-15, the Performance, Monitoring and Evaluation Sub-Committee has made a number of key safeguarding achievements.

The sub-committee was responsible for managing the "section 11" audit process and its findings which sought assurance from member agencies that they were fulfilling their responsibilities to safeguard vulnerable adults. This provided a valuable opportunity for agencies to undertake a self-assessment and identify areas of good practice and areas for improvement and enabled the Board to have oversight of member agencies activities. These findings have also helped to develop the key strategic areas of the Board.

The sub-committee has also maintained responsibility for the development of the dataset for the Board, which has been revised to reflect changes to statutory reporting requirements. This has enabled the Board to provide a greater focus upon multi-agency practice.

The sub-committee has also provided effective scrutiny and challenge to specific areas of practice, through audit which has included MCA and DoLS.

The introduction of the Designated Adult Safeguarding Manager (DASM) in the Care Act 2014 led to the sub-committee to provide the Board with advice on the implementation of the role and an assurance of its implementation within the core statutory agencies.

During 2015-16, the new governance arrangements for WSAB have led to the responsibility for the oversight of the production of the Annual Report and the management of the budget for the Board being transferred to the Governance Group. This has provided the opportunity for the sub-committee to strengthen its functions in accordance with the requirements of the Care Act 2014. This will include:

- Revising the dataset to provide assurance in relation to the effectiveness of the safeguarding system during the customer journey and ensuring that the principles of Making Safeguarding Personal are incorporated;
- The development of an audit schedule to provide effective scrutiny on a range of practice areas;
- The development of a "risk register" for WSAB to ensure that the Board is meeting its responsibilities.

The Performance, Monitoring and Evaluation Sub-Committee action plan for 2015-16 is included as appendix 5.

Health Sub-Committee (Operational until December 2014)

One of the key safeguarding achievements from the Health Sub-Committee's 2014-15 work programme was in respect of MCA/DoLS. The sub-committee ensured appropriate provider adherence of the MCA/DoLS requirements by reviewing the NHS Standard Contract and ensuring all providers had policies and procedures in place. MCA/DoLS compliance is included in the Key Performance Indicators for providers and assurance is provided to the CCGs with regard to both Codes of Practice.

The most notable multi-agency success relating to the Health Sub-Committee was in respect of the Care Act; specifically, Health and Social Care working together to support the implementation of the Act, where the LA provided awareness regarding the implications for Health and both parties worked together to ensure the new structure of the WSAB was in place to meet the requirements of the Care Act.

Strategy, Information and Communications Sub-Committee

In 2014/15 the Strategy, Communication and Information Sub-Committee looked at a number of key areas of activity including the appropriateness of the WSAB web-site, the need for a prevention strategy, the delivery of a communication protocol and the working up of initial views on Adults in Need Conferences and a Safer Recruitment and Employment Policy for the Board.

Work on the Communications Protocol was completed prior to the dissolution of the Committee as part of the wider governance changes, the other activities will be carried forward by the Board or its sub-committees.

Safeguarding Adults Review Sub Committee

The work of the Safeguarding Adults Review Sub-Committee has as its primary focus, the management and oversight of Safeguarding Adult Reviews. During 2014-15, the Safeguarding Adults Review Sub-Committee has made a number of key safeguarding achievements.

The implementation of the Care Act 2014 provided the opportunity to strengthen the focus of the sub-committee upon developing shared learning from safeguarding adults reviews, and other statutory and local reviews both locally and nationally, in order to improve local practice and service delivery.

This led to the revision of the Terms of Reference and membership, to ensure that the sub-committee is able to maximise the learning from SARs and other relevant reviews and is able to draw upon a range of resources and expertise across the safeguarding partnership.

During 2015-16 the sub-committee will be focusing on the following areas:

 To develop a mechanism to ensure that cases which would benefit from a local review are identified, in order to share learning and improve practice and outcomes for customers:

- To make recommendations to WSAB on any cases where the mandatory criteria for a SAR is understood to be met;
- To oversee and manage any SARs;
- To ensure that relevant learning from Domestic Homicide Reviews and Serious Case Reviews is shared with WSAB;
- To provide an interface with the Performance, Monitoring and Evaluation Sub-Committee where assurance activities are required following a formal review.

Policy, Procedures and Guidance Sub-Committee

The sub-committee was reconvened in June 2015. It has revised its terms of reference to focus on supporting customers and their carers to achieve their desired outcomes. Effective interagency policy, procedures and guidance on safeguarding consistent with principles of Making Safeguarding Personal will help to achieve this. The most significant achievement in relation to the sub committee's area of responsibility during 2014-15 was WCC's lead role to produce the West Midlands Safeguarding Adults Policy and Procedures (WMPP). The existing WMPP were subject to considerable revision to ensure Care Act compliance. The WSAB Governance Group was notified in March 2015 that externally commissioned work had failed to produce a satisfactory WMPP. Subsequent work was led by Edward Williams (Safeguarding Adults Short Term Team Operations manager) resulting in a Care Act compliant draft WMPP adopted by all West Midlands SABs by 1st April. The final version of the WMPP should be on the WSAB agenda in January 2016. The 3 key elements in the 2015-16 work programme are:

- Embed the WMPP in practice across the partners in the WSAB through training, communication and performance management. There is a challenge for partners to provide evidence that they have implemented the WMPP in their organisations. There is a link with the training and performance sub committees:
- Collating evidence to assure the WSAB that the WMPP are used and achieve
 positive outcomes for people. There is a challenge to obtain the views of
 people regarding the outcomes they achieved. There is a link with the
 performance sub-committee;
- Establishing a consistent referral pathway and process from hospitals to the Safeguarding Adults Short Term Team. Pathways currently vary between hospitals and there is an opportunity for this to be consistent. The challenge will be to agree a single pathway between WCC and three different hospitals.

Sub-committee action plan for 2015-16 (appendix 6).

Workforce Development Sub Committee

A key achievement from the 2014-15 sub-committee work is the development of an Interagency Learning & Development Strategy which will be signed up to by all agencies. This strategy will form an appendix of the main WSAB strategy. The Sub-committee will then report into WSAB on a quarterly basis on the activity against the strategy, specifically in terms of single and multi-agency delivery and evaluation information about the quality of training delivery which will ensure WSAB can gain assurance that the workforce are being adequately trained across all partner

agencies. In 2014-15 we also revised the content of the Learning and Development Programmes to ensure compliance in line with the Care Act.

Key elements of the Work Programme for 2015-16 (appendix 7) focus on the development of an eLearning programme at an Awareness Level for all staff. This will be used as an induction programme for staff in partner agencies where relevant. Some Agencies have their own Safeguarding Adults induction programme already, but the content will be mirrored to ensure consistency where possible. Barriers to this are the delayed agreement of the Pan West Midlands procedures as the group are waiting for these to be finalised before fully developing the programme. We are currently at a stage of scoping existing materials for fit.

New Training on Self Neglect will be developed in line with the changes that have come into force as a result of the Care Act and increasing and maximising attendance on multi agency learning and development programmes is a key aim for 2015-16.

A further priority piece of work is outreach to third sector agencies in order to improve communication about learning and development offerings and encourage awareness and completion of recommended training. There is likely to be some barriers with regard to funding although the sub-committee will aim to mitigate against these by reviewing the charging policy and ensuring low cost access to training opportunities wherever possible.

The group will also review the Making Safeguarding Personal Toolkit and Materials to ensure the content of the training always promotes this ethos and the cultural shift required to mainstream MSP, looking at the Workforce as a whole and how to support them as they continue to progress, review and enhance their practice.

District and Borough Councils Sub-Committee

Introduction

The Districts Sub-Committee has been established since 2012 and meets around 6 times a year. The focus of the group's work has been to encourage a clear line of communication between District and Borough Councils and the Warwickshire Safeguarding Adults Board (WSAB) and develop and deliver an Action Plan that builds awareness of the Safeguarding Adults' agenda and embeds this at district level.

At 31st March 2015 the group was also represented at the Workforce Development and Governance Sub-Committees.

The strategic objective of the group is "to ensure the safeguarding adult agenda is fully embedded in district and borough councils across Warwickshire." Topics covered in the sub-committee include the revised DoLS arrangements, SCIE best practice guidance for housing staff, evaluation of benefits of merger of adults and children's districts sub-groups and review of data relating to district/borough referrals.

In addition, members of the sub-committee have been working to deliver the Action Plan for the 2014/15 period. Of the 55 individual actions, 35 have been completed, 12 remain incomplete and 8 were unknown.

Incomplete actions that remain relevant have been carried forward to the new District Council Sub Committee: Action Plan 2015/16 (appendix 8) with the group focused on embedding the importance of adult safeguarding across districts and boroughs and ensuring achievement of the action plan.

Principal Achievements 2014/15

Throughout 2014/15 the group has worked towards achieving its objective with significant achievements including:

- Evaluation of all districts and boroughs safeguarding policies and the agreement to work towards a single approach across Warwickshire, including a single multi-authority policy document;
- Completion of the protocol clarifying liaison and advice arrangements for district and borough councils with Warwickshire County Council. The document provides a named person to raise potential case concerns and issues with, and, where the internal named person requires specialist advice, it details a single point of contact within the County Council Safeguarding Adults team:
- Engagement with the county council Care Act workshops and sign up by all districts and boroughs to the Safe Places initiative.

Principal Aspirations 2015/16

The District Council Sub Committee: Action Plan 2015/16, an evolution of the previous plan maintains the focus on the delivery of the strategic objective of the group. The aim is to complete the work on the cross authority policy, develop the training 'offer' and improve understanding of safeguarding adults at district and borough level.

Summary

The sub-committee aspires to ensure the adult safeguarding agenda is understood and embedded in district and borough councils. All forthcoming work will focus on achieving this and the adoption of the single cross authority policy will be a significant milestone in this aspiration.

WSAB Membership Annual Reports

Warwickshire County Council

In 2014, Warwickshire County Council (WCC) introduced the One Organisational Plan, which brings together the organisational planning for 2014-18 and aligns it to the budget over that period. Two of the core outcomes of the One Organisational Plan support the promotion of safeguarding:

- "Our communities and individuals are safe and protected from harm, and are able to remain independent for longer";
- "The health and well-being of all in Warwickshire is protected".

Underpinned by the core outcome of "resources and services are targeted effectively and efficiently whether delivered by the local authority, commissioned or in partnership".

The most significant achievement during 2014-15 was WCC's lead role to produce the West Midlands Safeguarding Adults Policy and Procedures (WMPP). The existing WMPP were subject to considerable revision to ensure Care Act compliance. The WSAB Governance Group was notified in March 2015 that externally commissioned work had failed to produce a satisfactory WMPP. Subsequent work was led by Edward Williams (Safeguarding Adults Short Term Team Operations manager) resulting in a Care Act compliant draft WMPP adopted by all West Midlands SABs by 1st April.

Other significant achievements include:

- Tackling Violence Against Women and Girls (2015-18): In 2014/15, Warwickshire partners agreed a new strategy to bring together existing work to tackle domestic abuse and sexual violence with a new, broader approach that addresses all forms of violence against women and girls including forced marriage, stalking, female genital mutilation, sexual exploitation, trafficking and crimes in the name of honour. The strategy aims to ensure a more integrated and effective partnership response across four key objectives: prevention, provision, protection and partnership. In 2015/16, the focus will be on prevention: challenging the attitudes and behaviours which foster violence and intervening early where possible to prevent. A key project already underway is the implementation of the IRIS service across Warwickshire (a domestic violence training, support and referral programme for primary care staff);
- Tackling Hate Crime: In 2014/15, WCC commissioned a needs assessment by Warwick University on the prevalence of hate crime in Warwickshire. It found that only half of all hate crimes were reported to the police. A multiagency event was held in March 2015 to refresh the Hate Crime Action Plan for 2015/16:
- Effective delivery of Domestic Homicide Reviews: 7 Domestic Homicide Reviews (DHRs) have been coordinated on behalf of the four Warwickshire Community Safety Partnerships since the legislation came into effect in 2011.

- 2014/15 was a key year in that a shared funding agreement was secured with partners to fund the work and appoint a dedicated DHR Officer; a successful DHR learning event was held; Sue Ingram was appointed to work with the children's and adults safeguarding boards in respect of DHRs; and the first DHR was completed;
- Implementation of ECINS: ECINS is a system which enables information sharing and more effective case management across partner agencies. During 2014-15, the system was successfully piloted and implemented countywide to manage Anti-Social Behaviour (ASB) cases, Priority Families and information sharing for DHRs;
- Trading Standards: Partnership working with three national banking groups to provide "early alert" to financial abuse of vulnerable adults to alert WCC when unusually large cash withdrawals are made. Significant amounts of money have been saved as a result. For example, an elderly female was prevented from paying £32,000 for guttering work (valued by our expert at £2,750). Over 20 Truecall devices to screen nuisance and scam calls for vulnerable Warwickshire residents. For one resident this device is blocking up to 200 nuisance calls per month. The device also provides valuable information on who makes the calls, enabling action to be taken. Repeat victims of scam mail are being are being identified and visited to warn them of the dangers of responding to scams. One 92 year old lady had lost over £24,000 on Australian lotteries; we ensured that her bank card was cancelled and her post was monitored by the local PCSO. The No Roque Trader Zone project is a partnership between Trading Standards, Warwickshire Police and key stakeholders within local communities who share intelligence to protect vulnerable and older residents from becoming victims of roque traders and bogus callers. Feedback from recent zones in Whitnash and Binley Woods shows 89% of respondents feel that their No Rogue Trader Zones is a success.

All Adult Social Care and Support (SCS) safeguarding procedures and practice guidance were reviewed to ensure Care Act compliance. A staff briefing on Making Safeguarding Personal (MSP) was communicated across the People Group. WCC completed the Local Government Association (LGA) MSP impact survey. An LGA consultant was engaged to present on MSP to WSAB members in February 2015. A new SCS case file audit tool was implemented in May 2015 including a detailed safeguarding audit compliant with MSP.

Person-centred safeguarding practice has been at the heart of operational and service development, particularly over the last 5 years. The dedicated adult safeguarding team was established in 2010 has since seen a gradual expansion of role and function. A key operating principle of the team is "to work alongside service users & carers, including those people who direct their own support or who fund their own care, to promote empowerment and wellbeing, enable positive risk taking, and enable people to develop resilience and strategies to keep themselves safe and prevent risk of abuse or neglect." The team directly undertook 79% of all screening assessments of adult safeguarding concerns in 2014-15, and 68% of all adult safeguarding Enquiries in 2014-15. The remaining adult safeguarding work was undertaken by other social work teams with the adult safeguarding team providing case management oversight.

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The MSP sector outcomes measure for safeguarding adults is:

- The number and percentage of people experiencing adult safeguarding enquiries who define the outcomes they want; and
- The number and percentage of people whose expressed outcomes are fully or partly met.

WCC Adult Social Care has piloted very similar outcome measures recording since 2010. Local outcomes pilot results based on 135 adults in 2014-15 are:

- It was possible to gain the desired outcomes of 111 (82%) of these adults at the start or later in the adult safeguarding process;
- Of these 111 adults, it was possible to review whether the adult had been supported to achieve these outcomes in 94 cases 70% of the total;
- Of these 94 adults, 79 (84%) felt they had been supported to fully achieve the outcomes they expressed, and 15 (16%) partly achieved the outcomes they expressed. No-one felt their outcomes had not been achieved;
- Of these 94 adults, 61 (65%) felt safer than before the enquiry, 26 (28%) felt partly safer, and 7 (7%) of people did not feel any safer.

The Community Safety and Substance Misuse Team undertook a Care Act impact assessment to ensure that prevention and the principle of wellbeing underpins its activity and commissioned services. Over the coming months, commissioners will undertake work with services to ensure compliance with the Act as well as other safeguarding policies and procedures.

MSP will be embedded through safeguarding adults training, practice guidance including more communication to staff on MSP. This will build on progress to further embed outcome focussed and person centred adult safeguarding practice within all adult social care social work teams. WCC will mainstream personalised outcomes recording and reporting measures within new adult safeguarding recording frameworks in Mosaic database implementation - in preparation for mandatory reporting in 2015-16. WCC will benchmark performance and seek to develop PIs. WCC will continue to work with the SAB on the MSP agenda, and engage with partners to see how MSP approaches can be embedded in practice. This includes participation in developing a Multi-Agency Safeguarding Hub in a two stage approach with children being the initial focus.

The draft WMPP will be developed into a final version by autumn 2015 to coincide with the release of version 2 of the Care Act statutory guidance.

Warwickshire Fire and Rescue Service (WFRS) are committed in supporting the safeguarding of both vulnerable adults and children and are in the process of or have delivered the following points within the Service during this year:

 WFRS have created a robust policy, supported WCC and WSCB, endorsed by senior officers, (CFO, DCFO, ACO) that details the Service's intention, policy and procedures in being committed in protecting the adults and young people in Warwickshire;

- WFRS have designated both a lead and deputy Safeguarding officers, both who will have received WSAB 'Newly Appointed Safeguarding Lead' training by the end of the year 2015, one course in June, one course in September;
- WFRS have started on a programme of educating all staff, starting with front line fire fighters, undergoing training from an external trainer with an approved WSCB course, we currently have 5 sessions left out of the 22 sessions that were programmed in;
- A further date of 10th September will start Phase 2, which is to educate all support staff within the service;
- WFRS have identified 3 key staff who will have the authority to arrange the DBS checks on current staff that under take further duties in engaging with both young people and adult's, BIKE team, ASBIT, SFU.

The emerging Care Act requirements are currently being looked at with a view to how best WFRS can support and best deliver services and help the most vulnerable in our communities, by the services we provide to the new partnerships that we can develop. Once the areas are identified, an action plan will be devised to assist in the delivery of these throughout the Service.

Over the next year WFRS will work with HR to ensure that both child protection and adult safeguarding responsibilities are identified and recorded in all job descriptions and are also spoken about and referred to in the induction of all new staff members into the service.

Further work will be carried out with WFRS Training Department to ensure safeguarding is one of the many key attributes of a fire fighter by creating a CBT (Computer Based Training) to further support the policy and procedure over the next year, to refresh fire fighters on their responsibilities.

Warwickshire NHS Clinical Commissioning Groups (CCGs) (South Warwickshire NHS CCG, North Warwickshire NHS CCG, Coventry and Rugby NHS CCG)

During 2014/15 the three CCGs received funding from NHSE to support awareness raising/training on the Mental Capacity Act (MCA) and Deprivation of Liberty Safeguard (DoLS) requirements. A work plan was subsequently devised by the CCGs to take this agenda forward across Health providers. During 2014/15 training was delivered to GP practices across Warwickshire and guidance to support the MCA has been developed to aid practitioners within Health more generally. An audit tool has been developed to measure compliance with MCA/DoLS within the acute providers and a working group has been established to share best practice. Themed reviews are carried out by the CCGs to gain assurance that MCA/DoLS is being appropriately implemented.

The PREVENT agenda was also taken forward and each CCG has an identified PREVENT Lead who attends regional and local forums. All CCG staff have received PREVENT awareness training and this has been added to the statutory and mandatory training programme.

In preparation for implementing the Care Act the CCGs have identified a Designated Adult Safeguarding Manager (DASM) to ensure agencies work more closely together and share information. The CCGs ensure providers meet their responsibilities through commissioning arrangements. Compliance with the Care Act is now within the NHS Standard Contract and included in the Key Performance Indicators (KPIs).

Given the changes to the WSAB as a result of the Care Act, representation at the Board and at sub-committees has been reviewed, and CCG input is provided to the Governance Group, as well as a number of sub-committees: - Safeguarding Adult Review (Tracy Redgate is Vice Chair); Workforce Development; Performance, Monitoring and Evaluation; Policy and Procedures.

NHS England has revised their Serious Incident framework. This places a greater responsibility on commissioners to assure themselves that all incidents are appropriately reviewed and serious incidents are appropriately identified and reported for root cause analysis. The changes in definitions for safeguarding criteria may result in serious incidents being identified for investigation under the new NHS Serious Incident Framework. Work is required with the Local Authority to ensure multi-agency systems and processes appropriately support this.

The CCG Lead Nurse for safeguarding adults has been part of the Making Safeguarding Personal agenda and has attended workshops alongside LA colleagues. As commissioners of care, CCGs are already taking action to support Making Safeguarding Personal. Individuals assessed and cared for by Health are assessed holistically, and clinicians work with the individual and their carers to provide positive interventions. Individuals are involved in decision making and are supported by advocacy services, if appropriate. When decisions regarding care are being made MCA principles are applied and decisions are made in the best interest of the individual. Increasingly, individuals are being given the opportunity to be in control of their care and support via Personal Heath Budgets and assurance about safeguarding is a critical part of the process of determining the appropriateness of a PHB or nature of the care to be provided.

For 2015/16 the focus on this area will be strengthened with an increasing focus on Personal Health Budgets for a wider range of individuals. Themes reviews to providers will also increasingly consider the extent to which Making Safeguarding Personal is embedded in clinical practice.

Coventry and Warwickshire Partnership Trust

Coventry and Warwickshire Partnership NHS Trust was formed in 1996 with the merging of the Mental Health and Learning Disability aspects of Coventry, North Warwickshire and South Warwickshire PCT's. The portfolio of services was further expanded to include physical health community services in Coventry 2011.

Spanning a wide geographical area the Trust is an active participant of the Local Safeguarding Boards for both Children and Adults across Coventry, Warwickshire and Solihull and is engaged with relevant associated sub groups.

Over the last year the Trust has been an active member of the Coventry MASH and Domestic Violence Screening process. Our clinicians, clinical leadership team and the safeguarding team have all taken significant learning from our involvement in this recent national development placing us in an improved position to support the development of the Warwickshire MASH.

In response to the increased concerns locally and nationally the Trust has developed our Safeguarding training offer to include training on Child Sexual Exploitation. A further area of development has been to raise staff awareness of the Serious Case Reviews process and importantly how to take the learning from these reviews and apply them to practice.

The Trust continues to build skills in staff in performing their roles and has significantly improved its Child Protection Supervision process. The Trust has updated its policy and recently recruited additional staff to support an increase access to Child Protection Supervision. This will support both adult and children's practitioners alike as we embed the message associated with 'think family'.

During 2014/15 Coventry and Warwickshire Partnership NHS Trust aimed to maintain the current performance of safeguarding whilst further developing the safeguarding practices and activities within the Trust. The implementation of the new Care Act (2014) and embedding the West Midland Policy and Procedures for Safeguarding into all services remains a key priority.

South Warwickshire NHS Foundation Trust

South Warwickshire NHS Foundation Trust is a high performing integrated Trust. The Trust was originally established in November 1992 and integrated with the community in 2011. It incorporates hospitals in Warwick, Stratford-upon-Avon, Shipston-upon-Stour and Royal Leamington Spa, providing acute services for the geographical area of South Warwickshire, a population of approximately 270,000. Our community services operate out of a number of clinics, and provide services to a population of 550,000 stretching cross the whole of Warwickshire.

The financial year 2014-15 has seen the Trust complete a Gap Analysis by mapping CQC, WMQRS and WSAB standards, this piece of work identified several areas where the Trust needed to develop policies to meet the standards and develop further training for staff in Safeguarding Adults. All Policies that were identified as missing have been created and approved by the Trusts internal procedures. The Trust has seen a significant rise in DoLS applications (67%) in the past 12 months following the Cheshire West case. Changes following the case have given rise to extra education changes.

The Care Act (2014) has seen the Trust develop its safeguarding training to include making safeguarding personal, the aim of including this in the training was to develop staff to ensure that safeguarding arrangements are in place throughout the Trust. Everyone has the right to live their lives free from violence and abuse. The Trust as part of the Policy and Procedures sub group is developing a generic referral form with partner agencies in the hope of standardising the information that the Local Authority receives.

Warwickshire and West Mercia Community Rehabilitation Company

The past year has been one of considerable change for probation with the separation of the service into two from 1st June 2014 so creating the Warwickshire and West Mercia Community Rehabilitation Company (CRC), and the local Midlands division of the National Probation Service. Within the CRC the focus continues to be on recognising, responding, and reporting on adults at risk of abuse. Through the supervision of offenders we may encounter individuals who may be considered to be 'adults at risk'. Offender managers within the CRC, both through the assessment processes and through ongoing offender supervision, routinely check for any concerns in relation to the potential vulnerabilities of offenders under their supervision, or in relation to offenders as perpetrators. A revision of Safeguarding Adults policy and procedures has taken place in recognition of the need to establish consistency across the newly formed CRC.

With the introduction of the Care Act the CRC is not identified as being a core member of Safeguarding Adults Board but within Warwickshire the CRC will continue to be represented as a relevant body. The Care Act has also clarified the arrangements for social care assessments for those held in custody which is of particular relevance to the CRC as it has responsibility for the new Through the Gate services at HMP Hewell and HMP Featherstone. It is anticipated that the majority of offenders being released from custody back to Warwickshire will be released from these two institutions. The establishment of these arrangements should provide a good basis for the exchange of information and good practice in relation to the safeguarding of adults.

There have been limited developments to date with regard to Making Safeguarding Personal within the CRC but it is anticipated that increased understanding of this approach will be incorporated within the organisation in the coming year.

Warwickshire Police

Warwickshire Police is committed to reviewing and developing working practices across the organisation to ensure the principles and objectives of the Care Act are met. This has resulted in the publication of the Adult Safeguarding Action Plan led by a Detective Chief Inspector from the specialist Protective Services Department. The plan clearly details the activity to improve adult safeguarding across both Warwickshire and West Mercia Police areas. Work has already commenced on progressing the Action Plan for example by ensuring a more consistent approach to the management of adult safeguarding with the introduction of a universal referral form and electronic risk assessments. This has resulted in improving the consistency and identification of risk levels.

Warwickshire Police have conducted a review of training provided to future and current staff in relation to adult safeguarding. This has resulted in the implementation of the 13 Strands of Public Protection which is being incorporated into all 'new to post' courses from June 2015 onwards. The training has been devised by the College of Policing and incorporates a number of aspects of adult safeguarding. The training is included in Initial Police Training, Detective Training and Serious Crime Management. For current staff a 'Vulnerability and Professional Curiosity' training

package is being devised in conjunction with the University of Worcester. The training package will be launched in September 2015 and will be informed by the Care Act 2014. This investment in staff will ensure increased awareness and appropriate intervention in safeguarding matters by Warwickshire Police.

There are already a number of systems in place within Warwickshire Police which support 'Making Safeguarding Personal'. The Victim's Code is adhered to for all those who report crime, as such a vulnerable person reporting crime is entitled to updates as to the progress of the investigation, has explained to them the opportunity to provide a victim personal statement that describes the impact of the crime on them, and can report complaints or compliments to the police online, by phone or in person at the police station. Victims, relatives and carers also have access to information on-line which allows them to determine how they may wish to proceed with a safeguarding issue. The recently re-launched Warwickshire Police website provides information about agencies who can support victims of crime. There is also information covering 'On line' crime advice for adults, adult safety, domestic violence and abuse, and rape and sexual crimes. Information on protecting adults includes the Mental Health Crisis Care Concordat and Dementia Friends. This information empowers people to make informed decisions about how they wish to address a safeguarding issue either via the Police or other support agencies.

Age UK Warwickshire

Safeguarding Adults - The Care Act Making Safeguarding Personal

The focus of Age UK Warwickshire's approach to Safeguarding Adults has always had the individual at the very centre of the process. This person-centred approach focuses on the premise that involvement and an improvement in their circumstances can be the ultimate aim, rather than just investigation and conclusion. We have established procedures which ensure that counselling and/or emotional support is offered and we continue to work with individuals, long after the formal process.

It is now essential that as in the guidelines "Making Safeguarding Personal" (Local Government Associations January 2015) we follow the prescribed outcomes in order to more effectively evidence the results of interventions/outcomes:

- Numbers of individuals and percentage referred to service who define the outcomes they want achieved; and
- The number and percentage of individuals where the outcomes are fully or partly met.

Training

Within Age UK Warwickshire's Safeguarding Adults mandatory training programme, (annually updated for front line staff), staff and volunteers are trained to recognise abused, neglected or exploited individuals whether actual or potential, and to fully understand their responsibility to report concerns immediately as defined in Age UK Warwickshire Safeguarding Adults policy and procedures.

Staff and volunteers are made aware of the importance of their own roles in securing positive outcomes for the individual, and of the consequences that may arise should they fail to act.

Competence in Age UK Warwickshire's training programme with evaluation and feedback ensures that all staff and volunteers understand exactly what safeguarding is, their individual roles in the safeguarding procedures, recognise when an adult is potentially in need of safeguarding and to understand the process of making an alert. Dignity and respect for the individual at what is an extremely difficult time is essential as well as a calm, knowledgeable and understanding approach.

Our Chief Executive takes ultimate responsibility of ensuring that Age UK Warwickshire is, at every level fully committed to safeguarding adults and that Age UK Warwickshire has in place appropriate systems and resources to support this work as part of an inter-agency agreement as laid down by Warwickshire County Council Safeguarding Adults policies.

University Hospitals Coventry and Warwickshire NHS Trust

The hospitals most significant step towards better safeguarding adults in hospital this year has been the initiation of the plan to introduce the Enhanced Care Team. This is a team of enhanced care workers who will work within the Safeguarding team to care for vulnerable patients with enhanced care needs. These will be the patients from groups who can experience difficulties and distress in hospital, patients with dementia, learning difficulties, communication problems and/or complex conditions.

These patients required enhanced care with an emphasis on knowing the person as an individual, learning about their preference and supporting them in their choices, while offering support and reassurance for as long as they require it. The enhanced care workers will also get to know the patients families/supporters to forge partnerships and better communication and better discharge planning.

The Care Act 2015 has had an impact on the organisation with the different requirements such as the identification of Designated Adult Safeguarding Managers (DASM's) and the need to ensure all documentation is Care Act compliant and scrutiny around this continues.

However, other requirements such as making the process a person-centred approach compliments the way health care as well as social care should be moving. Particularly around the treatment and care while in hospital being based on risk assessment not risk avoidance, which emphasises an individual's preferences, circumstances, and lifestyles and a move towards supporting people with risky choices. Also recognising the wellbeing of carers as well as patients and taking their needs into account.

Making Safeguarding Personal (MSP) within the hospital fits well with the ethos of person-centred care which is emphasised in every recent government document around treatment and care. It is an easy concept to talk about but not so easy to do. In the hospital setting it is about really getting to know the person from the outset by

talking and particularly listening to the person and their supporters. Taking time to carefully exchange information with the person to find the best outcome for them and if they are not able to make their own decision to be informed by their life story to understand what they would choose if they could. To support the person with risky options if preferred, but offer flexible safety nets.

This work will continue with the introduction of the previously mentioned Enhanced Care Team, who should be in post from October of this year. The team will be able to support the most vulnerable of patients and support them and their families through the difficult hospital journey. Each patient will have a blue pillow case, a getting to know me form, a personalised activity plan and an enhanced care worker who knows them and cares for them.

8. Membership

8.1 Schedule 2 of the Care Act 2014 defines which agencies must be members of the Board. In addition, the Board may include such other persons as the Council considers appropriate having consulted its partners from the Police and the clinical commissioning groups.

8.2 The members of WSAB are:

- The Independent Chair;
- Warwickshire County Council;
- Warwickshire Police;
- The National Probation Service;
- The Warwickshire and West Mercia Community Rehabilitation Company;
- Warwickshire Fire and Rescue Service;
- Warwickshire District and Borough Councils;
- Warwickshire North, South Warwickshire and Coventry and Rugby Clinical Commissioning Groups (3) (Commissioning);
- The Care Quality Commission;
- NHS England (Commissioning);
- Coventry and Warwickshire NHS Partnership Trust (Provider);
- South Warwickshire NHS Foundation Trust (Provider);
- University Hospitals Coventry and Warwickshire NHS Trust (Provider);
- George Eliot Hospital NHS Trust (Provider);
- Age UK Warwickshire;
- West Midlands Ambulance Service:
- Healthwatch.

The Council will have 7 representatives – currently:

- Director of Adult Social Services;
- Head of Social Care and Support;
- Head of Safeguarding;
- Head of Strategic Commissioning'
- Head of Service for Localities and Community Safety;
- Director of Public Health;
- The Lead Cabinet Member for Social Care.

Each other member will have one representative.

Unless present as a member representative, the Chairs of the WSAB Sub-Committees will be members of the SAB.

The WSAB will be chaired by an Independent Chair and a designated Vice-Chair will be confirmed by the local authority Chief Executive on the recommendation of the Chair.

The WSAB Business Manager will attend all meetings to provide professional advice to the Board.

The Lead Nurse, Safeguarding Adults Warwickshire will receive agenda and papers and attend as required to provide professional advice to the Board.

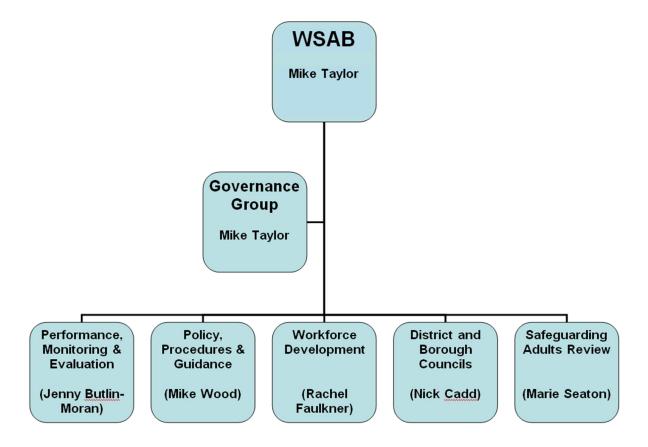
The Legal Advisor to the Board will consider Agenda papers and attend as required to provide professional advice to the Board.

- 8.3 Each Board member must appoint a person to represent it on the Board. This should be a named person in a senior strategic lead position within the organisation to ensure consistency and continuity.
- 8.4 Representatives will need to be people with a strategic role in relation to safeguarding and promoting the welfare of adults within their organisation. They should be able to:
 - Speak for their organisation with authority;
 - · Commit their organisation on policy and practice matters;
 - · Hold their organisation to account.
- 8.5 In the event that their representative is unable to attend meetings, Board members are required to nominate a suitable alternative representative who has the authority to commit their organisation to decisions.
- 8.6 At the discretion of the Chair of the Board, observers can attend Board meetings. Observers are interested individuals who have been invited to attend Board meetings. At the discretion of the Chair of the Board observers can address the meeting, but they are not members of the Board and cannot vote.

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WSAB Governance/Structure

Warwickshire Safeguarding Adults Board Structure (April 2015)



WSAB Business Plan 2015-16

No	Priority	Action Owner	Timescales	Success Measure
1	Updated Adult Safeguarding Policies and Procedures are in place to enable staff in all agencies to work to an appropriate and consistent policy context	Policies, Procedures and Guidance Sub- Committee	April 2015	Policies and Procedures are approved and adopted by WSAB
2	Produce a Workforce Development Strategy and associated multi- agency training programmes	Workforce Development Sub-Committee	April – July 2015	Workforce Development Strategy and training and development programmes approved by WSAB and implemented
3	Produce a Communications Strategy	Governance Group	April – July 2015	Communications Strategy approved by WSAB
4	Review and update the WSAB website	Governance Group	2015	WSAB website is delivered and operational during 2015
5	Review the audit and performance programme	Performance, Monitoring and Evaluation Sub- Committee	April – July 2015	Refined audit and performance programme adopted by WSAB
6	Improve community involvement in reviewing the WSAB Strategic Plan for 2016 and beyond	Governance Group	2015-16	Evidenced engagement with the community informing future WSAB strategic plans

7	WSAB to oversee the implementation of the principles embedded in 'Making Safeguarding' Personal	Governance Group	2015-16	Partners submit action plans and progress reports to WSAB that reflect how agencies are embedding the principles of Making Safeguarding Personal within their organisation
8	Develop a WSAB Prevention Strategy	Governance Group	2015	People at risk are identified at an early stage and offered appropriate advice and support before a crisis develops
9	Further develop reporting systems to increase WSAB understanding of the statistical data collected	Performance, Monitoring and Evaluation Sub- Committee	2015	More refined and targeted statistical data reported at WSAB
10	Review national published Safeguarding Adult reviews (SAR's) and emerging case law and implications for practice, and advise WSAB	Safeguarding Adults Review Sub-Committee	2015-16	Lessons learned from SAR's shared at WSAB and used to inform developing practice and workforce development training programmes

Safeguarding Adults Return (SAR) First Submission Summary

Safeguarding Adults Return 2014/15 For the collection period 1st April 2014 to 31st March 2015

SG1: Demographics - Count of individuals at risk for referrals opened during the reporting period

These tables count the number of individuals split out by each of the below categories

SG1a - By age

SG1b - By gender

SG1c - By ethnicity

SG1d - By primary support reason

SG1e - By reported health conditions

<u>Notes</u>

Individuals should only be included once in each of the tables SG1a, SG1b, SG1c, SG1d Individuals can be included more than once in table SG1e Only two categories in table SG1e are mandatory for 14-15. These are highlighted in yellow.

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	18-64	65-74	75-84	85-94	95+	Age Unknown	
Table SG1a		Number of individuals by age					
Classification	18-64	65-74	75-84	85-94	95+	Age Unknown	
Already known to CASSR	128	48	75	112	13	0	
Previously unknown to CASSR	115	26	36	36	3	7	

Table SG1b

Number of Individuals by gender

Classification

Male
Female
Gender
Unknown

Already known to CASSR
150
226
0

Previously unknown to CASSR
80
143
0

Table SG1c		Number of individuals by ethnicity						
Classification	White Mixed / Multiple		Asian / Asian British	Black / African / Caribbean / Black British	Other Ethnic Group	No Data		
Already known to CASSR	338	1	8	3	1	25		
Previously unknown to CASSR	157	0	6	2	1	57		

Table SG1d	Number of individuals by primary support reason						
Classification	Physical Support	Sensory Support	Support with Memory & Cognition	Learning Disability Support	Mental Health Support	Social Support	No Support Reason
Already known to CASSR	151	5	72	72	24	26	26
Previously unknown to CASSR	17	0	6	1	53	11	135

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		Already known	Not known			
Table SG1e	Number of individuals by reported health conditions					
Classification	Sub-Class	Already known to CASSR	Previously unknown to CASSR			
Long Term Health condition - Physical	Chronic Obstructive Pulmonary Disease	9	0			
Long Term Health condition - Physical	Cancer	5	1			
Long Term Health condition - Physical	Acquired Physical Injury	10	1			
Long Term Health condition - Physical	HIV / AIDS	0	0			
Long Term Health condition - Physical	Other	113	19			
Long Term Health condition - Neurological	Stroke	13	2			
Long Term Health condition - Neurological	Parkinson's	9	0			
Long Term Health condition - Neurological	Motor Neurone Disease	0	0			
Long Term Health condition - Neurological	Acquired Brain Injury	2	1			
Long Term Health condition - Neurological	Other	18	4			
Sensory Impairment	Visually impaired	8	1			
Sensory Impairment	Hearing impaired	5	3			
Sensory Impairment	Other	0	1			
Learning, Developmental or Intellectual Disability	Learning Disability	45	4			
Learning, Developmental or Intellectual Disability	Autism (excluding Asperger's Syndrome / High Functioning Autism)	12	1			
Learning, Developmental or Intellectual Disability	Asperger's Syndrome/ High Functioning Autism	4	1			
Learning, Developmental or Intellectual Disability	Other	3	1			
Mental Health Condition	Dementia	54	11			
Mental Health Condition	Other	18	8			
No Relevant Long-Term Health Conditions	None	0	0			

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SG3: Case details - Count of referrals that concluded during the reporting period

These tables count the number of concluded referrals that involved each of the below categories

SG3a - By type of risk

SG3b - By location of risk

SG3c - By action and result

SG3d - By conclusion

Notes

More than one entry per concluded referral can be entered into these tables

	Social Known Stranger			
Table SG3a		Source of ris	sk	
Type of risk	Social Other - Oth Care Known to Unknown Support Individual Indivi			
Physical	52	135	7	
Sexual	5	29	6	
Psychological and Emotional	34	128	4	
Financial and Material	44	154	19	
Neglect and Omission	68	36	1	
Discriminatory	3	2	1	
Institutional	8	7	1	

Table SG3b	Source of risk					
Location of risk	Social Care Support	Other - Known to Individual	Other - Unknown to Individual			
Care Home	105	46	3			
Hospital	1	15	7			
Own Home	66	263	17			
Community Service	6	14	1			
Other	12	56	7			

Table SG3c	Source of risk					
Action and Result	Social Care Support	Other - Unknown to Individual				
No Action Taken	69	133	10			
Action taken and risk remains	1	30	2			
Action taken and risk reduced	60	149	20			
Action taken and risk removed	55	68	1			

Table SG3d	Source of risk						
Conclusion	Social Care Support	Other - Known to Individual	Other - Unknown to Individual				
Fully Substantiated	50	111	11				
Partially Substantiated	26	60	2				
Inconclusive	25	55	8				
Not Substantiated	80	118	11				
Investigation Ceased	4	36	1				

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SG6: Mental capacity - Count of referrals that concluded during the reporting period

This table counts the number of concluded referrals split out by age of the individual at risk and by their mental capacity

Notes

If your council opens separate referrals for each individual at risk, there should be one entry per concluded referral in this table. If your council has referrals which relate to more than one individual at risk, there should be multiple entries per concluded referral in this table.

Table SG6		Number of concluded referrals						
Was the individual lacking capacity?	18-64	65-74	75-84	85-94	95+	Age Unknown		
Yes	31	15	33	48	7	0		
No	134	47	52	55	9	1		
Don't know	68	14	23	27	7	1		
Not recorded	9	5	4	1	0	0		
Of the concluded referrals recorded as yes in row 1, in how many of these cases was support provided?	29	13	31	43	7	0		

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SG7: Serious case reviews

These tables show details of serious case reviews (SCRs) and indicate whether any individuals died as a result of the abuse that had been investigated

SG7a - Count of serious case reviews

SG7b - Count of individuals at risk involved in serious case reviews

Table SG7a	Number of SCRs
Type	
Where one or more individual died	0
Other	0

Table SG7b	Number of individuals involved in serious case reviews by age						
Туре	18-64	65-74	75-84	85-94	95+	Age Unknown	
Who died	0	0	0	0	0	0	
Other	0	0	0	0	0	0	

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Appendix 5
WSAB Performance Monitoring and Evaluation Workplan –July 2015

Objectives	Measurable Objectives	Action Plan	Person Responsible	Completion Date
Key Task 1: Develop a dataset for WSAB which provides a measure of the activity and effectiveness of the safeguarding arrangements	Development of an agreed dataset	 Dataset to be formulated and to be presented to Board for approval Dataset to be reported to each meeting of WSAB Dataset to be included in Annual Report 	Chair and members of Sub-Committee	New draft outline of Safeguarding Adults dataset to be presented to WSAB in July 2015
Key Task 2: Undertake multi-agency audit activity on areas identified by WSAB	Outcomes from audits undertaken	 To formulate a schedule of audits to be presented at Sub-Committee meetings To share the key issues with WSAB as appropriate 	Chair and members of Sub- Committee	Schedule to be devised in July 2015 Updates to be provided in update at WSAB meetings
Key task 3 Produce a risk assessment framework for SAB		 Risk assessment framework identified Risk assessment framework agreed by WSAB Risk assessment framework applied and updated 	Chair and members of Sub-Committee	To be presented to WSAB in July 2015

Appendix 6
WSAB Policy, Procedures and Guidance Sub-Committee

ID	Priority	Milestones	Date	Lead	Status	Success Measure
1.0	WSAB Strategic Plan Priority: Updated Adult Safeguarding Policies and Procedures are in place to enable staff in all agencies to work to an appropriate and consistent policy context	Policies and Procedures are approved and adopted by WSAB	April 2015	Sub- Committee	Completed	Policies and Procedures are approved and adopted by WSAB
1.1	Review implications of refreshed Care Act Guidance	Changes in guidance and their implications for the WMPP are identified	November 2015	Sub- Committee		Work to update the WMPP can start
1.2	Final Version West Midlands Adult Safeguarding Policies and Procedures (WMPP) are in place to enable staff in all agencies to work to an appropriate and consistent policy context	Final Version WMPP are approved and adopted by WSAB	January 2016	Sub- Committee		Final Version WMPP are approved and adopted by WSAB
1.3	Embed WMPP in: Policies, procedures and practice guidance	Checklist Agreed	September 2015	Mike J Wood		WSAB agrees that partners have evidence that the

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ID	Priority	Milestones	Date	Lead	Status	Success Measure
	Training Communications Practice	Checklist completed by partners	December 2015	Mike J Wood		WMPP is embedded in their organisations
		Evidence received from Workforce Development Sub Committee regarding embedding WMPP in training	December 2015	Rachel Faulkner (Training Sub- Committee)		Safeguarding Adults training takes full account of WMPP
1.4	Assurance that WMPP are used and achieving positive outcomes	Evidence that WMPP are used and achieving positive outcomes in practice received from Performance, Monitoring and Evaluation Sub-Committee	December 2015	Jenny Butlin- Moran		Evidence approved by WSAB
2.0	Alerter's Guide	Final version completed	30 July 2015	Edward Williams		Alerter's Guide is approved and adopted by WSAB
3.0	WSAB Escalation process	Updated version agreed	November 2015	Stephen James		Escalation process is approved and adopted by WSAB

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ID	Priority	Milestones	Date	Lead	Status	Success Measure
4.0	Referral pathway and process from hospitals	Draft pathway and process completed	September 2015	Edward Williams		Pathway and process is approved and adopted by WSAB
		Final pathway and process agreed	December 2015	Edward Williams		

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Appendix 7

Warwickshire Safeguarding Adults Board Workforce Development Sub Committee Action Plan 2015-16

Development of an Interagency Learning & Development Strategy	 Write Strategy Circulate to Partners Gain ratification from WSAB Monitor Agency Sign up and Activity in line with Strategy Report to Board as required 	 Draft strategy completed Final review by subgroups with feedback received by 1st week in September, final draft to Governance Group on 24th September Published version to go out in w/b 5th October with a view to getting the agency commitment signed off The Strategy would then be revised on a frequency aligned to the Board's Strategy a 3 year profile with an 'update' on an annual basis 	RF/LG	October 2015		Amber
Interagency Learning & Development Plan	 Scope Learning needs across partner agencies to develop a L&D plan for delivery for 2015-16 	 Google form sent out to partner agencies, limited response received 	LG	Middle of March	Mar 2015	Green

		L&D plan developed at Sub Group Meeting			
	Commission required Learning & Development Interventions and manage and monitor allocated budget	 Levels 1-3 commissioned Some delay on commissioning eLearning - Awaiting PAN WM procedures Currently scoping existing eLearning offerings New programme on Self Neglect to be scoped 	LG	December 2015	Amber
	Agree Charging Policy for events to non-contributory partners	Agree charges for non-contributory agencies	RF/LG	October 2015	
Engage with Third Sector Agencies to offer learning and development opportunities	Analyse 3rd sector agencies whom do not routinely access Safeguarding Learning & Development due to the potential levels of risk in this area	 08.10.14 List drafted of third sector agencies Further work required to expand list of agencies and contacts - MN and RF to meet Flyer to be drafted and sent to agencies 	RF/MN	February 2016	Amber

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Evaluation and Quality Assurance of Learning & Development Plan	 Ensure Learning & Development Interventions are Quality Assured Ensure Learning & Development Interventions are well evaluated - Conduct Level Three Evaluation Maximise attendance at multi agency events 	 Quality Assurance - attend multi-agency training to observe - inbuilt into WCC QA procedure, continuous improvement and development in line with changes to policy and strategy Level One Evaluations reviewed and acted upon where necessary on an ongoing basis Level Three Evaluation to be conducted 	LG	February 2016	Amber
Making Safeguarding Personal	 Review learning and development to ensure that MSP is intrinsic and supports the cultural change needed to embed MSP Review the workforce requirements of MSP and how the subgroup can support required organisational and change 	Work to be scoped at next meeting, October 2015	RF/LG	March 2016	

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Thematic Approach (to monitor emerging themes)	Sub Group Members to timetable regular thematic and service updates to bring to the group any key areas of activity/research findings/actions within their Agency in order for the Group to agree whether there is any interagency Learning and Development Implications	• Ongoing	All	April 2016	Amber
Attendance of Adults WFD Sub Group	 Attendance at the sub group to be maximised and monitored to ensure all Partner Agencies are represented 	 Monitoring form devised Annual Submission to Steve James for feedback to WSAB 	TJ	October 2015	Amber
Reporting to WSAB	 Activity Data - Completions of Single and Multi-Agency Training and Evaluation Information to be reported to WSAB quarterly 	Work to be scoped at next meeting, October 2015	LG	October 2015	

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Appendix 8

District Council Sub-Committee: Action Plan 2015/16

Objective	Measurable Outcomes	Action Required	Responsibility	Target Completion Date
Key Task 1: Launch of Multi Agency Protocol For Joint Risk Assessing and Sharing Information About Vulnerable Tenants and Applicants	 Protocol launch date Delivery of training to all relevant teams Number of cases referred under the Protocol 	 Joint training delivered by housing and adult teams supported by WACB Protocol implemented operationally Training on Mental Capacity Act for frontline teams 	District Subgroup Chair of Safeguarding Adults Board and DC & BC Board District Subgroup and Adult Services District Subgroup and Adult Services (do we need to specify a tier of management?)	Completion of training – End of December 2015 Protocol go-live date - End of March 2016 Compete training by end December 2015
Key Task 2: Ensure each	Statements Care Act compliantPractices are flexible and	Review all District Safeguarding Adults Policies to ensure compliance with Care Act	District Subgroup	Completion of review by June 2015
Ensure each DC/BC has a	·	compliance with Care ActConsider value of single DC/BC		2015

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Objective	Measurable Outcomes	Action Required	Responsibility	Target Completion Date
policy statement relating to adult safeguarding	response to new legislation Consistent approach across County	Safeguarding Policy Statement Rewrite Policy Statements as appropriate		Evaluate by June 2015 Rewrite and approve by August 2015
Key Task 4: Maintain fit for purpose training plans within each DC/BC	Training Plans in place in each district council	Introduce recruitment checklists to identify which posts will require training when new staff appointed using competencies framework	District Subgroup leads	Complete by end April 2015
Key Task 5: Update and maintain robust safeguarding information on each DC/BC website	 Agreed minimum standard of information to be held Annual reassessment of standard Annual audit of website information 	 Complete audit of existing website information Ensure website contains information on policy statement (see Key Task 2) 	District Subgroup	Annual to be completed by end of April 2016 All to be adopted/published - end December 2016
Key Task 7: Create	Hold meetings in each DC & BC with Registered Providers introducing them	 Achieve greater understanding of local strategic and operational approach to partner Registered 	District Subgroup	June 2015

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Objective	Measurable Outcomes	Action Required	Responsibility	Target Completion Date
effective links with local Registered Providers	to local arrangements	Providers		
Key Task 8: Reduce inappropriate referrals to Safeguarding Adults Team	Increase the proportion of referrals where an safeguarding full assessment is carried out	Evaluate success of previously developed consistent pathway/process across Warwickshire DC and BCs	District Subgroup Edward Williams	October 2015
Key Task 9: Inform senior officers and members of Safeguarding Adults	Greater recognition of the importance of Safeguarding Adults amongst senior officers and members	Circulate WSAB Annual Report to senior DC and BC officers and members	District Subgroup	December 2014
Key Task 10: Develop front line staff	More trained staff at DC and BC level	 Roll out Safer Places initiate to principle DC and BC customer access areas Provide appropriate 	District Subgroup Hardip Johal WCC	March 2015 March 2015
understanding of importance of		training/refresher training to all relevant DC and BC staff Provide appropriate		March 2016 December 2015

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Objective	Measurable Outcomes	Action Required	Responsibility	Target Completion Date
Safeguarding Adults		training/refresher training to all relevant Housing Association staff • Ensure that Safeguarding Adults is a component of all DC and BC induction plans		
Key Task 11: Provide refuge to those experiencing abuse	Safe Places established in each DC/BC customer fronting areas	Roll out Safer Places initiate to principle Dc and BC customer access areas	District Subgroup Hardip Johal WCC	March 2016
Key Task 12: Contribute to the development and activity contained within the Prevention Strategy	Improved levels of prevention in respect of Adult Safeguarding	 Contribute to the development of the Countywide Prevention Strategy Where appropriate align actions of DC Sub-group with relevant Prevention Strategy workstreams 	District Subgroup WSAB Prevention workstream participants	December 2016 March 2016

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Safeguarding Policy for Adults with Care and Support Needs (Vulnerable Adults)

















Con	Contents		
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Appendices

Appendix 1 - Incident report form

Appendix 2 - Liaison and advice arrangements

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Appendix 4 - Adults with care and support needs Short Term Support Service

1. Reason for policy update

The Care Act has introduced a number of changes to the way adults are protected from abuse and neglect and this document has been produced to provide guidance on how front line workers should best deal with adult abuse and neglect when they encounter it.

As a member of the Warwickshire Safeguarding Adults Board this Council is committed to safeguarding the wellbeing of adults with care and support needs.

District and Borough councils are well placed to identify people at risk of abuse. Good partnership working between Districts and Boroughs, the Police and the County Council Adult Social Care Team is critical.

Serious Case Reviews and Domestic Homicide Reviews have often noted the importance of communication and partnership working. This revised Safeguarding Policy and the guidance and training to frontline teams are intended to ensure that maximum focus is given to the protection of adults with care and support needs.

Warwickshire Safeguarding Adults Board has worked with other authorities to develop the Multi-agency policy and procedures for the protection adults with care and support needs in the West Midlands. Copies of these documents are held in the Council's Offices and are available to all staff by a link on the Council's website (also below). The Council understands the importance of a multi-agency approach where issues of abuse are identified.

2. Who are adults with care and support needs?

Adults with care and support needs are a group of people, generally 18 years of age or older who for a range of reasons are not as able to protect themselves from harm as the general population. Their care and support needs may relate to a diagnosed physical health problem or disability or to something harder to define such as frailty through old age or mental ill health.

Previously for the purposes of safeguarding this group will have often been referred to as 'vulnerable', However for the remainder of this document, the phrase 'adults with care and support needs' is used as this reflects Care Act definitions and wider Police and Social Care terminology.

More information on these definitions is provided in section 8 on page 6.

3. Policy Statement

This Council has adopted the following as its Policy on safeguarding adults with care and support needs:

"The Council believes that safeguarding is everybody's business, with employees, Members, contractors, partners and the public playing a part in preventing, identifying and reporting neglect and abuse. Measures need to be in place locally to protect those least able to protect themselves, whilst empowering them and respecting their wishes and needs."

IMPORTANT CONTACT DETAILS FOR REPORTING ABUSE AND NEGLECT

Abuse or neglect concerns relating to adults with care & support needs who may be unable to protect themselves should be reported to Warwickshire County Council by telephone on the Adult Social Care single point of referral contact number: **01926 412080**

If the abuse or neglect is very serious, or a criminal offence has occurred or may occur, contact the Police immediately-

Warwickshire Police

To report abuse or raise a concern about a crime, dial non-emergency - 01926 415000

If a crime is in progress or life is at risk, dial emergency – **999** (If you call 999 please still make the referral to Adult Social Care single point of referral contact number - as above.)

When communicating with the Police it is advisable to use terms that will be recognised, for example financial abuse may well be theft and physical or sexual abuse may be a form assault.

Outside Office Hours

Referrals outside office hours will be directed to the Warwickshire County Council Emergency Duty Service.

They can be contacted outside office hours: 01926 886922

The Emergency Duty Service will-

- Respond to Safeguarding Adults referrals out of hours and make a decision whether the referral requires an immediate response or whether they will transfer to the appropriate Adult Social Care the next working day,
- Respond to the immediate support and protection needs of adults referred out of hours,
- Report suspected criminal offences to the Police without delay.

For further information on protecting adults with care and support needs visit:

http://www.warwickshire.gov.uk/adultprotectionpolicy

4. Purpose

Council staff work with many vulnerable people who could be using a range of services including, town halls or area offices, contact centres, applying for social housing, living in council provided accommodation, receiving or applying for benefits or assistance with their financial arrangements or attending leisure facilities.

This document seeks to ensure that all staff can recognise the signs of potential abuse and are confident in taking appropriate steps to stop such abuse.

Everyone should understand what to do, and where to go locally to get help and advice. It is vital that professionals, other staff and members of the public are vigilant on behalf of those unable to protect themselves.

This will include:

- knowing about different types of abuse and neglect and their signs;
- supporting adults to keep safe;
- knowing who to tell about suspected abuse or neglect; and
- supporting adults to think and weigh up the risks and benefits of different options when exercising choice and control.

This policy does not incorporate child protection. There is a separate policy on child protection and organisations we work with, or contract services to, will also have safeguarding policies in place where appropriate. This statement sets out recommendations for the protection and prevention of potential abuse for those over 18 years old.

5. Adult safeguarding - what it is and why it matters

Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances.

The aims of adult safeguarding are to:

- stop abuse or neglect wherever possible;
- prevent harm and reduce the risk of abuse or neglect to adults with care and support needs;
- safeguard adults in a way that supports them in making choices and having control about how they want to live;
- promote an approach that concentrates on improving life for the adults concerned;
- raise public awareness so that communities as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect;
- provide information and support in accessible ways to help people understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or well-being of an adult; and
- address what has caused the abuse or neglect.

6. Who is this guide for?

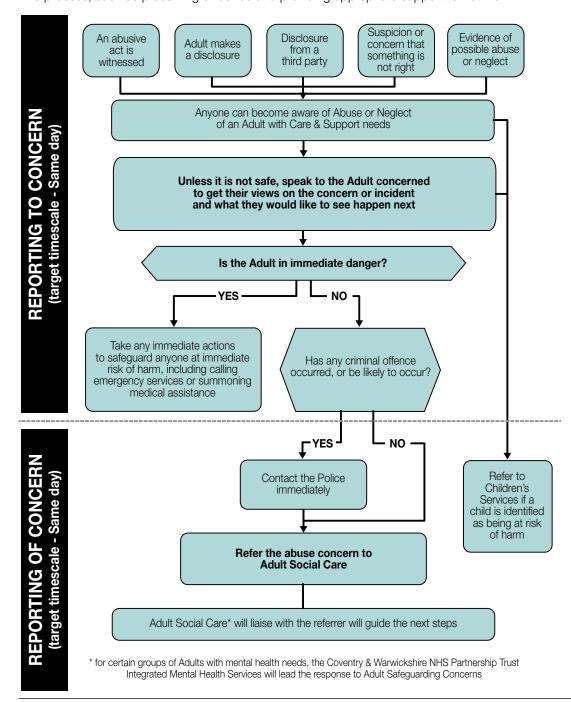
This guide for all employees, councillors, volunteers, partner agencies, agency workers, contractors and providers of services for the Council. All employees should familiarise themselves with the contents of this statement.

Below a simple flow chart showing how to deal with an adult with care and support needs, who is experiencing, or at risk of, abuse and neglect and who, because of their care and support needs, is unable to protect themselves from abuse or neglect.

Flowchart - Referral Pathways for the Safeguarding Alert

This flowchart gives an overview summary of referral pathways.

Please note it does not include other responsibilities which need to be considered through this process, such as preserving evidence and providing appropriate support to victims.



7. Adults with care and support needs and the Council

Councils are recognised as community leaders, this and the fact that we are a major provider of services including a housing means that we have a significant role to play in the protection of adults with care and support needs. Services provided by the Council are delivered to some of the most challenged adults with care and support needs and this brings employees into contact with them.

Below are just some of the services that the Council may come into contact with adults with care and support needs:

- Housing and Support Services
- Leisure Services
- Customer Services
- Planning/Building Control Inspections
- Homelessness
- Lifeline Services
- Car Parking
- CCTV
- Environmental Health issues
- Community Events/Activities
- Museum/Civic Hall Activities

8. Definitions - Care and support

This statement covers how to recognise and what to do when you think an:

- adult has needs for care and support (see below for details) whether or not the local authority is meeting any of those needs and;
- is experiencing, or at risk of, abuse or neglect; and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

Note - the need for care and support does not automatically mean an individual cannot protect themselves, this needs to be considered on a case by case basis.

An adult with care and support needs could be a:

- · person with a learning disability or physical disability
- person who is experiencing mental ill health
- person with sensory needs (blind, partially sighted or hearing impaired)
- person who is older or frail
- person with brain injury or other cognitive needs

- person who is experiencing short or long term illness
- person with dementia

People in this group may be receiving social care or support if they need practical help or support due to any of the above, including visits to help them bath, feed themselves, manage their affairs or cope with other day to day activity.

Inclusion in one of the above groups does not necessarily mean that a person is unable to protect themselves, however it would strongly suggest that they may.

Where someone is 18 or over but is still receiving children's services and a safeguarding issue is raised, the matter should be dealt with through adult safeguarding arrangements.

9. Definitions - Abuse and neglect

Defining abuse or neglect is complex and rests on many factors. The term "abuse" can be subject to wide interpretation. It may be physical, verbal or psychological, it may be an act of neglect, or occur where a vulnerable person is persuaded to enter into a financial or sexual transaction to which they have not, or cannot consent.

Abuse or neglect may be the result of deliberate intent, negligence or ignorance. Whilst it is acknowledged that abuse or neglect can take different forms, the Care Act guidance identifies the below. Exploitation, or the treating of someone unfairly to benefit, is a common theme in the following list of the types of abuse and neglect:

- Physical abuse including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.
- Domestic violence including psychological, physical, sexual, financial, emotional abuse; so called 'honour' based violence.
- Sexual abuse including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.
- Psychological abuse including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.
- Financial or material abuse including theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.
- Modern slavery encompasses slavery, human trafficking, forced labour and domestic servitude.
 Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.
- Discriminatory abuse including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion.

- Organisational abuse including neglect and poor care practice within an institution or 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 on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.
- Neglect and acts of omission including ignoring medical, emotional or physical care needs, failure to
 provide access to appropriate health, care and support or educational services, the withholding of the
 necessities of life, such as medication, adequate nutrition and heating
- 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.

Incidents of abuse may be one-off or multiple, and affect one person or more.

Patterns of abuse vary and include:

- Serial abusing in which the perpetrator seeks out and 'grooms' individuals. Sexual abuse sometimes falls into this pattern as do some forms of financial abuse;
- Long-term abuse in the context of an ongoing family relationship such as domestic violence between spouses or generations or persistent psychological abuse; or
- Opportunistic abuse such as theft occurring because money or jewellery has been left lying around.

The guidance on Safeguarding Adults provides additional context in terms of the domestic and financial abuse and these are detailed in the next two sections.

10. Domestic abuse

In 2013, the Home Office announced changes to the definition of domestic abuse, which is now defined as:

- Incident/s of controlling, coercive or threatening behaviour, violence or abuse... by someone who is or has been an intimate partner or family member regardless of gender or sexuality
- Including: psychological, physical, sexual, financial, emotional abuse; so called 'honour' based violence; Female Genital Mutilation; forced marriage.
- Age range extended down to 16.

Many people think that domestic abuse is about intimate partners, but it is clear that other family members are included within the definition and that much safeguarding work preventing the type of abuse set out in section 8 that occurs at home is, in fact concerned with domestic abuse. This confirms that domestic abuse approaches and legislation can be considered safeguarding responses in appropriate cases.

11. Financial abuse

Financial abuse accounts for approximately 25% - 30% of reported abuse across Warwickshire. Financial recorded abuse can occur in isolation, but as research has shown, where there are other forms of abuse, there is also likely to be financial abuse occurring. Although this is not always the case, everyone should be mindful of this.

Potential indicators of financial abuse include:

- change in living conditions;
- lack of heating, clothing or food;
- inability to pay bills/unexplained shortage of money;
- unexplained withdrawals from an account;
- unexplained loss/misplacement of financial documents;
- the recent addition of authorised signers on a bank card or similar; or
- sudden or unexpected changes in a will or other financial documents.

This is not an exhaustive list, nor do these examples prove that there is actual abuse occurring. However, they do indicate that a closer look and possible investigation may be needed.

12. Indicators of abusive behaviour

Abuse may be indicated through many physical, emotional, psychological or behavioural changes, some possible indicators of abuse are noted below:

Physical Abuse includes: hitting, pushing, unapproved restraint, physical intimidation. Indicators of physical abuse include:

- Injuries inconsistent with the account of how they happened
- · Lack of explanation of how the injuries occurred
- Injuries inconsistent with the lifestyle of the victim
- Clusters of injuries
- History of unexplained falls/ minor injuries
- Subdued personality especially in presence of potential abuser
- Over or under use of medication excessive repeat prescriptions
- Malnutrition/ self neglect

Emotional Abuse includes intimidation by shouting/ screaming, humiliation, denial of choices or opinions... Indicators of emotional abuse include:

- Air of silence around alleged perpetrator
- General lack of consideration for the needs of others
- Not being able / allowed to express their opinion
- Being locked in / out of accommodation
- Alteration of psychological state e.g. withdrawn or fearful/ anxious
- Insomnia
- Low self esteem
- Change in appearance including weight loss / gain
- Tearful, agitated, paranoid
- Resigned, confused, ambivalent about own needs and wants
- Refusal to integrate / join in

Sexual abuse includes: indecent exposure, inappropriate comments and suggestions, touching, penetration... Indicators of sexual abuse include:

- Person appears withdrawn;
- Overt sexual behaviour/ language;
- Disturbed sleep;
- Unexplained difficulties in sitting/ walking;
- Self harm;
- Unexplained behaviour changes;
- Reluctance to be alone with certain individuals;
- Urinary infections;
- Injuries (bruising/ bleeding) on upper thighs/ around genital area;
- Fear of physical assistance with self care/ other personal activities.

Neglect includes not looking after someone's basic needs, denying food or warmth, failure to protect them from harm Indicators of neglect include:

- Poor self care and personal hygiene;
- Withholding of food, clothing or other essentials;
- Failing to meet religious or cultural needs.

The presence or absence of indicators does not mean that abuse definitely does or does not exist. They are indicators only, and care must be taken not to rely upon them entirely. Each case must be treated individually. However, staff may find that reference to these indicators helps them recognise, prevent, and respond appropriately to potential abuse.

13. Who abuses and neglects adults?

Anyone can carry out abuse or neglect, including:

- spouses/partners;
- other family members;
- neighbours;
- friends;
- acquaintances;
- local residents;
- people who deliberately exploit adults they perceive as vulnerable to abuse;
- paid staff or professionals; and
- volunteers and strangers.

While a lot of attention is paid, for example, to targeted fraud or internet scams perpetrated by complete strangers, it is far more likely that the person responsible for abuse is known to the adult and is in a position of trust and power.

Abuse can happen anywhere: for example, in someone's own home, in a public place, in hospital, in a care home or in a college or workplace. It can take place when an adult lives alone or with others.

In some circumstances perpetrators can also be victims and vice-a-versa and whilst these situations are often very complex it is important that they are still dealt with through the safeguarding process.

14. Suspected abuse

Anyone can witness or become aware of information suggesting that abuse and neglect is occurring. The matter may, for example, be raised by a worried neighbour, a welfare benefits officer, a housing management or support worker, sheltered scheme worker or any other employee, contractor or Member who is involved with the public.

A potential victim may say or do things that hint that all is not well. It may come in the form of a complaint, a call for a police response, an expression of concern, or come to light during a needs assessment.

IMPORTANT

Sometimes staff may suspect abuse is going on, even if no one has told them directly. It is important that staff should never keep such suspicions to themselves. When reporting suspected abuse, staff will explain what makes them think someone is being abused, and detail the evidence they have.

If a third party tells them that they suspect someone is being abused, they should listen sensitively and reassure them that they will do something and explain that they will need to report the suspicions to a senior officer.

IMPORTANT

It is important to keep a written record and report suspicions to an appropriate senior officer.

15. Being notified of vulnerable adult abuse

Abuse of adults with care and support needs can take place at any time and anywhere. The awareness of abuse can come to light in various ways, for example:

- An active disclosure of abuse by the vulnerable adult
- A passive disclosure of abuse by the vulnerable adult

Note - The difference between these needs noting.

IMPORTANT

It is very important that responsible action is taken. The situation is likely to persist, rather than simply "go away".

How to respond to disclosures

- Accept what the person is saying do not question the person or ask them to justify what they are saying
 – reassure the person that you take what they have said seriously.
- Don't interview the person; just listen calmly to what they are saying. If the person wants to give you lots of information, let them.
- You can ask questions to establish the basic facts, but try to avoid asking the same questions more than
 once or asking the person to repeat what they have said this can make them feel like they are not being
 believed.
- Avoid giving guarantees about confidentiality as whatever you are told is going to need to be shared with your line manager and others.
- Report the disclosure using the incident form (within appendix 1) as soon as possible do not delay or think someone else will report it.
- If applicable, try to preserve physical evidence by leaving it alone and isolating the area. E.g. not moving paperwork or medicines relevant to abuse to adult.

17. Procedure for reporting suspected abuse

An allegation may be:

- Against a member of the Council's staff
- A person who does not work for the Council

It is of greatest importance that any member of staff who receives allegations or reports of abuse, or has suspicions, that they do not keep these to themselves.

Any member of staff who believes or suspects that a vulnerable adult has been abused or neglected in any way must immediately report this to the appropriate manager.

It may also be appropriate for staff to use the Council's 'Whistle Blowing' procedure.

If the allegation is against an officer in the Council's employment:

- Once information of the allegation has been clarified the Head of Service will consult with Human Resources.
- Once Human Resources have been notified a safeguarding referral should be made, the boxed section on page 4 details how to do this.

Where an allegation results in the conclusion that there may be a risk posed to adults with care and support needs by a person in a position of trust, like an employee, it will be necessary for the employer to undertake a risk assessment and if necessary, take action to safeguard those at risk.

If the allegation is against a person who does not work for the Council:

• Once information of the allegation has been clarified a referral will be made, the boxed section on page 4 details how to do this.

It is important to establish whether the incident is an allegation about a safeguarding issue, a concern about the quality of care or practice or a complaint.

If a referral is made to the County Council in order to safeguard a vulnerable adult the appropriate' Manager (or in their absence the Head of Service should be informed.

18. Acknowledging the wishes of the vulnerable adult

Acknowledging the wishes of the vulnerable adult is critical to ensuring that the approach that an officer or an organisation takes is the right one. This is called making safeguarding personal (MSP). MSP is about talking through with people the options they have and what they want to do about their situation.

Person-centred safeguarding practice like this should include:

- Involving the adult and lead to adult safeguarding processes being done with people, not to people,
- Treating the adult as the expert in their own lives,
- Understanding and respecting the lived experience of the adult,
- Engaging with the adult in a meaningful way, listening to the adult and making sure their voice is heard,
- Seeking to empower the adult, promote well-being, and supporting their rights and choices.

Before deciding what needs to be done the views of the vulnerable adult need to be explored and understood. This may not affect the ultimate outcome and referrals may be made to other organisations even if the vulnerable adult doesn't wish matters to go any further, particularly if others are at risk (see section 23, page 16 on information sharing).

19. Liaison and advice arrangements Districts and Borough with Warwickshire County Council

It can sometimes be hard to decide whether a situation where abuse is present should be referred to the Adult Social Care Team. Where there is doubt, the presumption should always be that advice is asked for and a decision made and recorded.

The District and Borough Councils have agreed liaison arrangements to raise potential case concerns. Four District & Borough Councils have an internal, named adult safeguarding lead whereas in respect of Rugby Borough Council the manager of the affected service will make the referral. Where an internal named person exists and requires specialist advice, the County Council provides a single point of contact within the Adult Social Care Team.

See appendix 2 for details of the Liaison and advice arrangements

20. What to do if your unable to make a referral to the Adult Social Care Team

Where the Adult Safeguarding alerts/referrals threshold for intervention is contested or in situations where there are concerns about agency adult safeguarding case management the escalation process should be initiated by the referring officer. This process is detailed in the Warwickshire Safeguarding Adults Escalation Process. This document is available in appendix 3.

21. Protection

Sitting alongside the requirement to report is an obligation to protect.

If the abuse is occuring on at the moment and the adult is at risk of immediate harm, Council officers will have to consider whether there is any way you can step in to stop it without risking harm to yourself? If so, do so. If not, get help from a senior member of staff if possible, or if necessary, the police. If the person needs urgent medical attention, get immediate help from a doctor, or call an ambulance.

IMPORTANT

It is very important that victims of abuse and others that could be abused are protected, once notified of the abuse, part of the response will need to put in place protections by either removing those at risk or by bringing to an end the abuse.

22. Corporate Approach to Safeguarding Adults with care and support needs

Safe Places

Safe Places are locations within the community where you can go to get help if you have a learning disability and you feel unsafe or at risk when you are out and about. This council is committed to the Safe Place initiative and has become a registered Safe Place. The training provided to gain the Safe Places status also helps front line staff understand their role in the identification of safeguarding issues.

Safeguarding through employee checks

The Council understands that staff potentially pose a risk to adults they work with. Periodically, an assessment of posts attracting a Disclosure and Barring Service (Standard or Enhanced) check will be undertaken to establish the whether it is appropriate to retain this safeguard. Initially all posts will be evaluated for attachment of DBS check, new posts will be assessed when created and posts where responsibilities are adjusted, at the time of that change.

Commitment to training, awareness raising and promotion

This council is committed to involvement in and contribution to the enhancement of learning and improved partnership working, through training. This council is committed to funding training either through its annual contribution to the Warwickshire Safeguarding Adults Board or other self funded training.

Commitment to Warwickshire Safeguarding Adults Board

This Council is committed to safeguarding both adults and children and will be represented at the Warwickshire Safeguarding Adults Board through the Chair of the WSAB District Council's Sub Group, which this council will also regularly attend.

23. Sharing Information, Confidentiality and Consent

Why do we need to share adult safeguarding information?

Sharing information within and between organisations about known or suspected risks is likely to help prevent abuse. We need to share safeguarding information with the right people at the right time to:

- prevent death or serious harm
- coordinate effective and efficient responses enable early interventions to prevent the escalation of risk
- prevent abuse and harm that may increase the need for care and support
- maintain and improve good practice in safeguarding adults
- reveal patterns of abuse that were previously undetected and that could identify others at risk of abuse
- identify low-level concerns that may reveal people at risk of abuse
- help people to access the right kind of support to reduce risk and promote wellbeing
- help identify people who may pose a risk to others and, where possible, work to reduce offending behaviour
- reduce organisational risk

Confidentiality, how to deal with it

It is very important to try to gain consent to share information and to be aware that employees cannot give personal assurances of confidentiality. Frontline staff or anyone else covered by this statement should always report concerns to their line managers, or in emergencies as described on page 3 and follow the other guidance within this document.

IMPORTANT

- Emergency or life-threatening situations may warrant the sharing of relevant information with the appropriate emergency services without consent.
- The law does not prevent the sharing of sensitive, personal information within organisations. If the information is confidential, but there is a safeguarding concern, sharing it may be justified.
- The law does not prevent the sharing of sensitive, personal information between organisations where the public interest served outweighs the public interest served by protecting confidentiality for example, where a serious crime, death or serious injury may be prevented.

What if a person does not want you to share their information?

As long as it does not increase the risk to the individual, the member of staff should explain to them that it is their duty to share their concern with their manager or organisational lead for safeguarding; you can always share information within your organisation.

If a person refuses to give consent or requests that information about them is not shared with other safeguarding partners, their wishes should be respected. However, there are a number of circumstances where the practitioner can reasonably override such a decision, including:

- the person lacks the mental capacity to make that decision this must be properly explored and recorded in line with the Mental Capacity Act;
- other people are, or may be, at risk, including children;
- sharing the information could prevent a crime;
- the alleged abuser has care and support needs and may also be at risk;
- a serious crime has been committed;
- staff are implicated;
- the person has the mental capacity to make that decision but they may be under duress or being coerced;
- the risk is unreasonably high and meets the criteria for a multi-agency risk assessment conference referral;
- a court order or other legal authority has requested the information.

If none of the above apply and the decision is not to share safeguarding information with other safeguarding partners, or not to intervene to safeguard the person, help can still be provided by:

- supporting the person to weigh up the risks and benefits of different options;
- ensuring they are aware of the level of risk and possible outcomes;
- offering to arrange for them to have an advocate or peer supporter;
- offering support for them to build confidence and self-esteem if necessary;
- agreeing and recording the level of risk the person is taking;
- recording the reasons for not intervening or sharing information;
- regularly reviewing the situation;
- trying to build trust and use gentle persuasion to enable the person to better protect themselves.

IMPORTANT

If it is not clear that information should be shared outside the organisation, a conversation can be had with safeguarding partners in the police or Warwickshire County Council without disclosing the identity of the person in the first instance. They can then advise on whether full disclosure is necessary without the consent of the person concerned. Sharing the issue in this way may enable you to develop a plan to gain the consent to share the information.

If the issue is so important that it is necessary to share information outside the organisation, without the individuals consent:

- explore the reasons for the person's objections what are they worried about?
- explain the concern and why you think it is important to share the information
- tell the person who you would like to share the information with and why
- explain the benefits, to them or others, of sharing information could they access better help and support?
- discuss the consequences of not sharing the information could someone come to harm?
- reassure them that the information will not be shared with anyone who does not need to know
- reassure them that they are not alone and that support is available to them.

If the person cannot be persuaded to give their consent then, unless it is considered dangerous to do so, it should be explained to them that the information will be shared without consent. The reasons should be given and recorded.

Information sharing is a complicated area, resources providing help in understanding when to share information are available through the link below:

http://www.scie.org.uk/care-act-2014/safeguarding-adults/sharing-information/

You will also be able to seek advice from your line manager or a data protection specialist within your council.

24. Mental Capacity

Local authority statutory adult safeguarding duties apply equally to those adults with care and support needs regardless of whether those needs are being met, regardless of whether the adult lacks mental capacity or not, and regardless of setting. The only exceptions are prisons and approved premises where prison governors and the National Offender Management Service (NOMS) respectively have responsibility.

It is often the case that front line staff will feel that "something has to be done" about the way in which a particular household or individual is living or behaving, particularly if this if the behaviour is because of:

- indication of a severe mental health problem(s);
- indication of a severe physical health problem(s);
- intoxication;
- severe weather;
- severe self neglect;
- possible threat from others (but this may also require a police/safeguarding response).

If there is evidence that the person has an "impairment of, or disturbance in the functioning of the mind or brain" (as indicated by a known or suspected mental health problem, learning disability, brain injury, dementia, or intoxication) then this may indicate a lack of capacity. If this is the case a Mental Capacity Act (MCA) assessment can take place.

This is a two stage test, test one impairment/ disturbance assessment of capacity should be carried out.

The second stage (test two) asks if the person can:

- understand the information involved in making the decision;
- retain the information long enough to make the decision;
- use or weigh up the information to make the decision;
- communicate their decision.

If on the 'balance of probabilities' the person is able to do all four of the above then they have capacity to make the decision – even if this is an unwise one.

If on the 'balance of probabilities' the person is unable to do one or more of the four stages above then they lack capacity to make the decision and a 'best interests' decision needs to be made on behalf of the person regarding the decision in question (e.g. does the person need treatment, conveying to hospital, etc.?).

Note - more information about this is in the MCA Code of Practice.

Who should undertake a formal Mental Capacity Act assessment?

The assessor of an individual's capacity to make a decision will usually be the organisation or person who is directly concerned with the carrying out of a relevant function or activity to the individual.

For example for most day-to-day decisions, this will be the person caring for them at the time a decision must be made. For example, a care worker might need to assess if the person can agree to being bathed. Then a district nurse might assess if the person can consent to have a dressing changed.

This means that different people will be involved in assessing someone's capacity to make different decisions at different times.

25. Working together to reduce harm, abuse and protect adults with care and support needs

District and Borough Council's commit to work in partnership with other agencies for those adults with care and support needs who do not breach the threshold to be dealt with under the Adult Safeguarding arrangements.

26. Support service for adults with short term needs

From summer 2015 District and Borough Council teams will be able to access a short term support service for priority adults with care and support needs. This service can be accessed to support those who may not breach the threshold for a safeguarding alert but who are presenting with complex needs and challenging behaviours for whom a more serious safeguarding intervention, may be able to be prevented.

Details of this service and access arrangements are contained within appendix 4.

27. MARAC, MASH and MAPPA

All District and Borough Council's commit to be involved in relevant MASH (Multi Agency Safeguarding Hub), MAPPA (Multi Agency Public Protection Arrangements) and MARAC (Multi Agency Risk Assessment Conference) meetings as resources permit and to work in accordance with the objectives of these to increase public safety and reduce risk.

28. Anti Social Behaviour

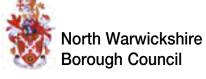
Often those with care and support needs can be victims or perpetrators of anti-social behaviour (ASB). Where adults with care and support needs are victims of or involved in the perpetration of ASB Councils will pay particular attention to factors surrounding the incidents and seek to work with perpetrators to reduce such behaviour and recognise that victims with vulnerabilities may experience greater distress as a result.

Safeguarding Policy for Adults with Care and Support Needs

Appendix 1 Incident report form











Incident Form - Adults with care and support needs



Please complete as much information as possible on this form.

Date Form Received (DD/MM/YYYY) / 2 0
Action Taken (PLEASE TICK) REFERRAL NON REFERRAL
PERSONAL DETAILS
Name of Adult (capitals)
Ethnicity of Adult
Date of Birth (DD/MM/YYYY) / 2 0 Age (YEARS)
Contact Telephone Number (INCLUDING CODE)
Home Address
Home Postcode
Does anyone live with the Adult? YES (NAMES, RELATIONSHIPS ETC BELOW) NO
Has the Adult expressed any wishes as to the outcomes they would like to see? YES (DETAILS BELOW) NO
That the Addit expressed any wishes as to the outcomes they would like to see: The (behalfs below) [1] The [1]
Does anyone provide support to the Adult (PROFESSIONAL/FAMILY) YES (DETAILS BELOW) NO
DETAILS OF INCIDENT (please continue on another sheet if necessary)
Date of Incident (DD/MM/YYYY) Time of Incident (24 HOUR HH:MM) :
Location of incident (FULL DETAILS)
Were there any witnesses? YES (NAME, ADDRESS, CONTACT DETAILS BELOW) NO
Incident details
Has the adult consented to information being shared? YES NO
Are there any children or other adults which are vulnerable due to the incident? YES (DETAILS BELOW) NO

DECLARATION (perso	n completing the form)					
I declare that the information	on provided is correct to the best of my knowledge					
Name of Adult (CAPITALS)						
Job Title						
Signature						
Dated (DD/MM/YYYY)						
	THIS FORM SHOULD BE FORWARDED TO THE ????? AS SOON AS POSSIBLE UNDER PRIVATE AND CONFIDENTIAL COVER					
DETAILS OF ACTIONS	S TAKEN - if none, please state reason for decision					

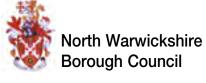
Stratford-on-Avon District Council is under a duty to protect the public funds it administers, and to this end may use the information you have provided on this form for the prevention and detection of fraud. It may also share this information with other bodies responsible for auditing or administering public funds for these purposes. For further information, see http://www.stratford.gov.uk/datamatching

Safeguarding Policy for Adults with Care and Support Needs

Appendix 2 Liaison and advice arrangements











Safeguarding Adults with Care & Support Needs

Liaison & Advice arrangements for District & Borough Councils

Safeguarding adults from abuse is everyone's responsibility. Referral into the Adult Safeguarding process should be made in any case where an adult-

- i) has needs for Care & Support, and;
- ii) is experiencing, or is at risk of, abuse or neglect; and
- iii) due to their Care & Support needs, is unable to protect themselves from abuse or neglect.

Consent to refer should be gained wherever this is possible and will not increase risk to the person. This note should be read alongside the guidance & procedures for responding to adult abuse available at www.warwickshire.gov.uk/safeguardingadults

To aid effective joint working and decision making, the below liaison arrangements have been put in place for across Warwickshire County Council (Social Care & Support services, i.e. Adult Social Services) and the 5 Warwickshire District & Borough Councils.

The purpose of these arrangements is to give District & Borough Council staff an internal named person to raise potential case concerns and issues with, and, where the internal named person requires specialist advice, to provide a single point of contact within the County Council Safeguarding Adults team.

PLEASE NOTE- THESE ARRANGEMENTS ARE NOT DESIGNED TO BE A REFERRAL ROUTE- FORMAL ADULT SAFEGUARDING REFERRALS ARE TO BE MADE ON THE SAFEGUARDING ADULTS REFERRALS NUMBER – **01926 41 20 80**.

District & Borough Council staff should raise concerns and issues internally in the first instance upwards through to their internal named persons-

Warwick DC Andy.Thompson@warwickdc.gov.uk

Jacky.oughton@warwickdc.gov.uk

Stratford-on-Avon DC Nick.Cadd@stratford-dc.gov.uk

Martin.cowan@stratford-dc.gov.uk

Nuneaton and Bedworth BC craig.dicken@nuneatonandbedworth.gov.uk

North Warwickshire BC AngelaCoates@NorthWarks.gov.uk

HelenHughes@NorthWarks.gov.uk

Rugby BC The manager of the affected service will be the point of

contact (this will vary)

Where needed, the District & Borough Council named persons can seek advice from-

Stephen Scanlan - Lead Practitioner- WCC Safeguarding Adults Short Term team.

Via secure email- stephenscanlan@warwickshire.gcsx.gov.uk

Or by phone- 01926 742626.

Stephen will discuss the case with you, and will confirm the advice given through secure email response.

Date- v2. Feb 2016

Authors - Edward Williams, WCC Operations Manager, & Nick Cadd, Stratford DC & County Heads of Housing representative on the Warwickshire Safeguarding Adults Board.

Government Marking Scheme: NOT PROTECTIVELY MARKED

Safeguarding Policy for Adults with Care and Support Needs

Appendix 3 Warwickshire Safeguarding Adults Escalation Process













Warwickshire Safeguarding Adults Board escalation process

Version: Final

Date Issue: 24 August 2015

Reference:

Protective Marking: Internal

Introduction

The process outlined in this document relates to cases where there are concerns/enquiries about an adult with care and support needs who is experiencing, or is at risk of abuse or neglect. This means that he or she is unable to protect themselves against the abuse or neglect or risk of it as a result of those needs.

This escalation process should be used for:

- Adult Safeguarding Concerns/Enquiries where the threshold for intervention is contested:
- Situations where there are concerns about agency adult safeguarding case management.

Matters relating to assessment for more general care and support needs, eligibility for care and support and funding of care and support needs are outside the scope of this process. Individual practitioner performance is also outside the scope of this document.

Guiding principles

A timely and satisfactory resolution to any disputed adult safeguarding concern/enquiry is the preferred approach. This should be at the lowest level of management agreement and moderation. Please see the key principle statements on pages six and seven.

Any immediate risks or needs should be met or mitigated regardless of any on-going dispute between agencies or teams.

People must be fully involved in decisions throughout the safeguarding process.

Context

The threshold for intervention in adult safeguarding is as set out above in the first paragraph. This provides sufficient guidance in the majority of cases for agreement between Social Care and Support in Warwickshire County Council (WCC) and the person referring a concern on the priority and desired outcome of such a concern.

However, Warwickshire Safeguarding Adults Board (WSAB) recognises that there are situations where disputes over thresholds may emerge. This was highlighted in the Gemma Hayter Serious Case Review (for example, the police made attempts to refer under safeguarding procedures but the referral was not accepted).

The WSAB has issued this document in response to this. Its first purpose is to assist professionals in circumstances where a threshold is contested.

Similarly, the WSAB acknowledges that the management of cases involving the safeguarding of adults with care and support needs is of a high standard for the vast majority of the time. However, concerns about case management may arise on occasions.

They may arise in respect of the management of a case by Social Care and Support. In other situations, Social Care and Support (WCC Safeguarding or other adult social care teams) may have concerns about response of a professional colleague to a situation involving the actual or likely significant harm to an adult who needs care and support. For example:

- A poorly framed or constructed safeguarding concern;
- A failure to refer a concern to Social Care and Support in a timely way;
- A failure to share all the relevant information needed by Social Care and Support teams to make an adequate judgement on the appropriate response to the concern:
- A failure to otherwise discharge professional responsibilities in relation safeguarding adults.

The Winterbourne View Serious Case Review highlighted the necessity of multiagency challenge in helping to ensure the robustness of best practice in adult safeguarding. This protocol is designed to support and enhance the principle of challenge.

Who does safeguarding apply to?

People's wellbeing is at the heart of the care and support system under the Care Act 2014. Adult safeguarding applies to **all** adults aged 18 or over who have care and support needs and who are experiencing, or are at risk of, abuse or neglect, and are unable to protect themselves. This may include:

- People with a learning disability or physical disability;
- People with mental health needs;
- People with sensory needs;
- People with cognitive needs, e.g. acquired brain injury;
- People who are experiencing short or long term illness.

However, it is important to note that inclusion in one of the above groups does not necessarily mean that a person is implicitly unable to protect themselves from abuse or neglect.

Adult safeguarding applies whatever setting people live in, and regardless of whether or not they have mental capacity to make specific decisions at specific times.

The Care Act Guidance 2014 describes "care and support" as:

"The mixture of practical, financial and emotional support for adults who need extra help to manage their lives and be independent – including older people, people with a disability or long-term illness, people with mental health problems, and carers.

Version: Final WCC – Internal Page **3** of **7**

Care and support includes assessment of people's needs, provision of services and the allocation of funds to enable a person to purchase their own care and support. It could include care home, home care, personal assistants, day services, or the provision of aids and adaptations."

Abuse

Local authorities should not limit their view of what constitutes abuse or neglect. They can take many forms and the circumstances of the individual case should always be considered. However, the criteria outlined in the introduction will need to be met before the issue can be considered a safeguarding concern. Exploitation, in particular, is a common theme in the following types of abuse and neglect:

- Physical;
- Sexual;
- Psychological;
- Financial or material;
- Neglect and acts of omission;
- Discriminatory;
- Organisational;
- Self-neglect;
- Domestic violence;
- Modern slavery.

Multi-agency decision making about Concerns/Enquiries

The current multi-agency policy and procedures set out the process for decision making on whether a concern meets the threshold for the safeguarding adult procedures, i.e. if the concern progresses to become an enquiry. The decision making process is set out below:

The assessment should include any previously gathered information. It should also address the following:

- Does the person/referred or group of individuals affected meet the definition of an adult with care and support needs?
- Do the concerns reported constitute an issue of abuse and/or neglect?
- Is the person unable to protect themselves from either abuse or neglect; or the risk of abuse or neglect as a result of their care and support needs?
- Has the informed consent of the individual been given to apply the Safeguarding Procedures where this is appropriate? Does any overriding public interest apply if consent is refused, and the person has the mental capacity to make this decision?

If the answer is **yes** to all of these questions, the Safeguarding Procedures **must** be used.

If the answer to any of these questions is **unknown** or **unclear**, the Safeguarding Procedures should be used. Part of the Safeguarding Assessment Enquiry will include methods to establish the answers to the above questions.

If the answer is **no** to any of these questions, it will not be appropriate to use the Safeguarding Procedures. Anyone who is not covered by these Procedures should be given appropriate information and advice or referred for appropriate support with their consent. This could include, for example, information relating to counselling or victim support, referral to domestic or sexual violence support organisations, referral for general assessment and support via the appropriate statutory service.

Part 1: WSAB escalation process for a contested threshold for intervention

Key principle: It is every professional's responsibility to 'problem-solve'. The aim must be to resolve a contested threshold at the earliest possible stage. This must always keep the safety and well-being of the person with care and support needs as the paramount consideration.

Stage 1 - Line Manager of practitioner/clinician generating the concern raises the issue directly with Service Manager - Older People and Physical Disability South. The Service Manger is responsible for adult safeguarding in WCC Social Care and Support and for managing Stage 1of the process. The two managers will seek to resolve the dispute at this stage. The possibility of the practitioner/clinician referring the person for a non-safeguarding adult social care assessment (community care assessment) may be considered, where appropriate, to progress the situation.



Stage 2 - Status of concern remains disputed. Escalation to Head of Social Care and Support in the People Group, WCC and to relevant senior manager in referring practitioner/clinician organisation or WSAB member.



Stage 3 - Final stage. WSAB member discusses with the Strategic Director of the People Group, WCC who will make the final decision.

Part 2: WSAB escalation process where there other agency concerns about case management

Key principle: It is every professional's responsibility to 'problem-solve'. The aim must be to resolve concerns about case management at the earliest possible stage. This must always keep the safety and well-being of the person with care and support needs as the paramount consideration. The following process will apply in situations where a Social Care and Support Team raises concerns about case management in another agency.

Stage 1 - Social Care and Support practitioner raises concerns directly with the professional colleague concerned to seek a resolution.



Stage 2 - Social Care and Support Operations Manager, or if deemed more appropriate Service Manager, raises matter with the designated or named safeguarding adults lead for the agency concerned.



Stage 3 - Operations Manager notify their Service Manager who may discuss with the relevant agency's representative on the WSAB. The Service Manager may contact the agency or service concerned if it is not represented on the WSAB.

Safeguarding Policy for Adults with Care and Support Needs

Appendix 4 Adults with care and support needs Short Term Support Service











Summary of providers

being	ce ervices nd afro- ounger omeless) Complex y	
Ranking of services, No.1 being their strength	Leaming Disability Mental Health Service (including specific services for women, Asian and afro- Caribbean people, homeless) Leaming Disability (Complex Needs) Physical and sensory disability Dementia	Mental Health Leaming Disabilities Older people Autism
Ranking of se their strength	1. Leaming I 2. Mental He (including for womer Caribbear and older 3. Leaming I Needs) 4. Physical a disability 5. Dementia 5. Dementia	1. Mental 2. Learnit 3. Older p 4. Autism
\$ %	b p p	
Areas Covered	Nuneaton, Rugby, Leamington Spa & Studley. Willing to expand and cover the whole of Warwickshire in order to offer a county wide service.	Rugby, Bedworth, Nuneaton and North Warwickshire
Area	Nuneate Leaming Studley. Willing t cover th Warwick offer a c service.	Nun Wan
Cost	6823	0083
Name of provider Named contact for referrals	Anne – Marie Carter Area Manager Warwickshire Anne- marie carter@creativesupport.org.uk 07974 914 043 3 Park Street Lye Dudley DY9 8SS 01384 896737 No fax machine – email referrals please	Referrals emailed to both Bernadette and Lily Bernadette Farrell Head of Care Warwickshire 97 Leicester Road Bedworth CV12 8AH 024 76317125 07974264321. Bernadette Farrell@fch.org.uk Lily.sedden@fch.org.uk Fax number: 02476311671
Name of provider	Creative Support	Friendship, care and housing

Mayday Irust	Hillary Caves Personal Asset Manager T:01788568420 M:07964 833595 E: Hilary.caves@maydaytrust.org.uk Send referrals by email not fax, due to confidentiality.	£588.45	Spa and Rugby	 Drug and alcohol addictic and those with complex needs. Short term and long term homelessness Support people with offending backgrounds a on release from prison 4. Mental Health Supporting people to gail employment, education, volunteering and job placements Engaging people in social activity including utilising 	Drug and alcohol addictions and those with complex needs. Short term and long term homelessness Support people with offending backgrounds and on release from prison Mental Health Supporting people to gain employment, education, volunteering and job placements Engaging people in social activity including utilising
Keyring Short Term Support Service Warwickshire	Referrals to Michelle and Christine Michelle Lloyd Team Manager KeyRing Living Support Networks The Enterprise Hub 34 Green Lane Walsall WS2 8HB michelle.lloyd@keyring.org Christine R Dilworth Supported Living Manager for Warwickshire and Solihull Networks The Hub Enterprise 34 Green Lane	£714	The whole of Warwickshire, covering North and South Warwickshire.	1. Vulnerable Adults (Adurisk) 2. Learning Disabilities 3. Mental Health 4. Autistic Spectrum 5. Older People 6. Physical Disabilities 7. People with a sensory impairment 8. Transition age group (L 21) 9. Parents with or without children	Vulnerable Adults (Adults at risk) Learning Disabilities Mental Health Autistic Spectrum Older People Physical Disabilities People with a sensory impairment Transition age group (Under 21) Parents with or without children

Walsall WS2 8HB christine.dilworth@keyring.org	
Office: 01922 700830 Fax: 01922 700837 Mobile: 07920 454629	

Agenda Item No 11

Resources Board

18 April 2016

Report of the Assistant Director (Housing) **Homelessness Service Update**

1 Summary

1.1 To provide an update on the current homelessness service and current trends. To report progress against the Housing Strategy Action Plan and to propose a way forward for the review of the service.

Recommendation to the Resources Board:

- a That the progress against the 2012-2015 Homelessness Strategy is noted;
- b That the current homelessness situation and trends are noted; and
- c That the proposals set out in Section 6 of the report are agreed.

2 Consultation

2.1 The Chair (Councillor D Wright) and Vice Chair (Councillor Smitten) of the Resources Board and the Opposition Spokesman (Councillor B Henney) have been sent a copy of this report.

3 Background

- 3.1 The Council is required to have a Homelessness Strategy that provides a framework for how it will deal with homelessness within the Borough as set out in the Homelessness Act 2002 (Chapter 7 Section 3). The legislation requires us to keep the Strategy under review and to modify it from time to time following a review. The Council's Homelessness Strategy was last reviewed in 2012 and is due for review again. The overall aim of the Strategy is to reduce both the causes of homelessness in North Warwickshire and provide a quality response to those affected by homelessness, offering a range of solutions were possible. The overall aims were identified as:
 - Continue to prevent homelessness by early intervention;

- Ensure that homeless people have access to quality services to assist them when faced with or when facing homelessness;
- Proactively work with all relevant local organisations to provide a coordinated approach to tackling and preventing homeless;
- Meet the Government expectations, aims and outcomes relating to tackling and preventing homelessness.

3.2 The Strategy identified 3 key priorities:

- Financial Inclusion Good access to specialist services which can work to make debt manageable and provide money management skills.
- Sustaining Tenancies Providing services to enable people to stay in their existing homes by providing a range of services to support them. Also to ensure that people are given support to sustain new tenancies and work towards eradicating the cycle of repeat homelessness and debt.
- Provision of services for Roofless/Single People Developing a shared accommodation scheme for single people and giving them a priority category as part of the Lettings Scheme.
- 3.3 Progress against the Homelessness Strategy Action Plan is provided at Appendix 1. Some of this work is on going.
- 3.4 Although the Strategy has been due for review this year, it has been delayed to give time to understand the current position and the impact of the Government's welfare reforms on affordability affecting applicants housing circumstances and housing options available to them; also to enable us to consider the likely impact of the forthcoming changes arising from the Housing and Planning Bill 2015. In addition the cuts to the Supporting People budget are expected to impact significantly on the services provided to homeless persons by our partner organisations, with the potential for some services to end altogether. We are monitoring and assessing the situation as the changes are agreed and implemented. Our Strategy will need to be flexible to deal with a changing situation.

4 Current Position

4.1 Homelessness Applications

- 4.1.1 The homelessness service is a statutory function that is administered within the Housing Options and Lettings Team. The team was re-structured in July 2013 following a review of the service. The Housing Options and Lettings Team Leader is responsible for homelessness decisions supported by 2 Lettings Officers and 2 Housing Options Officers.
- 4.1.2 There has been a steady increase over the last 12 months in the number of homelessness applications and a significant increase in the number of acceptances and therefore duty to house. There has also been an increase

in the number of non priority homeless decision; this is where the household is homeless but where there is no duty for the Council to re-house them.

	April 12 – March 2013	April 13 – March 2014	April 14 – March 2015	April 15 - Feb 2016 (11 months)
Total Number of homelessness applications received	77	58	119	133
Accepted	36	34	70	75
Intentional	8	2	1	2
Non Priority	26	15	45	52
Not Homeless	7	7	3	4
Not Eligible	0	0	0	0

4.1.3 In 2014-15 the main reason for homelessness was due to the household being asked to leave their current accommodation (42), the Landlord serving a Notice to Quit/Notice Seeking Possession (40) and domestic abuse (19). Compared to the previous year 2013-14 where 25 households were asked to leave their current accommodation, the Landlord serving a Notice to Quit/Notice Seeking Possession (24) and domestic abuse (9). The figures for the current year 2015-16 are given at Appendix 2. They show an increase in all three of the main reasons for homelessness, with 55 being asked to leave, 44 being served with a Notice to Quit/Notice Seeking Possession and 20 due to domestic abuse for the year to date. A summary of the three main reasons for homelessness over the last three years are shown in the table below:

	April 13 – March 2014	April 14 – March 2015	April 15 - Feb 2016 (11 months)
Asked to leave	25	42	55
Notice to Quit/Notice of Seeking Possession	24	40	44
Domestic Abuse	9	19	20

4.1.4 We are finding that more people are being asked to leave their current accommodation most likely because there are fewer opportunities to be rehoused, with more people seeking fewer available properties. Whilst family and friends may be prepared to help by providing a home on a short term basis, they are less willing to provide it longer term putting a strain on relationships within the household. There is also a perception that they will be given greater priority by the Council if they state they have been asked to

leave. The increase in the number of Notice to Quits (NTQ's) being serviced by private landlords is because tenants are struggling financially and finding it difficult to pay the rent and other bills. We are finding that this is partly because of the impact of Local Housing Allowance (LHA) rates and the under occupation charges. Many landlords are deciding to sell their properties because changes in legislation mean it is no longer so lucrative and the business risks are greater than previously. Domestic Abuse is showing an upward trend, there are many reasons for this including the financial climate creating pressures within the household. The Council deals with domestic abuse victims proactively and attend the MARAC multi agency meetings. We promote the service we are able to provide which may account for some of the increase in applicants disclosing the domestic abuse.

4.1.5 Interestingly the figures also indicate an increase in the age of persons presenting as homeless as we are seeing more people in the older age brackets over the age of 40. This reflects a general increase in the elderly population.

4.2 **Temporary Accommodation**

4.2.1 If an applicant is assessed as homeless and in priority need, the Council has a duty to provide temporary accommodation until it is able to discharge its duty by providing permanent accommodation. There has been a sharp increase (53%) in the provision of temporary accommodation in 2015-16 compared with previous years. We have 2 hostels with shared facilities located in Atherstone. In addition, we have 2 self contained flats that are used for temporary accommodation. Due to increased demand for temporary accommodation there have been occasions where we have had to use our own general stock as temporary accommodation, these have tended to be properties that have proven to be more difficult to let meaning that we have been able to let them rather than them being empty resulting in void loss. We have used bed and breakfast accommodation only rarely and as a last resort where there have been no other options available. The increase in using temporary accommodation reflects the increase in homelessness During 2015-16, 45 households have required temporary acceptances. accommodation, this compares to 21 in 2014-15 and 12 in 2013-14. There were 30 hostel placements and 15 bed and breakfast placements. The average days per placement has also increased sharply compared with last year. This is summarised in the table below:

	April 13 – March 2014	April 14 - March 2015	April 15 – Feb 2016 (11 months)
Number of households placed in temporary accommodation	12	21	45
Average days per placement	51	14	47

4.2.2 The requirement to provide more temporary accommodation is impacting on the teams resources. Temporary accommodation has to be identified, the applicant is then "signed up" on a temporary licence or non secure tenancy and the licence then has to be managed. Some of the households have multiple issues that require assistance to resolve for example, they may have former tenancy arrears and other debts. We may refer them to other agencies for assistance and to help them prepare to take on a new tenancy. We would like to do more to prepare and assist them with sustaining a future tenancy.

4.3 Housing Related Support and Partnership Work

- 4.3.1 Decisions made earlier this year by Warwickshire County Council in relation to the Supporting People programme mean that existing contracts will end by 31 July 2016 and there will be new contracts for support in place. However the available budget has reduced by half which means that less people will be supported and there will be uncertainty about the services to be provided. The County Council has stated that the assessment criteria for people receiving support will be higher as part of the new contracts.
- 4.3.2 These changes will impact significantly on the services provided by support agencies in the area. Traditionally, the Council has relied on this partnership work to deliver housing related support to those in need. Examples include low level general needs floating support and accommodation based support to young families provided by Bromford Support and the Doorway Project who provide support for young single homeless people. Of particular concern is the impact of these cuts on the provision of accommodation based housing support at Meadow House, Atherstone. This provides much need accommodation and support services to young families, preparing them to move into more permanent accommodation. Any reduction in these services will ultimately affect those persons directly affected and impact on their support needs.

5 **Meeting Housing Demand**

5.1 **Preventing homelessness**

- 5.1.1 The Council's ability to prevent homelessness is essential in order to deliver its statutory obligations and provide our customers with greater choice and options to alleviate their housing problems and prevent potential homelessness.
- 5.1.2 Customers who first approach the local authority seeking homelessness assistance are interviewed by a housing options officer with the aim of being offered services such as mediation with landlords to prevent an eviction or family members to facilitate a return home, assistance to access supported housing schemes or the rent deposit scheme to help them access accommodation in the private rented sector. Homelessness prevention efforts focus on identifying those at risk of homelessness and intervening as early as possible to provide them with sustainable solutions. In the long term this could prevent the need for households to approach the council's homelessness team at all.

5.1.3 In 2014-15 the Council prevented 33 households from becoming homelessness compared with 38 the previous year. During 2015-16 the cases prevented are summarised below:

Reason	Number
Withdrawn Notice to Quit	2
Accessed Supported Accommodation	8
Prevented an Illegal Eviction	6
Prevented an Eviction	5
Returned Home	14
Staying with Friends	3
Left in Occupation	2
Found alternative accommodation	9
Prevented unsafe discharge from hospital	1
Total cases prevented from becoming homeless	50

- 5.1.4 During 2015-16 we have successfully prevented 50 households from becoming homeless. Preventing homelessness means that households were able to remain in their existing homes. Preventing homelessness is very important not least because it is more cost effective to prevent homelessness compared to having to meet statutory duties involved with dealing with a homeless household. Therefore we will always explore all options with the applicant to prevent homelessness. This may be to assist them with finding alternative accommodation such as a private let, preventing an eviction by mediating with the private landlord or liaising with a parent to enable a young person to return home. Our partner agencies such as Doorway and Citizens Advice Bureaux provide additional support in the delivery of our prevention strategies in relation to support to young homeless people and money and debt advice.
- 5.1.5 We need to continue to develop our prevention work during the forthcoming year and utilise the homelessness prevention grant given by Government to ensure support is provided to where it is needed most.

5.2 Making Best Use of Stock and developing new homes

5.2.1 The Council's Lettings Scheme is designed to ensure that properties are let to those in the greatest housing need. It was reviewed shortly after the introduction of the Localism Act taking advantage of the flexibilities given by the Act; this included a separate Transfer Register for existing tenants. A personal approach is provided and each application is assessed in accordance with the Scheme. All properties are advertised and matched to applicants in accordance with their need. Applicants are only registered if

there is a realistic likelihood of the Council re-housing them. There are always more applicants than properties available and that is why applications are prioritised according to housing need. Priority homeless applications are placed in the highest priority band 1+ or 1 and Non Priority homeless applications are placed in band 2. As the number of homelessness applications increase there is greater pressure on the Council's ability to provide accommodation to non-homeless applicants. We will need to keep the Lettings Scheme under review to ensure it meets the Council's requirements and addresses local housing need. In recent years we have decommissioned several sheltered schemes where they have been difficult to let to the over 60's. This has enabled the Council to let them to applicants under 60 in housing need.

- 5.2.2 The Council has been able to build new properties assisting us in meeting housing need in recent years. In addition it has nomination arrangements in place with Registered Social Landlords so that their vacancies are advertised and offered to applicants on the Council's Housing Register. We are reviewing these arrangements to ensure that we are getting our full nomination rights. Housing need is regularly reviewed by analysing the Housing Register and undertaking local housing needs surveys so that this can feed into our plans for developing new homes either directly or through a third party. Getting this right is important particularly given the current trend of increased right to buy applications and greater discounts being given. During 2015-16, 28 council properties have sold. The right to buy is being extended to Housing Association properties which may impact on the number of properties available for re-letting to applicants on the Council's Housing Register.
- 5.2.3 We are exploring new initiatives to meet current need for example developing ideas for the provision of shared accommodation for young single people given that they are likely to be affected by the implementation of the Local Housing Allowance Housing Benefit Caps.
- 5.2.4 The Tenant Incentive Scheme was introduced in 2013 and has assisted the Council 1) to free up larger family homes to those that need them and 2) enable tenants affected by the under occupancy charges to downsize to a smaller home. The Council offers a payment to assist tenants to downsize to a smaller home; 44 tenants have moved with help via this scheme freeing up much needed family homes.

6 Future Action Plan

- 6.1 As stated in paragraph 3.4 above, the review of the current Homelessness Strategy has been delayed to enable the Council to take into account the impacts of the changes to housing related support funding, impact of the welfare benefit reforms and changes arising from the Housing and Planning Bill 2015. It is suggested that the Homelessness Strategy and Action Plan is finalised when the impact of these changes are known.
- 6.2 As detailed in Section 5, the Council is already doing a lot of work to address housing need in the Borough and would like this to continue. Working in partnership with other agencies will continue to be important however the

Council needs to ensure that it is in a position to deliver its own services to address local needs. Within the new structure of the housing service a new Tenancy Sustainment Officer is proposed. This post is being proposed to assist with supporting applicants, new and existing tenants to sustain their tenancies. This will include developing support plans to assist with a range of support needs including money and debt advice, promoting employment opportunities and negotiating with existing landlords to enable people to remain in their current accommodation.

7 Report Implications

7.1 Finance and Value for Money Implications

- 7.1.1 The Council receives a homelessness prevention grant from the Government which assists us to deliver our homelessness prevention strategies. Funding during 2015-16 was £43,910 and this will reduce to £39,920 for 2016-17. The grant has been used to fund our partnership initiatives for example, Doorway who work with young single homeless people and the Citizens Advice Bureaux Money Advice Project. We are carefully reviewing the funding for these projects for the forth coming year given the impacts of the Housing and Planning Bill, Welfare Reforms and the need to deliver an in-house service that is fit for purpose.
- 7.1.2 The grant will also be used to fund the temporary Tenancy Sustainment Officers post being proposed as part of the restructure of the housing management service. The post is intended to support customers, both applicants and tenants to sustain their tenancies.
- 7.1.3 We are members of the West Midlands Homelessness Prevention Partnership along with 11 other local authorities based in the West Midlands and have benefitted from additional funding through the delivery of joint initiatives such as the single persons bond scheme to assist those customers aged 16 to 25. Also the Ash Project delivered by Doorway Single Persons Project which supports single homeless persons some of whom may have mental health issues.

7.2 Human Resources Implications

7.2.1 The Tenancy Sustainment Officer post is proposed as part of the restructure proposals for the Housing Management Team reported to the Resources Board as a separate report.

7.3 Legal and Human Rights Implications

7.3.1 The Council is required to conform to the housing regulator's Regulatory Framework and Standards. Our statutory obligations are set out in the Housing and Homelessness Acts.

7.4 Environment and Sustainability Implications

- 7.4.1 The Governments focus continues to be on preventing homelessness and repossessions. Achieving this will have a positive affect on communities, increase consumer confidence and house prices.
- 7.4.2 The Tenancy Sustainment Officer role will give added capacity to the Housing Management Team with the key objective of sustaining existing and new tenancies and preparing applicants for taking on a new tenancy. It will provide support to enable applicants and tenants to remain in their existing homes.

7.5 Safer Communities

7.5.1 An important part of the role of the Housing Management Team is to help create nice neighbourhoods where people choose and like to live. Successful prevention strategies will assist with reducing homelessness and safer communities as a consequence.

7.6 Equalities Implications

7.6.1 An enhanced homelessness service will assist with improved accessibility of the service to our customers. It will also assist with achieving more cohesive communities by focusing on enabling people to stay in their homes.

7.7 Links to Council's Priorities

7.7.1 Working with our tenants to maintain and improve our housing stock and providing affordable housing in the right places.

The Contact Officer for this report is Helen Hughes (719494).

Background Papers

Local Government Act 1972 Section 100D, as substituted by the Local Government Act, 2000 Section 97

Background Paper No	Author	Nature of Background Paper	Date

APPENDIX 1

Action No	Task	Outcome	Lead Role & Key Partner	Milestone	Progress
1	Monitor and review existing prevention initiatives: > Move on > CAB Debt Advice Service > Rent Deposit Scheme > Mortgage Rescue Scheme > Mediation Service > Domestic Abuse Service > Young Persons Service	Reduction in homelessness acceptances sustained through homelessness prevention initiatives and housing options. Further reduction achieved through review and where applicable further development of homelessness prevention	NWBC Housing Options Team, SNAP Group Partners	Homelessness Summit Monthly meetings to assess demand and review success of prevention initiatives	There is regular monitoring of all prevention schemes and monthly monitoring of prevention cases. The prevention schemes have given good outcomes to date however they now need to be reviewed in light of the current financial climate. Partnership projects are monitored in line with relevant Service Level Agreements. A single person's bond scheme now in place.
2	Introduce new Preventing Mortgage Repossessions Scheme for households facing repossession due to financial difficulties	Implementation of new scheme Reduction in number of households becoming homeless due to mortgage repossession	NWBC Housing Options Team	Homelessness Summit Monthly meetings to assess outcomes	Scheme has been running since 2012 although there has been little uptake to date.
3	Deliver effective housing advice and options	Homeless/potentially homeless able to access a wide range of advice and options Homelessness prevented through effective housing advice and options	NWBC Housing Options Team	Homelessness Summit Monthly meetings	On going. Monthly statistics included in performance reports. Homeless presentations and acceptances have increased.

		Continued reduction in homeless			
		presentations and acceptances			
		procentations and acceptances			
4	Work with RSLs to ensure that tenants	RSL front line staff are aware of	NWBC	Awareness through team meetings	Ongoing work to promote
	who are in breach of their tenancy	local advice services so that	Housing,	and SNAPS Group	the service.
		appropriate advice can be given	RSL		
	access local advice services/include	and leaflet included with letters	partners	Leaflet to be made available to	
	homelessness advice leaflet with			partner RSLs	
14 01:	letters	. 0 7			
Key Obj	ectives – Raising Awareness of the Hou	ising Options Team and the service	es provided		
5	Advertise and raise awareness of	Raise awareness of	NWBC	Review of information literature	Ongoing work to promote
	prevention services, offering early advice	information and services to	Housing	and web site	the service.
	and assistance to all potentially homeless		Options		
	households	homelessness to seek early	Team		
		advice and support			
6	Develop Home Guide Self Service websit	te Improved access to services	NWBC	Provision of a Self Serve Housing	Not completed – move
	that will enable customers to access		Housing	Options Service to assist	towards a personal
	information about their housing options in		Options	customers who wish to access	service rather than on-
	North Warwickshire		Team,	services on line	line.
			SNAPS		
7	Improve the quality of housing options	Improved information to	Group NWBC	Review of current literature and	The website information
<i>'</i>	information available to customers to	customers	Housing	web site	has been renewed and
	ensure accuracy and transparency	customers	Options	web site	updated.
	chaire accuracy and transparency		Team		apaatea.
8	Ensure that all literature is accessible.	Improved accessibility of	NWBC	Ensure information is available and	Ongoing. Information
-	tailored to meet local needs and widely	information	Housing	publicised through all customer	available through all
	communicated via numerous channels e.		Options	access points	channel including face to
	website, poster	-	Team	·	face, telephone, One Stop
					Shop and the website.
Key Obj	ectives – Improving customer service, i	nvolvement and satisfaction			
9	Monitor the quality of homeless, housing	Improve the quality and	NWBC	Monitoring and quality checks,	Ongoing monitoring
	options and prevention services	consistency of the advice	Housing	customer satisfaction reports	through customer
	•	given to customers	Options		feedback surveys,

10	Actively seek feedback from service users and stakeholders through forums, focus groups and surveys to measure the quality of service provided	Establish a range of methods for capturing the views and ideas of service users	NWBC Housing Options Team	Continue to innovate, monitor and shape the service	internal quality checks and effective case management. Ongoing. Customer surveys are used to seek feedback. Learning from complaints. Tenancy & Allocations Tenant Improvement Group utilised as focus group to obtain views and ideas.
11	Ensure the quality of customer service and that all customers are treated with courtesy and respect	Promote service standards Scrutinise and learn from customer complaints Identify and provide staff training	NWBC Housing Options Team	Reduction in complaints High levels of service satisfaction	On going monitoring, Monthly performance indicators. Reduction in complaints & compliments received.
Key Ob	jectives – Actively supporting and promotin	g a partnership approach to pr	eventing home	elessness	
12	Produce a directory of homelessness services	Investigate all advice, support and accommodation providers and distribute. Also place on web site and Home Guide Service	NWBC Housing Options Team	To be circulated to partner agencies and stakeholders	Not completed. After consideration it was decided not proceed with producing a homeless directory due to the significant changes in support providers available and the County Council's cuts to housing related support.
13	Ensure that all partner organisations and frontline serviced providers have up-to-date accurate information on housing options	Partners are adequately trained to identify problems, access information and signpost customers to appropriate provision.	NWBC Housing Options Team	Regular updates to be provided through SNAPS Group, website, email	Partners are updated on any changes to the Lettings Scheme and housing options provided.

14	Provide training/information sessions to frontline officers	Partners are adequately trained	NWBC Housing Options Team	Deliver training/awareness sessions as appropriate to team meetings and SNAPS meetings	Updates and briefing sessions are provided as necessary.
15	Sharing of information, knowledge and joint working at SNAPS Group about homelessness and housing options	Partners are adequately trained.	NWBC Housing Options Team	Regular information sharing at SNAPS meetings	The SNAPS group no longer take place however, one to one meetings are held with individual partner organisations when information and ideas are exchanged.
Key Ob	jectives – Developing a coordinated approa	ch to offering advice on housin	g benefit, debt a	nd welfare benefit	
16	Review existing debt advice services to ensure they meet requirements	Provision of a debt advice service that provides free confidential advice to a variety of client groups	NWBC Housing Options Team, CAB	Review of partnership agreements	Regular meetings take place to review the service agreement for the Money Advice Project. CAB provides monthly monitoring reports.
17	Ensure existing Council tenants are provided with advice and assistance to help them maintain their tenancy	Help sustain tenancies and provide assistance where tenancy has broken down	NWBC Housing Options Team with Tenancy Services Team	Reduce tenancy turnover and prevent homelessness due to eviction	On going Regular liaison with Post-tenancy Team, in general & about specific cases. Various support services in place which are regularly reviewed. Introductory tenancies now introduced.

18	Undertake financial health checks for applicants awaiting an offer of tenancy and arrange appropriate advice, signposting where necessary	Better understanding of financial position prior to tenancy sign up so that appropriate advice can be provided where necessary	NWBC Housing Options Team, CAB	Reduce tenancy turnover and sustain tenancies	Ongoing. How we do this is under review. Financial assessments are completed by the team however; more capacity is needed to do more work with applicants before a tenancy is granted.
19	Maintain good links between Tenancy Services Team and the Homelessness Officer so that tenants facing eviction can access appropriate advice and assistance	Maintain good links between housing teams so that tenants can be assisted	NWBC Homelessness Officer, Tenancy Services Team	Prevent homelessness due to eviction	On going. Active liaison in place.
20	Monitor presentation and acceptance from households in mortgage arrears and ensure a range of housing options are in place to assist those affected by economic downturn	Provide housing options for households facing mortgage repossession	NWBC Housing Options Team	Prevent homelessness due to eviction	On going. Presentations are low in numbers.
21	Contact households facing mortgage repossession to offer advice and assistance in order to prevent homelessness	Appropriate advice and assistance to households facing eviction due to mortgage repossession	NWBC Housing Options Team	Prevent homelessness due to eviction	On going. Repossession Advice Letters are sent when we receive notification from the lender.
Key O	bjectives – Ensuring that those ready to Mov	e on from supported accommo	dation can do so	in a timely way	
22	Monitor existing CBL and move-on protocols in the Borough ensuring that these are assisting people ready to move on from supported accommodation into independent living	Effective move on protocol to prevent 'bed blocking'	NWBC Housing Options Team, Supported Housing Providers	Prevent homelessness by providing interim supported accommodation	Move-on arrangements are working well.
Key O	bjectives – Ensuring young people have acco	ess to services and help preven	t young people b	pecoming homeless	
23	Review Partnership Agreement with Doorway to maximise support and access to services for young people	Good access to support for young people including homelessness and housing advice	NWBC Housing Options Team, Doorway	Prevent youth homelessness	Completed Oct 2012. Quarterly review meetings take place to review the service.

24	Undertake a project to understand the reasons for youth homelessness in the Borough	Understand reasons for youth homelessness and produce recommendations	Doorway, NWBC Housing Options Team	Prevent youth homelessness and develop housing solutions for young people	There has been a review of how we work in partnership with regard to young people but changes in staff at the County Council means that there is currently a further review underway.
25	Provide pre-tenancy work shops for young people to help them sustain their tenancy	Help young people sustain their tenancy	Doorway, NWBC Housing Options Team	Prevent homelessness due to tenancy failure. Reduce tenancy turnover	On going service provided by Doorway.
26	Work with local schools to raise awareness of homelessness and housing options	Improved education of young people about homelessness and housing options and how to access services	Doorway, NWBC Housing Options Team	Prevent homelessness due to early intervention	On going work undertaken by Doorway.
Key Obj	ectives – Identifying and addressing gaps i	n services provided to 16 and 1	7 year olds		
27	Monitor protocol with Children's Team to ensure it is working effectively	Effective joint working between Children's team and Housing	NWBC Housing Options Team, Children's Team	Prevent homelessness due to effective intervention and joint working arrangements	On going work with North Warwickshire Children's team. Young Persons Protocol in place.
28	Ensure continued joint working with Children's Team and partner agencies to ensure 16 and 17 year olds have access to appropriate homelessness and housing options advice	Effective joint working that enable 16 and 17 years to access services	NWBC Housing Options Team, Children's Team	Prevent homelessness due to effective intervention and join working arrangements	Meetings held with North Warwickshire Children's team to discuss joint working in line with the agreed Young Persons Protocol. New MASH (Multi Agency Support Hub) established to operate from Warwickshire from April 2016 (to provide a county wide service). This will change how we work locally with the Children's Team.

Key O	bjectives – Ensuring better use of mediation	to enable people to stay at hom	ie		
29	Review current facility for offering mediation and whether it is being used in all cases where relevant	Effective mediation services available where appropriate	NWBC Housing Options Team	Prevent homelessness due to effective mediation services	On going. Mediation is offered where appropriate. This could be mediating with a family member or a private landlord to enable the applicant to stay in their home.
30	Promote mediation services available	Improved awareness of mediation services provided	NWBC Housing Options Team	Prevent homelessness due to effective mediation services	On going. Used where appropriate.
Key O	bjectives - Providing choice and encouragin	g independence			
31	Provide and promote the range of affordable housing options: > Social rented sector > Supported Housing > Private rented sector > Home Ownership > Mortgage Rescue	Package of affordable housing options	NWBC Housing Options Team, RSLs, Private Landlords	Review the range of housing options and homelessness prevention information available. Ensure housing advice and related information is publicised through all customer access points	On going. Some joint work has taken place with the West Midlands and Warwickshire Homelessness Prevention Partnership.
32	Introduce and review progress and outcomes from Key Ring Scheme which provides housing and support to persons with learning disabilities in the Borough	Provision of housing related support to people with learning difficulties	NWBC Housing Options Team, Key Ring, Social Services	Enable people with learning difficulties to sustain their tenancies	Scheme in place and fully operational.
Key O	bjectives - Meeting housing needs through t	he supply of permanent, tempo	rary and support	ed accommodation	
33	Increase in numbers of affordable housing in the Borough by delivering the development proposals as identified in the Local Investment Plan	Increased access to settled accommodation for homeless households and those on the housing register	NWBC Housing Development, RSL partners, Private	Increased provision	On going affordable housing provision in line with LIP. Nomination Agreements with RSL partners being reviewed

			landlords		to ensure we achieve correct nomination percentages.
34	Ensure better use of existing stock in the Borough through: > Tackling under occupation > Enabling people to live independently through aids and adaptations and Sanctuary Schemes > Review the use of more difficult to let properties	Increased access to settled accommodation for homeless households and those on the housing register	NWBC Housing	Explore movement incentive Offer options to tenants currently under occupying Work with RSL partners to tackle under occupation in their stock Provide a range of options to assist people who want to remain in their home	On going Including work with Housing Assessment Team/Occupational Therapist. Tenant Incentive Scheme has assisted tenants to downsize and free up larger homes. Some sheltered schemes have been de- commissioned to enable them to be let to persons under the age of 60.
35	Improve the access to the private rented sector for homeless and potentially homeless households though: > Development of a Private Sector Leasing Scheme > Increased partnership working with private landlords to develop new initiatives > Increased use of the Rent Deposit Scheme	Increased use of the private sector to provide housing to households on the housing register particularly where we currently have gaps in provision i.e. single people	NWBC Housing, Private Landlords, Support Provider	Monitor access to the Private Rented Sector	PSL Scheme up & running successfully. No current vacancies. A web site for private landlords to advertise their properties has been set up and funded by the West Midlands Homelessness Prevention Group.
36	Facilitate a regular Landlord's Forum	Good relations with the private	NWBC	Increased use of private rented	Difficulties with

		rented sector	Housing Options Team, Private Landlords	sector by households needing accommodation/Reduced illegal evictions	maintaining the forum meetings. These are to be re-established with the Private Sector Housing Team taking the lead.
37	Review existing arrangements for temporary accommodation to ensure this meets our requirements	Provision of good quality temporary accommodation for those that need it when they need it	NWBC Housing Options Team	Assess the level of need, number and types of units required. Ensure adequate provision to reduce need to use bed and breakfast	There has been on going review of the Council's temporary accommodation provision to ensure it is fit for purpose and adequate to meet the need. Provision has been increased with an extra hostel providing an additional 2 ground floor bed spaces. The Council's general stock has been utilised as temporary housing as a last resort where it has been difficult to let.
38	Improve the provision of interim accommodation for client groups where there are existing gaps e.g. Night Stop/Crash Pad facility	Provision of emergency accommodation	NWBC Housing Options Team	Assess the gaps and provide emergency provision. Possibly link to PSL Scheme.	A temporary unit for young people managed by Doorway is in place at Nuneaton. We are looking for something similar in North Warwickshire.

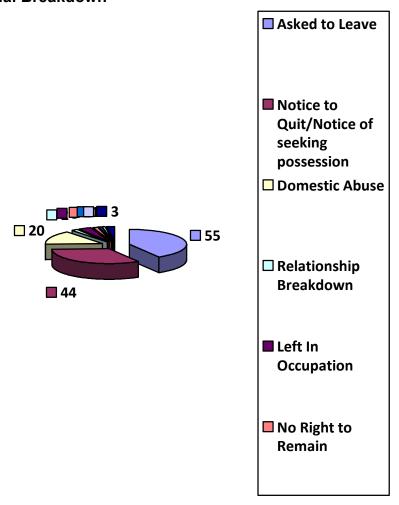
APPENDIX 2

Homeless Applications made under the Housing Act 1996 (as amended by the Homelessness Act 2002)

Summary of Section 184 decisions for 2015/16

Reasons for Homelessness

Issue	Number of applicants
Asked to leave	55
Notice to Quit/Notice of Seeking	44
Possession	
Domestic Abuse	20
Relationship Breakdown	2
Left In Occupation	5
No right to Remain	2
Welfare Issues	1
Illegal Eviction	1
Repossession/Eviction	3



Temporary Accommodation for 2015/16

During 2015/16, we have had 45 households that required temporary accommodation, which has resulted on overall placements for a period of 2123 days which averages out at about 47 days per placement.

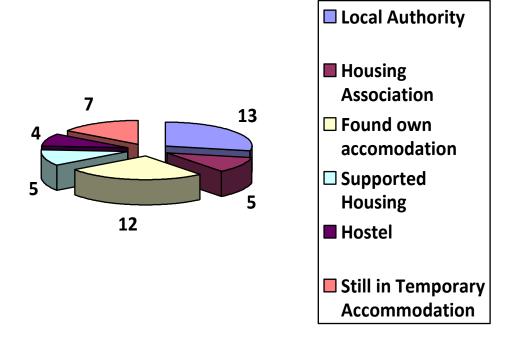
2123 (total accumulated days)

45 (number of people accommodated)

= 47 days (average)

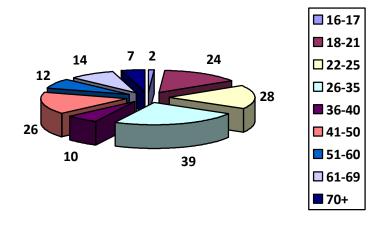
Number of households (previously living in temporary accommodation) housed during 2015/16

Type of Housing	Number
Local Authority	13
Housing Association	5
Found own accommodation	12
Supported Housing	5
Hostel	4
Still in temporary accommodation (as at	7
31.3.16)	



Age range of applicants

Age Range	Number
16-17	2
18-21	24
22-25	28
26-35	39
36-40	10
41-50	26
51-60	12
61-69	14
70+	7



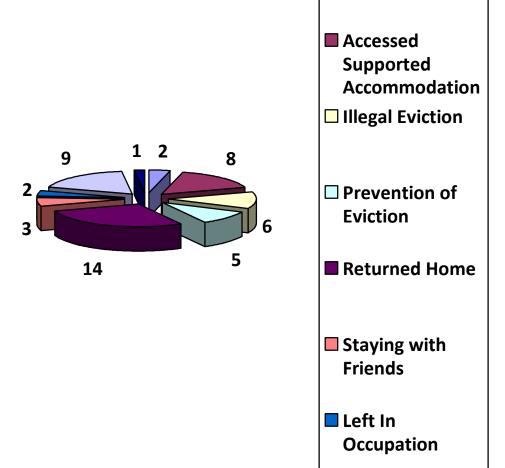
BV213 Prevention of Homelessness 2015/16

There have been 50 cases where homelessness prevention has been used and the reasons are as follows:

Reason	Number
Withdrawn Notice to Quit	2
Accessed Supported Accommodation	8
Illegal Eviction	6
Prevention of Eviction	5
Returned Home	14
Staying with Friends	3
Left In Occupation	2
Found alternative accommodation	9
Prevented unsafe discharge from	1
hospital	

■ Withdrawn

Notice to Quit



Agenda Item No 12

Resources Board

18 April 2016

Report of the Chief Executive

Exclusion of the Public and Press

Recommendation to the Board

That under Section 100A(4) of the Local Government Act 1972, the public and press be excluded from the meeting for the following item of business, on the grounds that it involves the likely disclosure of exempt information as defined by Schedule 12A to the Act.

Agenda Item No 13

Housing Management Section – Review of Tenancy and Neighbourhoods Service – Report of the Assistant Director (Housing)

Paragraph 1 – by reason of the report containing information relating to an individual.

The Contact Officer for this report is David Harris (719222).