

Adults and Housing Scrutiny Committee Agenda



**10.00 am Tuesday, 30 October 2018
Committee Room No. 2, Town Hall,
Darlington, DL1 5QT**

Members of the Public are welcome to attend this Meeting.

1. Introductions/Attendance at Meeting.
2. Declarations of Interest.
3. To approve the Minutes of this Scrutiny Committee held on 11th September, 2018. (Pages 1 - 4)
4. Darlington Safeguarding Adults Partnership Board Annual Report 2017-18 – Report of Director of Children and Adults Services (Pages 5 - 28)
5. Deprivation of Liberty Safeguards - Update – Report of Director of Children and Adult Services (Pages 29 - 34)
6. Quality Standards Monitoring Outcomes 2018-19 (Year 6) Agreement for the Provision of Residential Care for Adults and Older People and Older People with Mental Health Problems 2013-19 – Report of Director of Children and Adult Services (Pages 35 - 46)
7. Adult Social Care Transformation Programme (Pages 47 - 52)
8. Non-Residential Charging Policy Consultation – Report of Director of Children and Adult Services

(Pages 53 - 56)

9. Work Programme –
Report of Managing Director
(Pages 57 - 68)
10. SUPPLEMENTARY ITEM(S) (if any) which in the opinion of the Chair of this
Committee are of an urgent nature and can be discussed at this meeting.
11. Questions.



Luke Swinhoe
Assistant Director Law and Governance

Monday, 22 October 2018

Town Hall
Darlington.

Membership

Councillors Knowles, Copeland, Grundy, Kane, Lister, Lyonette, Mills, M Nicholson, Storr and York

If you need this information in a different language or format or you have any other queries on this agenda please contact Shirley Burton, Democratic Manager, Resources Group, during normal office hours 8.30 a.m. to 4.45 p.m. Mondays to Thursdays and 8.30 a.m. to 4.15 p.m. Fridays Email: shirley.burton@darlington.gov.uk or Telephone 01325 405998

ADULTS AND HOUSING SCRUTINY COMMITTEE

11 September 2018

PRESENT - Councillor Knowles (in the Chair); Councillors Copeland, Kane, Lister, Lyonette, Mills and M Nicholson. (7)

APOLOGIES – Councillors Storr and York (2)

ABSENT – Councillors Culley and Grundy. (2)

ALSO IN ATTENDANCE – Councillor S Richmond and T Richmond.

OFFICERS IN ATTENDANCE – James Stroyan, Assistant Director Adult Social Care; Pauline Mitchell, Assistant Director Housing and Building Services; Anthony Sandys, Head of Housing and Revenue; Sukhdev Dosanjh, Commissioning and Contracts; Pat Simpson, Senior Project Manager; and Barbara Copson, Performance Manager.

AH9. DECLARATIONS OF INTEREST – There were no declarations of interest reported at the meeting.

AH10. MINUTES – Submitted – The Minutes (previously circulated) of a meeting of this Scrutiny Committee held on 3 July, 2018.

RESOLVED – That the Minutes be approved as a correct record.

AH11. PERFORMANCE INDICATORS QUARTER 1 2018/19 – The Managing Director submitted a report (previously circulated) providing Members with an update on performance against those key performance indicators for 2018/19 at Quarter 1

In relation to the Adult Social Care targets, the submitted report gave the performance position in relation to 10 key performance indicator and in relation to Housing Services Quarter 1 performance against six key indicators was reported; two Adult social Care indicators are reported annually and therefore data for these two indicators was not included in the report at this time.

RESOLVED – That the report be received.

AH12. WELFARE REFORMS AND UNIVERSAL CREDIT – (1) UNIVERSAL CREDIT UPDATE – The Director of Economic Growth and Neighbourhood Services submitted a report (previously circulated) to provide Members with an update on the roll-out of Universal Credit in Darlington and the potential impact on residents and Council services.

It was reported that Universal Credit was replacing a number of existing means tested benefits for working age people, including Housing Benefit administered by the Council and began to roll out in Darlington in November 2015. The full

roll-out commenced on 20 June 2018 so most working people making a new claim to benefit or reporting a significant change in their circumstances will now claim Universal Credit.

There are a number of measures and sources of advice and support in place to help residents to claim Universal Credit successfully and these were also detailed in the submitted report.

It was noted that implementation of Universal Credit had been successful in Darlington with the support of the Job Centre and the Department for Works and Pensions and the Chair acknowledged the hard work of all staff putting in place support for residents.

RESOLVED – That the report be noted.

(2) UNIVERSAL CREDIT – QUAD OF AIMS – The Managing Director submitted a report (previously circulated) to give consideration to a request received from a Member of this Scrutiny Committee for a task and finish review in relation to Universal Credit to be added to its work programme.

The request to undertake a piece of work to gauge the initial impact of the roll out of Universal Credit in Darlington; and the agreed procedure taking into account the views of the Assistant Director, Adults and Housing were also submitted with the report.

RESOLVED – (a) That this item be included on the work programme of this Scrutiny Committee.

(b) That Councillors Kane, Knowles, Lister and Mills sit on the task and finish review.

AH13. BETTER CARE FUND 2017-19 – The Director of Children and Adults Services submitted a report (previously circulated) to update Members on the delivery of the 2017-2019 Better Care Fund submitted and associated plans and the updated guidance received in July 2018 in respect of the second year of the plan; and to provide a short glossary of terms used across health and adult social care.

The submitted report outlined the seven broad workstreams of the plan to support the delivery of the Better Care Fund in the priority areas; the additional grant funding to Adult Social Care which will be used to offset expenditure on current pressures and demand to ensure sustainability while the service undergoes transformation; and provided a summary of the 2017/18 quarter 4 (year end) monitoring requirements to ensure that Darlington complies with the national conditions attached to the Better Care Fund.

RESOLVED – That the report be noted.

AH14. SUPPORT TO CARERS – The Director of Children and Adult Services submitted a report (previously circulated) to provide an update on the operation

of the Darlington Carers Support contract and the recently published National Carers Action Plan 2018-20.

It was reported that the Darlington Carers Support contract has been in place since 1 May 2017 offering a range of support and was performing well with 850 carers on the register being in support of the service.

The National Carers Action Plan 2018-20 was published on 5 June 2018 and sets out the cross-government programme of work to support carers over the next two years. It was reported that Darlington was well placed to develop a response to the newly published Action Plan which will build on and expand work that was already in progress. Darlington's response will be co-produced and carer's views will be sought during the process.

RESOLVED – (a) That the report be noted.

(b) That the updated Darlington Carers Action Plan is shared with Members following its completion.

AH15. ADVOCACY SERVICES – The Director of Children and Adult Services submitted a report (previously circulated) to provide details of the advocacy arrangements within Adult Social Care Services.

The authority is under a statutory duty to provide independent advocacy services for people with adult social care needs who need care and support and a new contract for the provision of these statutory services within Darlington was awarded to Darlington Association on Disability (DAD) on 1 April 2018.

The submitted report outlined the Council's duty under the Care Act 2014; the new arrangements with DAD and monitoring information provided by DAD in respect of advocacy activities in the contract April to June 2018; along with the Advocacy Charter and Code of Practice DAD adheres to.

RESOLVED – (a) That the advocacy services commissioned by the Council to support individuals with adult social care needs be noted.

(b) That the monitoring information provided by Darlington Association on Disability in respect of advocacy services during 1 April 2018 to June 2018 be noted.

AH16. WORK PROGRAMME – The Managing Director submitted a report (previously circulated) requesting that consideration be given to this Scrutiny Committee's work programme for the remainder of the Municipal Year 2018/19 and to consider any additional areas which Members would like to suggest should be included in the work programme.

Discussion ensued on the items scheduled to be submitted to the next ordinary meeting of this Scrutiny Committee and it was suggested that the item on the work programme to look at support services for Syrian Refugees also include asylum seekers and other refugees.

With regard to the item on End of Life and Palliative Care the Chair advised Members that she had spoken with the Chair of the Health and Partnerships Scrutiny who has made arrangements to meet with a representative of St. Teresa's Hospice and it was agreed that Councillor Kane would attend this meeting as a representative to this Scrutiny Committee.

Regarding the item on domestic abuse it was suggested to agree a date with the Director of Public Health to consider this item.

RESOLVED – That the work programme for the Municipal Year, as appended to the submitted report, be approved.

ADULT AND HOUSING SCRUTINY
30 OCTOBER 2018

ITEM NO:

**DARLINGTON SAFEGUARDING ADULTS PARTNERSHIP BOARD ANNUAL
REPORT 2017-18**

Purpose of the Report

1. The purpose of this report is to enable the Adult Social Care and Housing Scrutiny to receive and comment upon the Annual Report of the Darlington Safeguarding Adult Partnership Board (DSAPB) for the period 2017/18, attached as **Appendix 1**.

Summary

2. The Safeguarding Adult Partnership Board is required to produce an Annual Report which should account for the Board's activities over the previous year and make an assessment of the effectiveness of multi-agency safeguarding arrangements within the local area.
3. The DSAPB Annual Report for 2017/18 is based on the six key principles that support good inter agency Adult Safeguarding:
 - **Empowerment** – People being supported and encouraged to make their own decisions and give informed consent
 - **Prevention** – It is better to take action before harm occurs
 - **Proportionality** – The least intrusive response appropriate to the risk presented
 - **Protection** – Support and representation for those in greatest need
 - **Partnership** – Local solutions through services working with their communities to prevent and report neglect and abuse
 - **Accountability** – Accountability and transparency in safeguarding practice
4. It is recommended that:
 - (a) The Adult Social Care and Housing Scrutiny note and comment on the DSAPB Annual Report for 2017/18 which will be published on the Safeguarding Board's website.

Reasons

6. The recommendations are supported by the following reasons:
 - (a) Adult and Social Care and Housing Scrutiny have an understanding of the Board's work to date.
 - (b) To challenge and scrutinise the work of the DSAPB and raise any challenges as appropriate with Ann Baxter, Independent Chair.
 - (c) To have assurance that the Safeguarding Adult Board is effectively co-ordinating multi-agency safeguarding practice in Darlington for adults with care and support needs who are at risk of abuse and neglect.

Suzanne Joyner
Director of Children and Adults Services

Amanda Hugill
Ext 6450

Background Papers

Safeguarding Adult Partnership Board Annual Report – 2017/2018

Annual Report 2017-18



Independent Chair's Executive Summary

I am pleased to present the 2017/18 Annual Report of the Darlington Safeguarding Adults Partnership Board. The Annual Report looks back at safeguarding issues across Darlington throughout 2017/18 and looks forward to the challenges and risks in the year ahead.

This has been a significant year for the Board, we revised the Board's strategic plan to set out our future priorities, and required all partners to undertake a safeguarding health check. This valuable exercise provided the Board with an overview of safeguarding practice, and gave assurance on how well partners are working together.

We have changed the format of the report to present the key information as clearly as possible, with details of our demography, Board structures and governance arrangements. This allows the reader to easily access the most important information in the report, and outlines the progress which the partnership has made in the past twelve months against our strategic priorities.

I wish to thank colleagues from all those organisations who work hard every day to protect the most vulnerable people in our communities. By working together, sharing information and practice, providing early help and protection and strengthening the safeguarding network we aim to make Darlington a safer place for everyone.

Ann Baxter
Independent Chair (August 2018)

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- **Outcome 2.** PREVENTION
- **Outcome 3.** PROPORTIONALITY
- **Outcome 4.** PROTECTION
- **Outcome 5.** PARTNERSHIP
- **Outcome 6.** ACCOUNTABILITY AND TRANSPARENCY IN SAFEGUARDING PRACTICE

Conclusion



Introduction

Since moving to a statutory footing, as set out in the Care Act 2014, Darlington Safeguarding Adults Partnership Board (DSAPB) continues to seek assurance that local safeguarding arrangements are in place across the Darlington locality and that organisations act appropriately to help and protect adults with care and support needs from abuse and neglect.

Our Mission

'DSAPB aims through inter-agency collaboration and co-ordination to protect and promote the welfare of adults with care and support needs who are at risk of abuse, injury or harm.'

The DSAPB has a strategic role and coordinates what is done by each agency represented on the Board. It ensures the effectiveness of safeguarding adults with care and support needs who are at risk of abuse and neglect in Darlington.

Our Vision

'Is to ensure that Darlington is an increasingly safer place for adults at risk of abuse and neglect.'

The DSAPB has adopted the six key principles that support good inter agency Adult Safeguarding as outlined in the Care Act 2014 as the strategic aims:



A three year strategic plan has been developed which describes each year how it will deliver against these priorities. The plan is reviewed annually taking into account the progress to date and learning and information received from audits, quality assurance activity, data and case reviews.

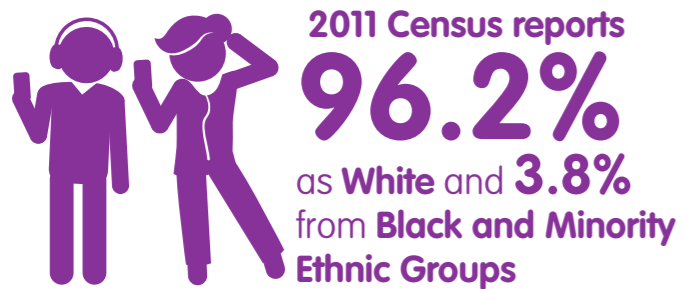
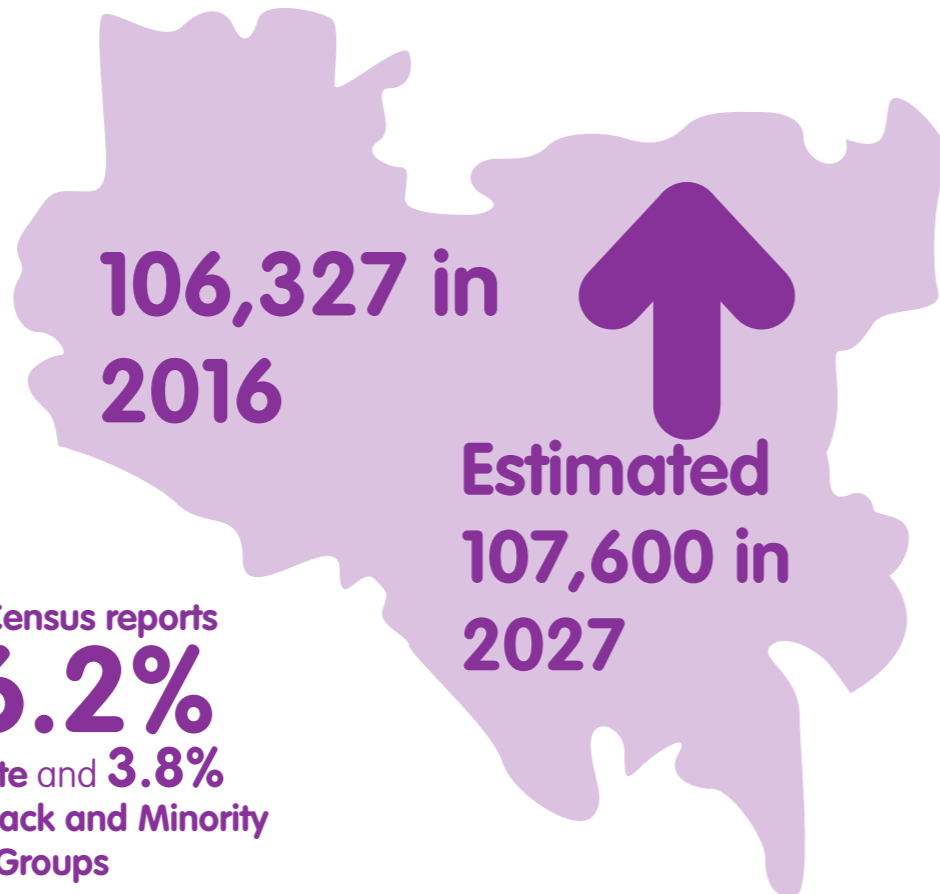
Throughout 2017/18 the Board's work focussed on:

- reviewing and updating multi agency safeguarding policies and practice guidance to reflect learning from local and national Safeguarding Adult Reviews and Learning Lessons Reviews
- developing practice guidance in respect of self-neglect, sexual exploitation and modern slavery
- improving the Board's understanding of the adults at risk's perception of the safeguarding experience
- developing a forward plan of how the partnership will raise awareness of safeguarding including Making Safeguarding Personal to support and empower adults at risk
- developing an audit framework and undertaking a self-assessment safeguarding audit with statutory partners and other key stakeholders to seek assurance that safeguarding practice in Darlington is effective and to support organisations to develop safeguarding policies and procedures as required
- reviewing and revising the SAR protocol to ensure the process is cost effective and leads to change that will make a positive difference to children, adults and their families
- capturing learning from local, regional and national case reviews
- developing a forward plan to communicate learning from case reviews and audits across the partnership and to the wider public
- establishing effective links with other key strategic partnerships i.e. Local Safeguarding Children Board, Health and Wellbeing Board and the Community Safety Partnership



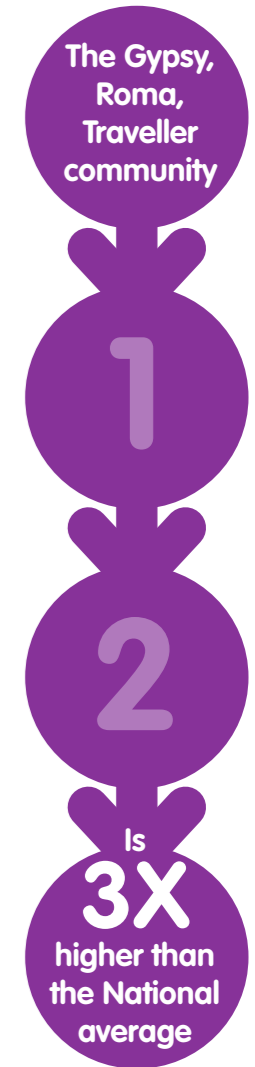
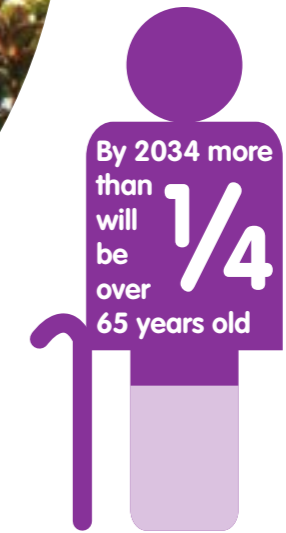


- seeking assurance that services are coordinated and accessible to the Gypsy/Roma/Traveller community (GRT)
- developing the multi-agency data set which enables Board to have a true understanding of how the multi-agency safeguarding arrangements are working for adults at risk
- developing the joint Training Strategy 2016-19 to support continued professional development throughout the partnership and raising awareness of safeguarding in the wider community
- strengthening partnership working and collaboration and ensuring appropriate strategic representation at Board



About Darlington:

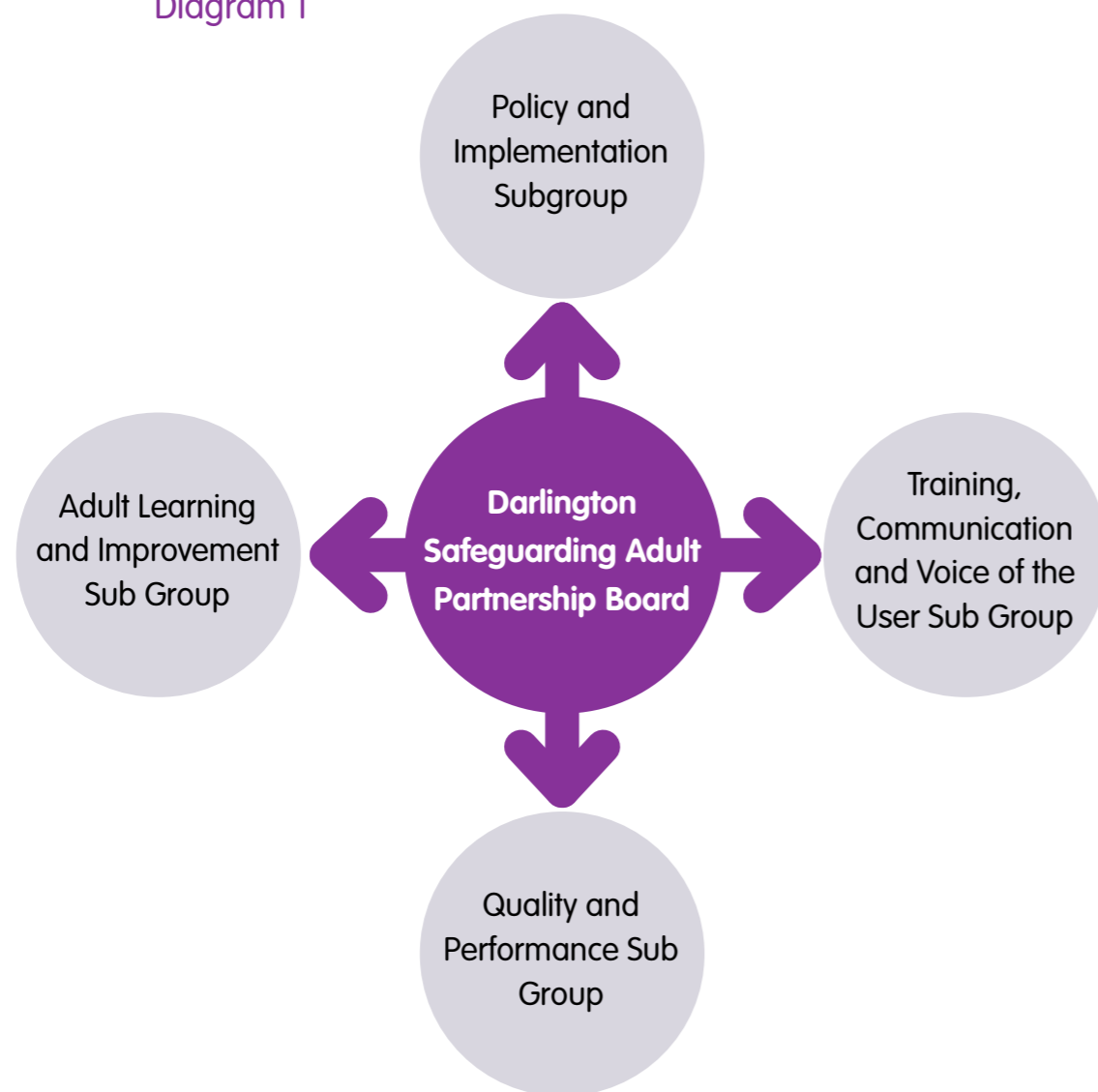
Darlington is a Unitary Authority which covers an area of approximately 200km. The Office of National Statistics mid-year 2016 population estimates the population of Darlington to be 106,327 of which the 2011 census reports 96.2% as white and 3.8% from Black and Minority Ethnic Groups (BME) which is defined as anyone who is not white British. This is an increase from 2.1% in the 2001 census, however these populations remain a lower proportion of the population than the North East at 4.7% and England at 14.6%. The total population is predicted to rise to 107,600 in 2027. By 2034 more than one quarter of the Darlington population will be aged over 65 years old. The number of people aged over 85 years old in Darlington is estimated to more than double by 2034 to a total of 5,600 individuals representing 5.5% of the total population. This increase in the number of older people combined with a trend of decreasing healthy life expectancy for Darlington is likely to result in an increasing demand on health and social care over the next decades and present new challenges to providing local Health and Social Care service in the Borough. Darlington also has the largest Gypsy, Roma Traveller (GRT) community in the area as reported in the 2011 Census. This minority group is three times higher than the national average but equates to 0.3% of the population. The Census return shows 350 individuals declaring as Gypsy or Irish Traveller locally. A health needs assessment undertaken in 2010 has estimated the GRT population size to be much higher based on an audit undertaken for both Durham and Darlington by Durham County Council's Housing Strategy Service, whereby the estimated population is in the range of 1540 to 2060 for Darlington.



Membership and Structure of the Board

The Darlington Safeguarding Adults Partnership Board Terms of Reference sets out the governance arrangements and standards for the Board members. The Board is a two tier structure (diagram 1) and is supported by the joint Safeguarding Boards' Business Unit.

Diagram 1



The Board is made up of strategic leads (as identified in **Appendix 1**) from across the key strategic partners that work with adults at risk and their families in Darlington and have a role in Safeguarding. Board members are of sufficient authority to hold their organisation to account. The Board meets six times a year.

The DSAPB is independently chaired by Ann Baxter who has been Chair since September 2016. The Vice Chair is Karen Agar of Tees, Esk and Wear Valleys NHS Foundation Trust.

There are two Lay members appointed to the Board who represent the community. The role of the lay member is to help to forge the links between the Board and the community, support stronger public engagement in local adult safeguarding issues and improve public understanding of Adult Safeguarding. They also play a part in the oversight and scrutiny of decisions and policies made by the Board to help shape safeguarding policy and practice.

For an outline of the organisations represented at Board see **Appendix 1**

There are four sub-groups that report to the Board and their purpose is to deliver on the key responsibilities and priority areas which have been agreed by the Board. In addition the sub-groups may initiate time-limited task and finish groups to focus on specific pieces of work which is required to enable the Board to successfully meet its strategic objectives.

The sub groups that report to DSAPB are as follows:

- **Policy and Implementation sub-group:** with a focus on developing and publicising multi-agency safeguarding policies and procedures across the partner agencies working in Darlington.
- **Adult Learning and Improvement sub-group:** with a focus to consider any cases referred for a Safeguarding Adult Review (SAR) and to manage the process where a SAR or alternative review is required. To also consider local and national learning to improve practice.
- **Quality and Performance sub-group:** with a focus to develop and monitor the multi-agency safeguarding data and to highlight issues to Board. To undertake multi-agency quality assurance activity to enable Board to seek assurances of safeguarding practice in Darlington.
- **Training, Communication and Voice of the User sub-group (joint group with Darlington Safeguarding Children's Board):** with a focus to develop a joint Training Strategy and a Communications and Engagement Strategy to enable the promotion of important safeguarding messages and to ensure training is updated in a timely manner with local and national learning. To actively seek an understanding from service users of their safeguarding experience to enable Board to seek its assurances.

For an outline of the achievements of the four sub-groups in 2017/18 see **Appendix 2**.



Revenue

The Care Act (2014), Care and Support Statutory Guidance states:

'Members of the DSAPB are expected to consider what assistance they can provide in supporting the Board in its work. This might be through payment to the Local Authority or to a joint fund established by the local authority to provide, for example, secretariat functions for the Board. Members might also support the work of the SAB by providing administrative help, premises for meetings or holding training sessions. It is in all core partners' interests to have an effective SAB that is resourced adequately to carry out its functions.'

The contributions are to ensure the DSAPB can deliver the duties and functions under Schedule 2 of the Care Act 2014 and make a positive impact on safeguarding practice in Darlington.

It is a challenge each financial year for the DSAPB to ensure there are sufficient resources to meet its statutory responsibilities. This is proving more challenging as agencies undertake savings programmes to meet reductions in budgets from central government. The Board is aware that increasing demands and high expectations will continue to be challenging and this remains an important area to monitor closely, but also an area Board members are considering how to work differently to ensure high standards of safeguarding are delivered across Darlington.

For details of the revenue and partner contributions see **Appendix 3**

How effective has the DSAPB partnership been in the past year and how do we know this?

The DSAPB has adopted the six key principles as outlined in the Care Act 2014 as the strategic aims and in 2017-18 the DSAPB made the following progress against the six key principles:

Outcome 1 – Empowerment

People being supported and encouraged to make their own decisions and give informed consent.

The Board agreed it would:

Ensure adults at risk are being supported and encouraged to make their own decisions through access to advocacy where relevant and information being provided in such a way it helps inform their decisions and their consent.

Making Safeguarding Personal (MSP)

Effective safeguarding should always place the adult at the heart of what we do. Developing a safeguarding culture that ensures adults are empowered and supported to make their own decisions is essential. During 2017/18 the Board has actively sought feedback from adults at risk who have been involved in the safeguarding process to be assured that practice reflects the principles of Making Safeguarding Personal. The principles are now well embedded in concern forms and multi-agency training.

What our services users have said:

"I was fully informed and supported throughout"

"it was nice to talk to people who listened to me"

"everything was clearly explained to me and people made sure I understood"

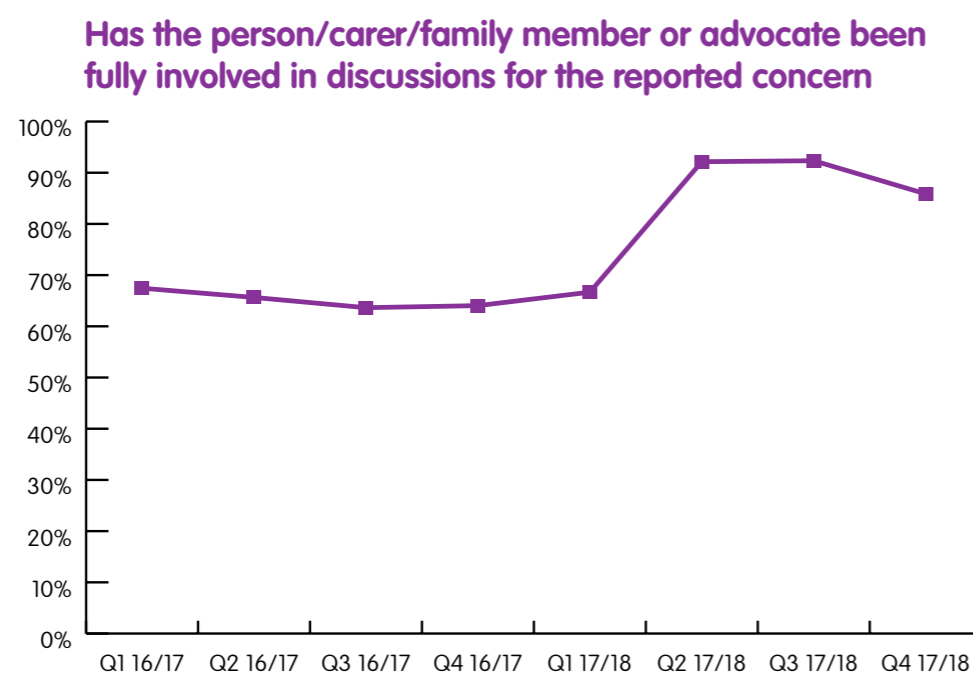
"my advocate was very good and kept me informed"

"getting back my independence and enjoying my life"

A new case management system (Liquid Logic) was implemented by Darlington Borough Council in 2016-17 which has had a positive impact on reporting methods of data for quality assurance purposes. The system is now embedded and is supporting the collation and analysis of data.

In Darlington the involvement of service users or their representative in safeguarding enquiries is measured from the outset and is evaluated as part of the safeguarding process. This is achieved by asking seven questions about their experience of the safeguarding process, allowing their views to be assessed at all stages of the enquiry making the process easier to evaluate and allowing for more accurate feedback to be obtained to enable more focussed improvements on the outcomes for the service user. This information is captured quarterly and shared with the Quality and Performance sub-group within the multi-agency data set. The detail is analysed to provide assurance to Board that people are supported and encouraged to make their own decisions and give informed consent to the safeguarding process.

As the graph below demonstrates, in the quarter 4 period for the year 2017-18 86% of service users or their representative had been fully involved in discussions for the reported concern, this was a small decrease on the previous quarter. The data does however highlight that the involvement of the service user or their representative in discussions and decision making has increased significantly over the past twelve months, which would suggest that work undertaken to embed MSP from the very earliest point in the safeguarding process is having the desired impact.



Themes are being developed from the 'individual views' and early indication is that the emerging issues for individuals include the language used by professionals is not always clear and there is too much use of medical terminology in meetings. Work is being undertaken by the Local Authority to ensure meetings do not use unnecessary jargon or abbreviations and that more time is taken to ensure individuals feel confident with the information given to them. This will also be reinforced in multi-agency safeguarding training.

During 2017-18, the individual's view of their experience of the safeguarding process was asked through the following seven questions:

1. Did you feel listened to?
2. Were you kept informed throughout the process?
3. Were you able to understand the information given?
4. Were you satisfied with the end result?
5. Were you satisfied with how many people dealt with the concern throughout?
6. Do you feel safer now?
7. Did you achieve what you said you wanted to at the beginning?

From the responses received 50% agreed with the questions asked indicating that they felt that their views had been heard and they felt safer following the safeguarding enquiry. Ten percent indicated they were not satisfied with the end result and the remaining 40% either declined to answer, could not be contacted or had died since the time of the referral.

It should be acknowledged that it is unrealistic to obtain a 100% target for views obtained as there may be legitimate reasons for views not being obtained due to specific circumstances, for example from police or ambulance service, where it is not often possible to have the discussions with adults at risk all the time.

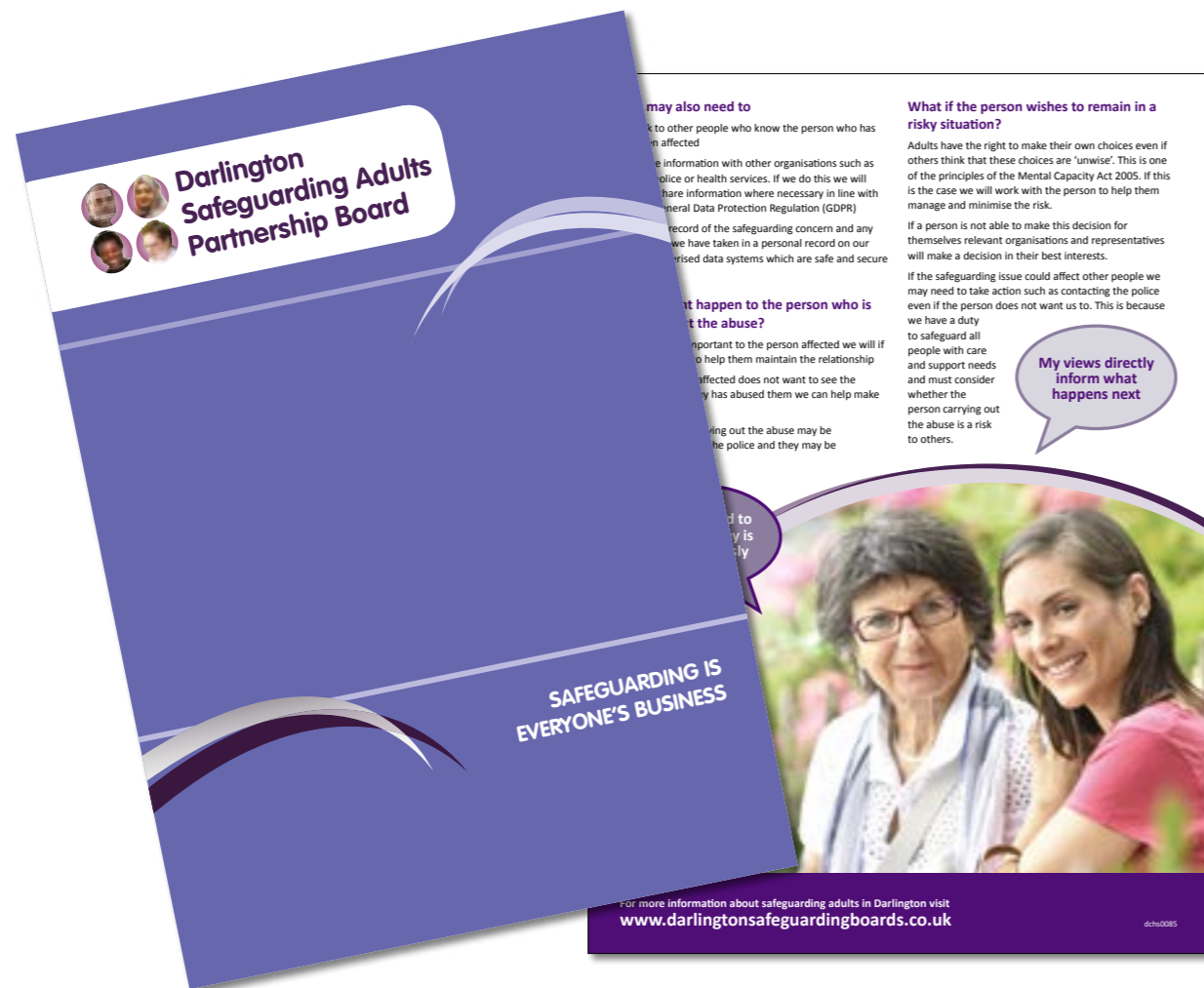
The Quality and Performance Sub group will continue to monitor and escalate any concerns to the Board for discussion.

50%
felt their views had been heard and they felt safer following the Safeguarding enquiry

In 2017/18 the Quality and Performance sub-group explored ways to obtain a better understanding of the experience of service users involved in a safeguarding enquiry. It was agreed that this task would be undertaken by a social worker independent of the enquiry, therefore there is now an element of independent oversight of each users' experience, this will be monitored through the quality assurance activity.

Safeguarding Adults leaflet

The Training Communications and Voice of the User sub group developed a new Safeguarding Adults leaflet to explain abuse and neglect, how to refer concerns and what action will be taken when a concern is raised. The leaflet explains that the views and wishes of the adult at the centre of the enquiry will always be sought and that no decisions will be made without the involvement of the person at risk or their advocate or representative - 'no decision about me without me'. The leaflet is designed for service users and providers and the wider public. The leaflet has been widely circulated and is available on the Safeguarding Boards' website.



CASE STUDY: A twenty five year old with mental health issues presented as homeless and was accommodated at the YMCA. This individual was consuming alcohol to excess to the point where hospitalisation was necessary and YMCA staff felt they were simply providing a safe place for the service user to drink alcohol and there was a real possibility this person would die as a result of alcohol misuse. Appointments with both NECA and the Community Rehabilitation Company

(CRC) had lapsed. The service user had no contact with their partner and children due to alcohol misuse and had no other family support. There were serious concerns of further risk to this individual's physical and mental health if support was not provided. The YMCA submitted a referral to the safeguarding team and a strategy meeting was held. Discussions were held with the service user to ascertain views and wishes and desired outcomes from the safeguarding process. The service user expressed a wish to reduce their alcohol consumption and turn their life around. The service user welcomed the support of professionals which was delivered through a multi-agency approach and expressed the wish that family members should not be involved in the safeguarding process. The service user engaged with MIND and the Psychosis Team, NECA (Darlington Recovery and Wellbeing Service) and the Community Rehabilitation Company (CRC). The YMCA continued to monitor the service user's physical health and provide daily support including accompanying the service user to NECA appointments. The service user made significant progress following the first meeting and in a relatively short space of time the service user has dramatically reduced alcohol intake, secured employment and has been discharged from NECA. The service user has also re-established contact with their partner and is having regular contact with their children and has relocated to be near them. From there being serious concerns about the service user's health following the referral from the YMCA, through a multi-agency safeguarding approach coordinated by the Safeguarding Adults Team at Darlington Borough Council, this highly vulnerable person chose to engage with safeguarding professionals and as a result has turned their life around and is now healthy, employed and has resumed contact with their partner and children.

What we are doing in 2018/19:

- continue to monitor the themes identified from individual views through the performance data
- develop a safeguarding adult poster for circulation to community areas and GP surgeries

During 2017- 18 there were **1152** reported concerns to Adult Social Care for abuse and neglect with **139** of these progressing to section 42 enquiries (12%)

Outcome 2 - Prevention

It is better to take action before harm occurs.

The Board agreed it would:

Ensure there is a coordinated approach to understand why and how abuse and neglect has occurred, the information will be used to prevent future incidents of abuse or neglect. Ensure adults at risk are provided with sufficient information through direct work and general awareness raising that enables them to understand risks to help themselves and where appropriate to keep themselves safe.

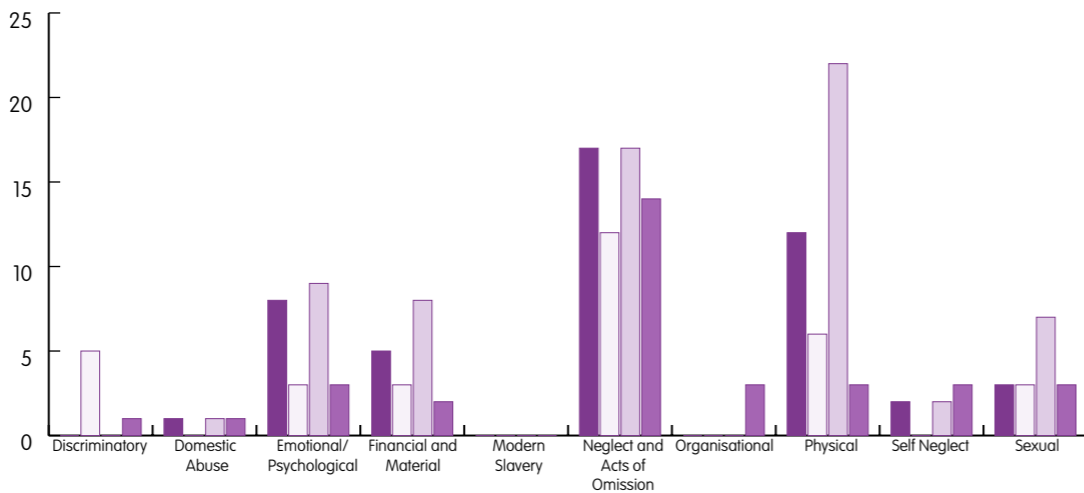
This principle focuses on the type of abuse and location.

Safeguarding Activity

During 2017- 18 there were 1152 reported concerns to Adult Social Care for abuse and neglect with 139 of these progressing to section 42 enquiries (12%).

The graph below demonstrates that throughout 2017/18 neglect or act of omission and physical abuse were the most common categories of alleged abuse for cases that progressed to a strategy meeting.

Enquiries/investigations by category of alleged abuse.

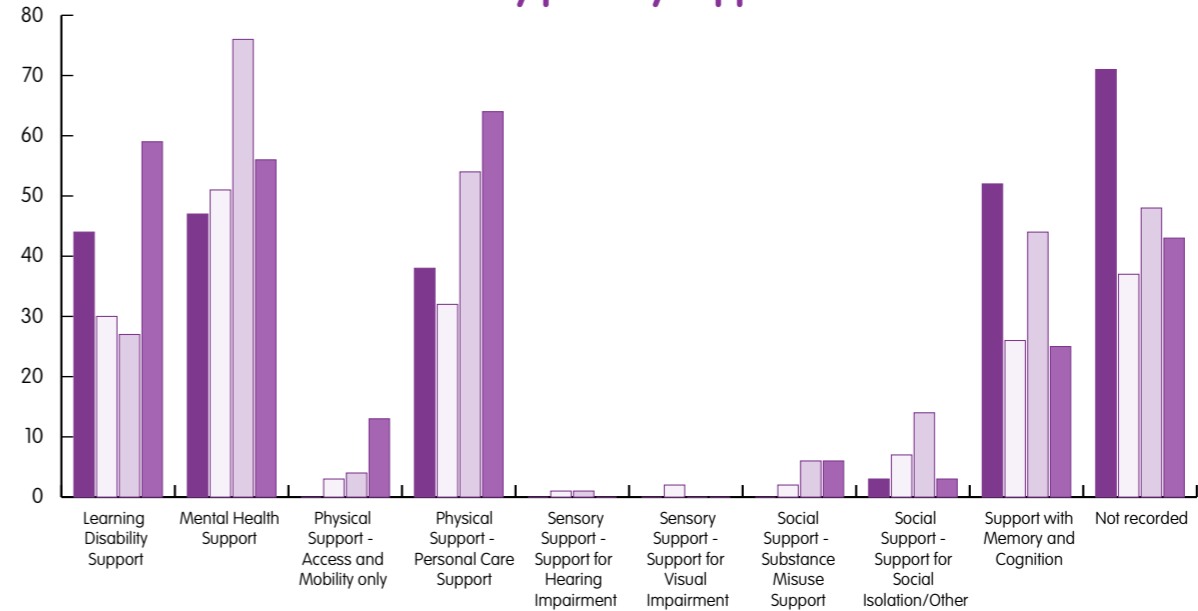


During 2017/18 the majority of allegations of abuse which progressed to a strategy meeting occurred in residential care settings. As a result the Quality and Performance sub group analysed the information for the quarter four period to establish if there were any pattern of concern or links between the type of abuse and the location, the group was assured that no pattern was established or concerns relating to any particular establishment uncovered.

Concerns by primary support reasons

The graph below demonstrates that in 2017/18 the main primary support reason for concerns is mental health support followed by physical support/ personal care support. Steps are being taken to improve the recording of this category within the Local Authority Case Management System (Liquid Logic).

Concerns by primary support reasons



Learning Lessons from Local and National Reviews

Reviewing and learning from serious incidents is a crucial aspect of good safeguarding practice and requires leadership from senior managers across all organisations involved. In February 2018 a joint Children's and Adults workshop was held to allow senior managers across the partnership with responsibility for safeguarding in Darlington to examine how reviews can be used to identify and embed learning including making sure that both the decision to conduct a review and the review process itself is cost effective and leads to change that will really make a positive difference adults and their families. The SAR protocol will be reviewed and updated in 2018/19 and will incorporate any good practice identified through the implementation of the Children and Social work Act 2017. The protocol will consider the interface between other reviews and parallel processes which may run concurrently with a Safeguarding Adult Review (SAR) (such as a Coroner's inquiry or Domestic Homicide Review) and how the processes can work more efficiently.

The purpose of any review is to identify learning that will bring about improvements in safeguarding practice so that the likelihood of future harm to adults at risk is minimised. Examples of good practice can also be considered to identify learning that can be applied to future cases. The Adult learning and Improvement sub-group has developed a template for collating themes and lessons learnt from local, regional and national reviews. The information will be updated twice a year and is available on the DSAPB website.

A challenge for Board in 2017/18 will be to identify learning which is relevant to safeguarding in Darlington and to ensure that good practice is identified from the learning and which is embedded in safeguarding procedures in Darlington. This principle also applies to learning from local strategy meetings. The sub-group will also seek to strengthen links with the Training sub-group to seek evidence that the learning from local and national reviews is embedded in the multi-agency training programme.

It will be a further challenge for the sub-group to establish a method to evidence the embedding of 'lessons learned' and analyse the resulting impact on practice.

Training

Safeguarding and promoting the welfare of adults at risk of abuse is one of the key priorities of the Board and remains the focus of any DSAPB learning and development activity across the partnership whether statutory, voluntary or independent sector.

The Board is committed to delivering a high quality inter-agency training programme. This programme aims to support professionals, volunteers and the independent sector in their work to safeguard and promote the welfare of adults with care and support needs and promotes a 'learning culture', which is outlined in the Safeguarding Boards' joint Training Strategy and is informed through the training needs analysis and feedback from training delivered.

The Boards currently fund a multi-agency Trainer who delivers safeguarding training. Attendance figures for safeguarding training have continually increased over the past eight years with a 467% increase since 2010-11 period.

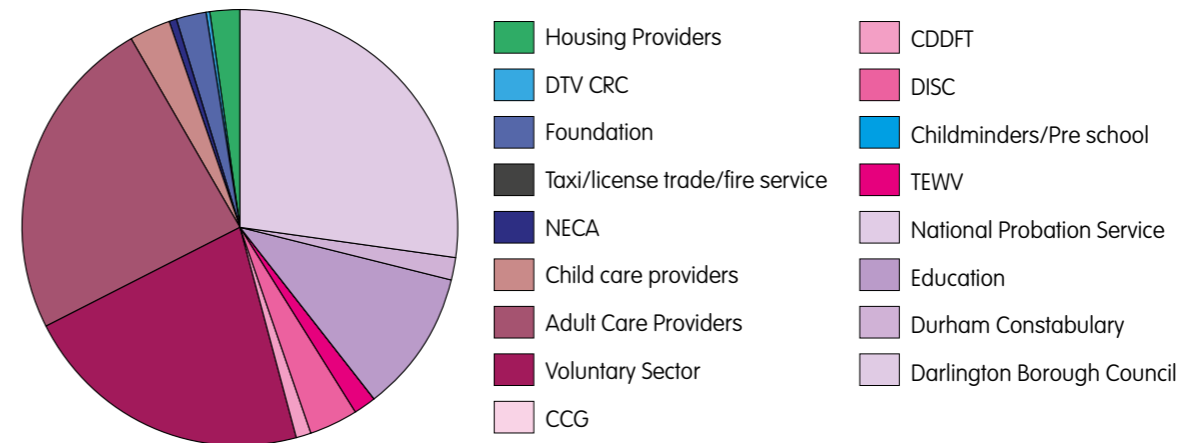
In addition to face to face training, a number of e-learning packages or workbooks were completed during the year. A total of 190 learners completed the Level 1 safeguarding adult workbook and 281 learners accessed the PREVENT online course. A number of other additional free e-learning courses are available on the Safeguarding Boards website which include Forced Marriage, Female Genital Mutilation (FGM) and Mental Capacity Act (MCA) for 16 and 17 year olds.

467%
increase in
Safeguarding
Training
Attendance
Page 16



The chart below outlines the attendance for adult only training accessed by partner agencies during the period April 2017 to March 2018.

Safeguarding Adult Learners



Further information and a breakdown of the training figures can be found in the Training Strategy 2017-20 and the Training Annual Report 2017/18 both of which are available on the Safeguarding Boards website.

Communication and Engagement

Further work was undertaken on developing a forward plan of how the partnership will raise awareness of safeguarding. A communication workshop was held which identified there appears to be strong partnership working amongst the communication and media representatives within each partner organisation. Key links have now been embedded between the business unit and the communication and media teams within each organisation to ensure key messages are shared when appropriate, using various means of communication including social media.

A challenge in 2018/19 for the DSAPB will be to further develop the communication and engagement strategy, to strengthen links with the other sub-groups to ensure that policy changes, learning and national good practice are shared throughout the partnership and to establish links with media teams throughout the partnership to raise awareness of safeguarding in Darlington.

Policy Development

Managing Allegations Policy and Practice Guidance -The Care Act 2014 required the DSAPB to establish a framework for dealing with allegations against people who work with adults who have care and support needs alongside a process for the notification of such allegations or concerns. As a consequence the Policy and Implementation sub-group developed and ratified a policy and practice guidance document outlining how such allegations and concerns should be reported and the framework for responding to concerns of this nature. This policy was implemented in June 2017.

Effective management of allegations together with effective safer recruitment policies ensures that unsuitable people do not obtain employment where they may pose a risk to vulnerable people. The policy document is available on the Safeguarding Boards' website and there is a web page dedicated to the issue of managing allegations and the referral pathways.

Details of these allegations are recorded and dealt with by the Safeguarding Adults Managers and will be monitored by the Local Authority. Details will be provided to the Quality and Performance sub group to provide assurance to Board that this policy has been embedded across the partnership and where any concerns are highlighted, appropriate action is taken to ensure unsuitable people do not seek employment where they may pose a risk.

What we are doing in 2018/19:

- Reviewing and revising procedures to ensure that DSAPB has in place robust procedures and referral processes to consider SARs and LLRs which includes consideration of other reviews such as Domestic Homicide Reviews (DHR) Serious Case Reviews (SCR) Learning Disabilities Mortality Review (LeDeR) and Mental Health Homicide Reviews.
- Considering how to capture the learning from strategy meetings to inform future practice
- Undertaking an impact evaluation survey to establish whether the learning from reviews has been communicated across agencies and how this has altered practice.
 - Establishing a process to capture learning from strategy meetings and disseminating the learning throughout the partnership
 - Determining how to ensure appropriate messages are communicated across the partnership including the use of social media to raise awareness of safeguarding
 - Continuing to develop the Safeguarding Boards website to further strengthen engagement with children, young people and adults
 - Developing an events calendar within the 'Living Well' Directory to promote safeguarding events
 - Developing an approach to assess and analyse the impact of multi-agency training on practice within the partnership
 - Evaluation of single agency training



Outcome 3 - Proportionality

The least intrusive response appropriate to the risk presented

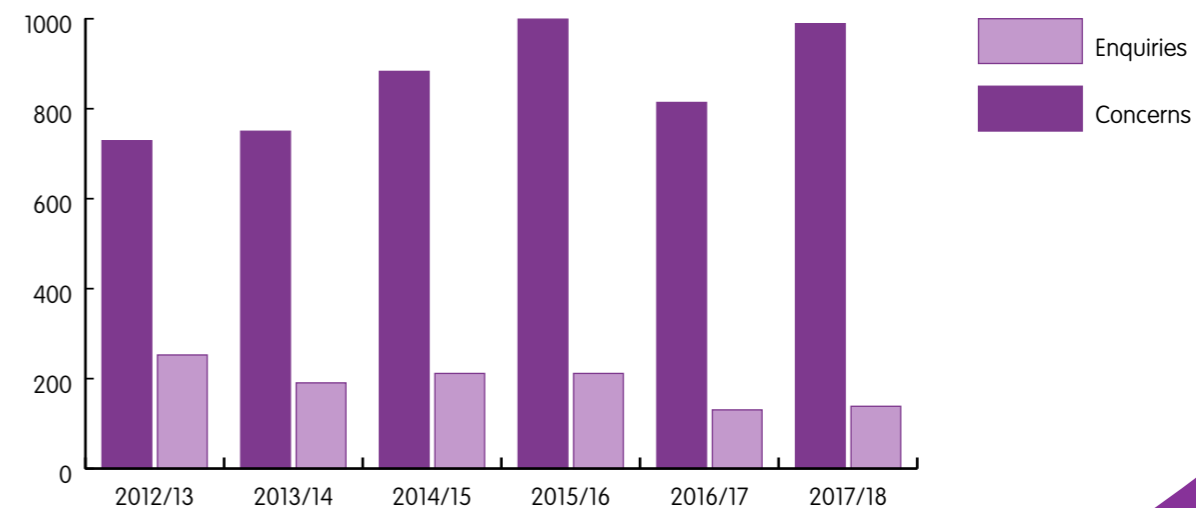
The Board agreed it would:

Ensure through coordinated and joined up multi-agency practice, audits and lesson learnt reviews that safeguarding processes are proportionate with the best possible outcome for the adult at risk, including identifying the learning that will inform safeguarding practice across the adult workforces.

The DSAPB seeks assurance that from partner organisations that safeguarding response are proportionate to the risk of significant harm. Data indicates reported concerns have increased year on year. This increase is consistent with the raised profile of adult safeguarding across Darlington which has included the development of robust multi-agency procedures, safeguarding training and increased awareness through provider forums along with direct work with a range of organisations.

The graph below shows the number of concerns reported in 2017/18 which has increased by 14.5% in comparison with the previous year. When analysed the data suggests that many of the concerns from care homes are low level, one off incidents where no harm has occurred, feedback received when this was challenged included an expectation from CQC that care homes report all apparent incidents as a safeguarding concern, this has been challenged with CQC.

Comparison of concerns and enquiries year on year





In contrast, the percentage of cases which have progressed to a safeguarding meeting has fallen. Further work and analysis is required to establish the reason for this trend which may be a result of the introduction of the five day timescale to complete an initial enquiry during which time a safeguarding manager may obtain sufficient information to finalise a case without the need to progress to a strategy meeting. A comprehensive audit will be undertaken on the decision making around reported safeguarding concerns in relation to progressing to enquiries.

What we are doing in 2018/19:

- Monitoring the progression of safeguarding concerns to strategy meetings through audit
- Conducting a thematic multi agency audit in respect of self-neglect which will incorporate MSP

Outcome 4 - Protection

Support and representation for those in greatest need

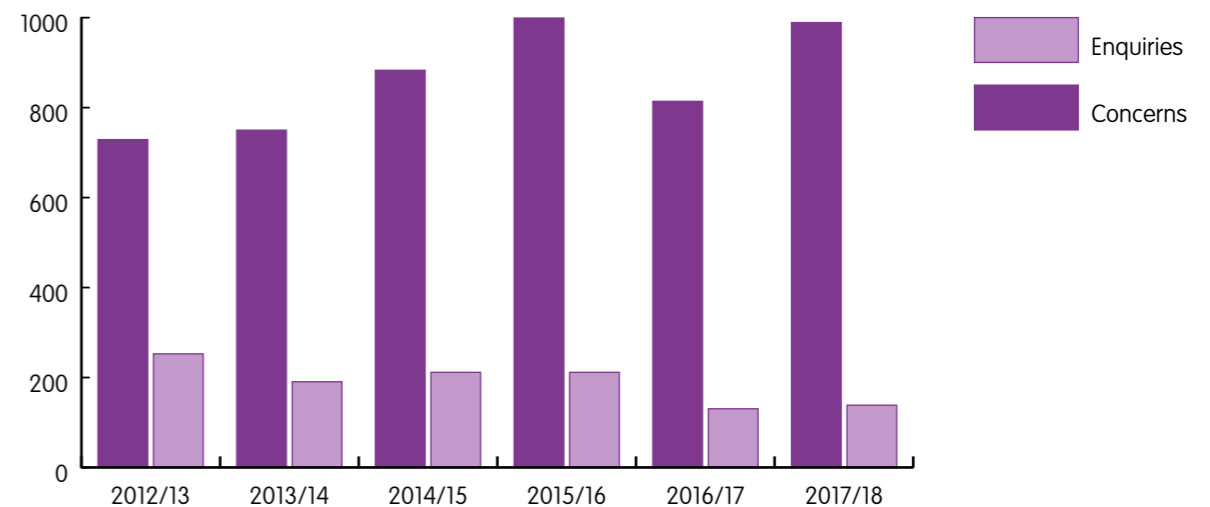
The Board agreed it would:

Continue to ensure there is good multi-agency coordination of support and representation for adults at risk throughout the safeguarding process which appreciates and recognises their individual needs.

The Board will continue to monitor local safeguarding arrangements for reporting abuse and neglect through the performance data. The data for the period 2017-18 has remained relatively constant. It seems there are more robust processes in place within organisations as staff are now seeking advice from safeguarding leads before referring directly to adult safeguarding. In addition one agency identified management changes which had impacted on threshold decision making, this is being addressed by that organisation.

The graph below highlights the number of concerns received and the percentage that progressed to a safeguarding strategy meeting.

Comparison of concerns and enquiries year on year



Multi-agency Safeguarding Audit

During 2017/18 the Board and Quality and Performance sub group worked in collaboration with Darlington Safeguarding Children’s Board (DSCB) to conduct a robust self-assessment audit based on the similar principles of section 11 of the Children Act 2004, section 175 of the Education Act and Working Together 2015 to safeguard and promote the welfare of children.

The audit framework was adapted for use in adult safeguarding to enable the Board to seek assurance through scrutinising local arrangements and assessing whether partners are fulfilling their statutory obligations with due regard to the need to safeguard and promote the welfare of adults with care and support needs.

This year a much more rigorous process was implemented with the inclusion of a moderation process. The audit extended beyond the statutory partners and for the first time include charitable and voluntary organisations, faith settings and GPs to allow the Board to assess the effectiveness of adult safeguarding within Darlington and support agencies to develop action plans where necessary.

The purpose of the audit was to seek assurance that safeguarding arrangements are robust across all sectors in Darlington and that agencies have comprehensive arrangements in place to deliver their safeguarding responsibilities and that they are able to provide evidence that these arrangements are effective.

The audit was conducted between May and July 2017 and the responses to the audit were overwhelmingly positive. Analysis of the audit returns and the moderation process provided evidence that the principles of safeguarding are embedded in practice and are effective in promoting the safety and welfare of children and adults at risk in Darlington; the majority of organisations can demonstrate they have appropriate safeguarding arrangements in place which are effective and are compliant with statutory requirements. The findings of the safeguarding audit were reported to Board in March 2018 and to the Health and Wellbeing Board in May 2018.

It was highlighted that a number of large sport and voluntary organisations did not respond to the audit request and this is being followed up. The Quality and Performance sub group will review the emerging issues to build on the assurances and provide updates to Board.

In conclusion, the Board can be assured that safeguarding arrangements in Darlington are robust and that the investment of time in the audit process is worth the outcome.

Operation PISA

Operation PISA was launched by Durham Constabulary to assess and disrupt Organised Crime and investigate potential Modern Slavery Offences. This originated from a Child Sexual Exploitation (CSE) investigation where car wash workers were identified as being employed at a premises in Darlington. The operation allowed Durham Constabulary and the partnership to demonstrate commitment to the investigation of Modern Slavery offences and tackling and disrupting Organised Crime Groups who seek to use vulnerable people in their businesses. The successful media campaign allowed Modern Slavery to be publicised in the local area and to appeal for the public to report persons and premises of concern, this has resulted in an increase in reporting via the Modern Slavery Helpline. It also demonstrated strong partnership working to address this category of crime which cannot be tackled purely by the police. The workers have also now been positively identified within the community and ongoing support is being provided to them by the Community Cohesion Unit. The Operation resulted in up-skilling of all personnel involved in the operation, both police and partner agencies and ensured Victim Reception Centre provisions are now in place for future operations to ensure more efficient and effective operations in the future. The operation was inspected by Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) and found to be national best practice, mainly due to the early partnership approach.

The Policy and Implementation sub-group is currently developing a Modern Slavery and human trafficking protocol and practice guidance document (jointly with DSCB) to support future operations. The lessons from Operation Caspian will be incorporated in the practice guidance.

Multi-Agency Practice Guidance-Self Neglect and Hoarding

The Policy and Implementation sub-group developed a multi-agency procedure and practice guidance document in respect of self-neglect and hoarding. This document outlines the guidance for supporting adults with care and support needs who are at risk of harm as a result of self-neglect. Effective multi-agency partnership working and collaboration can help inform the bigger picture and facilitate earlier and more effective interventions in cases of self-neglect. The guidance is available on the professional's page of the Safeguarding Boards website at:

www.darlingtonsafeguardingboards.co.uk



Sexual Exploitation Referral pathway

Jointly with Durham Safeguarding Adults Board the Policy and Implementation sub-group has developed and ratified the sexual exploitation referral pathway which is a tool to support and guide staff and volunteers if it is known or suspected that an adult is experiencing or is at risk of sexual exploitation. Discussions are currently ongoing to establish transitional arrangements from children's services to adult services to identify if there are any gaps in provision and support.

Professional Challenge

In April 2017 the Policy and Implementation sub-group developed a multi-agency Professional Challenge procedure and practice guidance. Professional challenge is a positive activity and a sign of good professional practice and effective multi-agency working. The practice guidance outlines a process for resolving practitioner disagreements and ensuring that there is effective challenge within the system.

CASE STUDY: There is evidence that the professional challenge protocol (and the Level 1 training which included the protocol) has been effective and has improved practice. In 2017 a training delegate reported that having attended the Safeguarding Adults Level 1 training and learning of the Professional Challenge Practice Guidance she was able to reflect on an individual case and the outcome of the reported safeguarding concern. She identified issues with the risk management response and identified serious concerns for the person's health and wellbeing and the potential for self-harm. Using the practice guidance and following the escalation flowchart the concerns were escalated and subsequently considered at Head of Service level. As a result a new risk management response was initiated and the risk of harm was greatly reduced.

Executive Strategy Meeting Guidance

The Executive Strategy Meeting Guidance clarifies the roles and responsibilities of agencies involved in the investigation of suspected organised or institutional abuse or neglect ensuring effective communication and collaboration between partner agencies at a strategic level. These procedures were approved by Board in April 2017. In 2017/2018 there have been less than five Executive Strategy meetings in respect of organisations contracted by Darlington Borough Council.

Multi-agency data set

The DSAPB continues to monitor local safeguarding arrangements for reporting abuse and neglect through the performance data. One of the challenges for the DSAPB during 2017/18 has been to identify the data criteria which will inform Board and identify aspects of single and multi-agency safeguarding practice which need to improve and inform the strategic priorities. In 2017/18 the Quality and Performance sub-group succeeded in the development of a multi-agency data set and has established a framework for obtaining the data from partner agencies on a quarterly basis and ensuring that analysis of the data is completed by all partner agencies. The data is further analysed during sub-group meetings where it is decided whether the data has provided assurance and whether issues need to be highlighted to Board in an exception report.

The continuing challenge for the Board in 2018/2019 will be to improve multi-agency data collection and create a safeguarding profile of Darlington in order to establish how effectively respective agencies are working in partnership and fulfilling their statutory duties in accordance with the Care Act 2014. Therefore work on the multi-agency data set will continue into 2018/19 to refine the process of collating and analysing the data and exception reporting to Board.

What we are doing in 2018/19:

- in conjunction with DSCB and Durham Constabulary develop a joint multi agency practice guidance document in respect of Modern Slavery and a 'Modern Slavery at a glance' leaflet taking into consideration the implications from lessons learnt from Operation Caspian and Border (Modern Slavery) in respect of the resources required should Darlington be required to set up a reception centre and provide associated resources in the event of a complex case investigation.
- consider how learning from national case reviews can be captured and embedded in practice throughout the partnership
- develop multi-agency practice guidance in respect of Domestic Abuse
- consideration of transition arrangements
- further development of the multi-agency data set and exception reporting to Board.

Outcome 5 - Partnership

Local solutions through services working with their communities to prevent and report neglect and abuse

The Board agreed it would:

Ensure multi-agency safeguarding policies and procedures are embedded and there are clear information sharing arrangements in place to inform the overall safeguarding strategy through sharing of data, soft intelligence and learning through safeguarding enquiries and other audits and reviews.

Strategic Partnerships



The DSAPB works in partnership with three key strategic partnership boards to ensure strong joint working arrangements across agencies which coordinate the vision, aims and priorities for Darlington and its population.

The Darlington Protocol was launched in November 2017 and outlines the relationship between the DSAPB and other strategic partnerships. It is recognised that each Board has its own governance and priorities and the protocol promotes effective ways of working to deliver the strategic outcomes, reflecting that ‘safeguarding is everyone’s business’.

Safeguarding is a responsibility that runs through all Boards but it is the responsibility of the two Safeguarding Boards to call the other partnerships to account. There are a number of areas of common interest where the named Strategic Boards need to ensure that leadership and accountability for these issues is clear and that information is effectively shared.

DSAPB works with these strategic partnerships to develop strong joint working arrangements to coordinate the vision, aims and priorities for Darlington. During 2017/18 DSAPB has been involved in joint work with the Community Safety Partnership to include safeguarding and seek assurance that services are coordinated and accessible to Gypsy, Roma, and Travelling families in Darlington. A network of service providers, commissioners and key wider partners met in January 2018 to share information and create clear contact routes for partners and act as a reference point for the Safeguarding Boards, the Health and Wellbeing Board (HWB) and the Community Safety Partnership (CSP).

The network meeting focussed on safeguarding recognising that safeguarding practice and risk assurance applies across all minority groups and the network will bring together key partners to clearly articulate the routes for partners to the range of risk assessment and multi-agency forums which exist and explore options for service improvement. The partnership has also proposed to focus on Domestic Abuse and Sexual Violence to establish the current multi-agency position on reducing the prevalence of domestic abuse and identify the co-ordinated community response on prevention, support and protection services as well as establishing how perpetrators are dealt with.

The Independent Chairs of both Safeguarding Boards will present their annual reports to the Health and Wellbeing Board and will ensure there are relationships with the Community Safety Partnership. Where possible the Boards work together on specific projects for example training, media and communication messages, policies, conduct of reviews and sharing learning from the outcomes to inform practice.

Engagement with minority communities

In 2017 the Independent Chairs of the DSAPB and DSCB sought assurance through the Strategic Partnerships that Gypsy, Roma and Travellers (GRT) were able to access services in Darlington. In January 2018 a network of service providers, commissioners and wider partners met to share information and create clear contact routes for partners and act as a reference point for the Safeguarding Boards, the Health and Wellbeing Board and the Community Safety Partnership. The network recognises the needs of the GRT community whilst acknowledging there are other groups in Darlington who have needs and face barriers to equitable services. The concerns raised by the Independent Chairs in respect of safeguarding were recognised and this is now the first consideration of the network in recognising that safeguarding practice and risk assurance applies across all minority groups.



Multi-Agency Safeguarding Policy and Procedures

The Policy and Implementation sub-group reviewed and comprehensively revised the Multi-Agency Safeguarding Policy and Procedures which are available on the safeguarding boards' website. The policy has been updated to reflect recent changes in practice guidance and include learning from local and national case reviews and there is particular emphasis on the four stages of a safeguarding enquiry. The procedures are designed to assist members of the public to recognise and report abuse and neglect and guide professionals who work with adults who have care and support needs. The procedures are available at the Safeguarding Boards' website:

www.darlington safeguarding boards.co.uk/adults-safeguarding-board/professionals/safeguarding-adult-multi-agency-policy-and-procedures.

Practitioner Forums

The DSAPB has continued to hold Practitioner Forums throughout 2017/18. The purpose of the Chair's forum is to allow practitioners to share with the Independent Chair their views and experience of safeguarding practice in Darlington, in particular what is working well and what needs to change. This enables the Board to have a better understanding of the challenges facing frontline practice and help practitioners understand and inform the work of the Board. The forums have identified that practitioners believe that overall there are effective working relationships between partner agencies in Darlington and there is evidence of good safeguarding practice and partnership working within County Durham and Darlington Fire and Rescue Service.

County Durham and Darlington Fire and Rescue Service

County Durham and Darlington Fire and Rescue Service make a significant contribution to the prevention of abuse and neglect in Darlington. The Fire and Rescue Service is ideally placed to identify adults who may be at risk of abuse and neglect, including self-neglect and has developed strategies to engage adults at risk and support them in making changes to their environment and lifestyle to reduce risk. Since April 2017 a strategic representative from County Durham and Darlington Fire and Rescue Service has attended Board meetings as a non-statutory member.

Joint Board member induction pack

In 2017 the Policy and Implementation sub-group reviewed and revised a joint Board member induction pack which has been developed to provide new Board Members and Lay Members with an introduction to their roles and responsibilities and to provide an overview of the functions of both the Darlington Safeguarding Children Board (DSCB) and the Darlington

Safeguarding Adults Partnership Board (DSAPB). Board members are crucial to the Boards being able to meet their statutory duties and it is important that members feel able to contribute at Board meetings, to be in a position to promote the aims of the DSCB/DSAPB, to hold their organisation to account, to commit resources, to make decisions on policy and practice, and to have an understanding of the issues facing front line practitioners.

What we are doing in 2018/19:

- Recruiting a new Lay member to Board
- Continuing the Practitioner Forums to 'capture the voice' of the practitioner
- Considering the implications of the Children and Social Work Act 2017 and the changes in governance of the Darlington Safeguarding Children's Board and the implications for DSAPB.
- In conjunction with the Community Safety Partnership consult upon the local Domestic Abuse and Sexual Violence Plan and develop multi-agency policy and practice guidance on Domestic Abuse.



Outcome 6 - Accountability

Accountability and transparency in safeguarding practice

The Board agreed it would:

Review the Terms of reference which sets out how agencies will work together to cooperate to deliver on its statutory responsibilities. It will ensure it published Safeguarding Adult Reviews which meet the criteria as outlined in the Care Act and to provide a bi-monthly message bulleting to communicate the work of the Board publically to ensure it is being accountable and transparent in delivering safeguarding.

Terms of Reference

In November 2017 the DSAPB reviewed and revised the Terms of Reference (ToR) and governance arrangements for the Board. The Independent Chair of the DSAPB or appropriate representative attends Council Scrutiny Committees as required to discuss the work of the Board and adult safeguarding issues. As a minimum the DSAPB Annual Report is presented to the Adults Housing Scrutiny Committee. In addition, the Chief Executive and Chief Officers across the partnership receive regular updates of the DSAPB strategic plan and any challenges. The DSAPB Annual Report is also shared with the Health and Wellbeing Board (HWB).

Safeguarding Adult Reviews (SARs)

The Board has a duty to conduct Safeguarding Adult Reviews (SARs) which are reviews that examine the way agencies and individuals that have been involved with an adult at risk have acted in cases where an adult with care and support needs has suffered significant harm as a result of abuse or neglect. The purpose of a SAR is to identify learning that will bring about improvements so that the likelihood of future harm to adults at risk is minimised. The Board may also arrange a review of any other case involving an adult in its area with needs for care and support with a view to identify lessons to be learned from the adult's case and to apply the learning to future cases. In addition, cases where there is good practice can also be considered to identify learning that can be applied to future cases.

In 2017/2018 DSAPB examined one case where a vulnerable adult diagnosed with a learning disability and dementia had died as a result of choking on food in a residential care home in March 2016. It was agreed that the case did not reach the threshold for a Safeguarding Adult Review (SAR) or a Learning Lessons Review (LLR). The case was referred to the Learning Disabilities

Mortality Review (LeDeR) Programme which is a service commissioned by NHS England to support the review of deaths of people with a learning disability to identify common learning points and provide support to local areas in the development of action plans to take forward lessons learned. The LeDeR review identified a number of single agency recommendations for the residential home setting which have been implemented.

Safeguarding Adult Review (SAR) Gladys

In April 2017 the report and findings of a Safeguarding Adult Review (SAR) in respect of Gladys were published. Gladys was an eighty six year old lady with mixed Alzheimer's disease and vascular dementia who sadly died in care home following a succession of falls. The DSAPB commissioned a Safeguarding Adult Review and the findings of which were reported to Board in March 2017. The Adult Learning and Improvement Group developed a briefing document which summarises the learning points from the SAR. The main areas for learning involve communication between professionals. The briefing document can be accessed here at the Safeguarding Boards' website. The learning from the review has been shared locally and nationally and has been embedded in the multi-agency training programme.





DSAPB newsletters

In 2017/18 the DSAPB published a bi-monthly messages bulletin which highlights key messages and communicates the work carried out by the Board. This has improved communication with practitioners throughout the partnership and highlights the purpose of the Board and the work that is carried out by the partnership. The bulletin has been available on the Safeguarding Boards website where it is accessible to the wider community as well as partner agencies and practitioners. The newsletter is also circulated electronically throughout the partnership and is shared with the Safeguarding Adults Managers at monthly meetings.

Workforce Stability

Board members were provided with an overview of the multi-agency position in relation to workforce stability across the three main agencies, notably Health (commissioners and providers), Durham Constabulary and Darlington Borough Council as it was recognised that any fragility in the multi-agency workforce such as front-line staff and leadership may impact on safeguarding. The Board commissioned the report to understand which areas of the workforce are stable and to establish where there are any issues either now or potentially in the future.

Board members were provided with the assurance that all agencies have robust workforce strategies and arrangements in place to monitor staffing levels and workforce pressures. Pro-active plans are in place across the partnership in relation to recruitment and retention of staff, including the promotion of the North as a place to live and work.

What we are doing in 2018/19:

- Conducting a multi-agency thematic audit in respect of self-neglect
- Continuing to maintain progress on the more challenging actions identified within SAR's and LLR's
- Conducting an impact evaluation survey
- Improving links and communication between sub groups

Conclusion

The vision of the Board is to ensure that Darlington is an increasingly safer place for adults at risk of abuse and neglect. The six key principles underpin all adult safeguarding and in accordance with the three year Strategic Business Plan (2017-20) throughout 2018/19 the Board will continue to focus its strategic priorities on these principles.

The Board will work closely with the DSCB to monitor the progress of the discussions concerning the legislative framework for the new safeguarding arrangements which will be introduced by September 2019 in accordance with the Children and Social Work Act 2017. This will ensure that best practice is also reflected in the work of the DSAPB.

SEE IT, HEAR IT, REPORT IT!

If you are being abused or if you think someone you know is being abused:

- In an emergency contact Durham Constabulary on 999
- If a crime has been committed contact Durham Constabulary on 101
- You can report the abuse of an adult with care and support needs to Adult Social Care using the First Point of Contact on 01325 406111
- If you need urgent help outside office hours or at the weekend or on Bank Holidays contact the Emergency Duty Team on 01642 524552

Appendix 1

Organisations represented on the Board. The attendance of each Board member at the bi-monthly meetings is indicated in brackets within the table.

Current Membership	Representative
Darlington Borough Council	Director of Children and Adult Services (4) Assistant Director Adult Social Care (6) Assistant Director Commissioning, Performance and Transformation (1) Director of Public Health (6) Lead Member for Adult Safeguarding (5) Assistant Director Housing and Building Services (6) Principal Lawyer (2) Head of Service Adult Social Care (5)
Durham Constabulary	Detective Chief Inspector (3)
Durham and Darlington Clinical Commissioning Group (CCG)	Director of Nursing and Quality (4) Designated Nurse Safeguarding Adults (5) Safeguarding Adult Lead (as Chair of ALIG) (4)
County Durham and Darlington NHS Foundation Trust (CDDFT)	Associate Director of Nursing for Patient Experience and Safeguarding (3) Safeguarding Lead Nurse (3)
Community Rehabilitation Company	Director of Operations (2)
County Durham and Darlington Fire and Rescue Service (CDDFRS)	Group Manager (6)
National Probation Service	Head of County Durham National Probation Service (4)
Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV)	Associate Director of Nursing (5)
Healthwatch	Development Manager (2)
Care Quality Commission (CQC)	Inspection Manager (4)
North East Ambulance Service (NEAS)	Memorandum of Understanding
NHS England	Memorandum of Understanding

Appendix 2

The following table outlines the achievements of the four sub-groups in 2017/18:

Policy and Implementation sub-group
<ul style="list-style-type: none"> Review and comprehensive revision of the Multi-Agency Safeguarding Policy, Procedures and Practice Guidance with particular emphasis on the four stages of an investigation which is available on the Safeguarding Boards' website Implementation of the Managing Allegations Policy and Practice Guidance The development of Multi-Agency Self-Neglect practice guidance Development of Professional Challenge practice guidance Development and implementation of a revised Executive Strategy protocol Review and revision of the Joint Board Member Induction Pack The Information Sharing Protocol agreed and signed by partner agencies Development Modern Slavery practice guidance (jointly with DSCB) currently awaiting a Memorandum of Understanding developed jointly with County Durham Safeguarding Adults Inter-Agency Partnership and Durham Constabulary Jointly with County Durham Safeguarding Adults Inter-Agency Partnership the development of a sexual exploitation referral pathway
Adult Learning and Improvement sub-group
<ul style="list-style-type: none"> Publication of the SAR 'Gladys' Dissemination of learning from LLR Adult 2 to domiciliary care providers Monitoring and support of progress of the implementation of action plans for SAR Gladys and LLR Adult 2 Development and dissemination of Lessons Learned briefing documents in respect of LLR Adult 2 and SAR Gladys and dissemination across all relevant agencies Liaison with the multi-agency training group to ensure that lessons learned from SARs/LLRs is incorporated in training Liaison with the Policy and Implementation sub-group to ensure that learning from SARs and LLRs is incorporated in multi-agency policy and practice guidance Development of a template for collating themes and lessons learned from national and regional SARs and LLRs In February 2018 jointly with the DSCB held a Children's and Adults Workshop on learning from serious incidents. Ongoing work to review and revise the SAR Protocol Referral of the death of an adult with learning disabilities to the Learning Disabilities Mortality Review (LeDeR) Programme as the case did not meet the criteria for a SAR/LLR. The LeDeR review identified a number of single agency recommendations for the residential home setting which have been implemented.

Quality and Performance sub-group

- Development of a revised multi-agency data set which now includes analysis of the data by all organisations and the development of a performance reporting timeline
- Multi-Agency Safeguarding Audit methodology and revised audit tool developed
- Multi-Agency safeguarding audit completed including moderation and analysis of the audit findings which were reported to Board in March 2018 (conducted jointly with DSCB)
- Terms of Reference for the multi-agency thematic self-neglect audit agreed
- Adult Social Care case file audit of safeguarding concerns
- Review of the process used to capture the feedback of service users involved in a safeguarding enquiry to provide Board with a better understanding of the service user's experience of the safeguarding process
- The allocation of a social worker independent of the investigation to review service users response to the 7 questions and feedback regarding the safeguarding enquiry to improve Boards understanding of the experience of service users

Training, Communication and Voice of the User sub-group (joint with DSCB)

- Workforce stability report presented to Board
- Communications implementation plan agreed and developed
- Review and revision of the Communication and Engagement Strategy
- Review and revision of the Training Charging Policy
- Progression of the e learning package to incorporate PREVENT and CSE training
- Development and circulation of an information leaflet designed for adult service users and families
- Ongoing development of the Safeguarding Boards website and wider circulation of the safeguarding Boards' newsletter to share messages from the Board
- Ongoing review of the remit of the Training, Communication and Voice of the user sub-group

Appendix 3

Partner Contributions in 2017/2018

	2017/2018
Darlington Borough Council	£14,663.00
Durham Constabulary	£12,731.05
Darlington Clinical Commissioning Group	£14,305.00
County Durham and Darlington NHS Foundation Trust	£14,448.00
Training income	£6,690.00
Total Revenue received in 2017/2018	£62,893.05

The table above evidences how partners have met the budgetary requirements in 2017-2018. The table summarises the direct monetary contributions from partners but does not take into account members time or the use of rooms (provided free of charge). It is important to recognise the many other ways members and their staff contribute to the Board, for example attendance at sub-groups, participating in audit and quality assurance work, access to additional resources and designated roles. It should be noted that the cost of safeguarding adults at risk is significant and the DSAPB is therefore grateful to all of the partners who have fulfilled their commitment to fund and contribute to the work of the partnership.

Appendix 4

Glossary of Terms

ALIG - Adult Learning and Improvement Group
BME - Black and Minority Ethnic
BTP - British Transport Police
CCG - Clinical Commissioning Group
CEO - Chief Executive Officer
CDDFRS - County Durham and Darlington Fire and Rescue Service
CDDFT - County Durham and Darlington NHS Foundation Trust
CQC - Care Quality Commission
CRC - Community Rehabilitation Company
CSE - Child Sexual Exploitation
CSP - Community Safety Partnership
DBC - Darlington Borough Council
DBS - Disclosure and Barring Service
DSAPB - Safeguarding Adults Partnership Board
DSCB - Darlington Safeguarding Children Board
FGM - Female Genital Mutilation
GRT - Gypsy Roma and Travelling Community
HMICFRS - Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services
HWB - Health and Wellbeing Board
HWD - Healthwatch Darlington
LA - Local Authority
LLR - Learning Lessons Review
LeDeR - Learning Disabilities Mortality Review
LSCB - Local Safeguarding Children Board
MARAC - Multi-agency Risk Assessment Conference
MCA - Mental Capacity Act
MSP - Making Safeguarding Personal
NEAS - North East Ambulance Service
NECA - Darlington Recovery and Wellbeing Service
NHSE - National Health Service England
NICE - National Institute for Health and Care Excellence
NPS - National Probation Service
PCVC - Police Crime and Victim Commissioner
RCA - Root Cause Analysis
SAB - Safeguarding Adults Board

SAR - Safeguarding Adults Review

SCR - Serious Case Review

TOR - Terms of Reference

TEWV - Tees Esk and Wear Valley NHS Foundation Trust

YMCA - Young Men's Christian Association

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We have incorporated hyperlinks where possible to take you to additional information and/or further details. If you are not able to access this then please contact us to arrange for the information to be made available. In addition, if you require this report in an alternative format, please contact the Joint Safeguarding Boards' Business Unit as above.

We would welcome feedback and this can be made to either the DSAPB Independent Chair or by contacting the Joint Safeguarding Boards Business Unit on 01325 406450, address as above or by e-mail

This Annual Report will be shared with the following partner agencies:

- The CEO and Leader of the Local Authority
- Police, Crime and Victims Commissioner (PCVC) and the Chief Constable of Durham Constabulary
- Healthwatch Darlington
- The Chair of the Health and Wellbeing Board
- County Durham and Darlington Foundation Trust (CDDFT)
- Clinical Commissioning Group (CCG)
- Tees Esk and Wear Valley Foundation Trust (TEWV)

The 2017/18 Annual Report will be presented to the Adults and Housing Scrutiny Committee to give an opportunity for wider engagement and scrutiny by Councillors.

Partner agencies are encouraged to have a link to the DSAPB Annual Report via their websites to improve accessibility.

The report is published on the DSAPB website:
darlingtonsafeguardingboards.co.uk



DEPRIVATION OF LIBERTY UPDATE

SUMMARY REPORT

Purpose of the Report

1. To provide an update on Deprivation of Liberty Safeguards (DoLS) and Deprivation of Liberty in supported living and home environments, including outcomes for people.

Summary

2. DoLS came into force in England and Wales on 1 April 2009. They were introduced as amendments to the Mental Capacity Act 2005 (MCA) via the Mental Health Act (MHA) 2007). They were a response to a breach of the European Convention on Human Rights (ECHR). The ECHR found that UK law did not give adequate protection to people who lacked mental capacity to consent to care or treatment and who required some restrictions on their liberty to keep them safe.
3. DoLS are a legal framework which exists to ensure that individuals who lack the mental capacity to consent to the arrangements for their care, where such care may (because of restrictions imposed on an individual's freedom of choice or movement) amount to a "deprivation of liberty", have the arrangements independently assessed to ensure they are in the best interests of the individual concerned.
4. The Local Authority has a statutory responsibility as Supervisory Body for operating and overseeing the MCA DoLS. This includes assessing and granting, or otherwise, all DoLS authorisations received from a Managing Authorities. The Managing Authority is the person or body with management responsibility for the hospital or care home in which a person is, or may become, deprived of their liberty. It is the responsibility of the Managing Authority to request authorisation of DoLS and to implement the outcomes, comply with any conditions and monitor the Relevant Person's Representative (RPR) contact with the individual.

Recommendation

5. It is recommended that that Scrutiny note the content of this update and the implications

Suzanne Joyner
Director of Children and Adults Services

S17 Crime and Disorder	No impact
Health and Well Being	Positive impact
Carbon Impact	No impact
Diversity	No impact
Wards Affected	All
Groups Affected	All
Budget and Policy Framework	No additional budget or policy implications
Key Decision	No
Urgent Decision	No
One Darlington: Perfectly Placed	Aligned
Efficiency	No Impact
Impact on Looked After Children and Care Leavers	No impact

MAIN REPORT

Information and Analysis

The Supreme Court Judgement

6. On 19 March 2014 the Supreme Court overturned the Court of Appeal in the cases of P v Cheshire West Council and P & Q v Surrey County Council [2014].
7. The Supreme Court Judgement referred to the “acid test” to determine whether a person is being deprived of their liberty. This consists of two questions:
 - (a) Is the person subject to continuous supervision and control?
 - (b) Is the person free to leave?
8. If the person meets both these criteria then they are being deprived of their liberty.
9. The Supreme Court Judgement in effect lowered the threshold for what constitutes a DoLS. This resulted in a significant increase in the number of requests for authorisations as more individuals met the criteria for being deprived of their liberty. This is reflected in the figures below.
10. Since the Supreme Court Judgement there has been a tenfold increase in applications across England and Wales.

Darlington Figures

	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19
Granted	40	57	755	800	744	841	282 to 20 July 2018
Not granted	29	40	161	193	61	45	15 to 20 July 2018
Total	69	97	916	993	805	886	297

11. There were an additional 204 requests received for 2017/18 which did not proceed for various reasons including: incorrectly referred to DBC (should have been a different local authority), review requests, admitted to hospital, person had moved back home, admitted to hospital, discharged from hospital or had died.
12. The total number of DOLS requests for 2017/18 was 1,090 including the cases which did not proceed to authorisation. This is the total number of requests received for the year. The above column only includes the requests that progressed to an outcome of either granted or not granted.

Challenges

13. Due to the increase in the number of requests for authorisation, additional resources have been required to ensure that all necessary work is completed within timescale. If authorisations are not completed within timescales then the Local Authority is failing to meet its statutory obligations and this could place the Local Authority at risk of legal challenge. This might include judicial review or financial penalties as well as damage to reputation.
14. In order to avoid this Darlington Borough Council have taken a proactive approach to manage requests for authorisations with the aim being to complete as many as possible within timescales.
15. There are currently three full time, permanent BIA's employed by Darlington Borough Council. In addition nine other BIA's employed by Darlington Borough Council who work in other adult social care teams participate on a rota system. These staff are allocated either one or two cases per month depending on their job role.
16. At a national level, the annual report for 2017-18 is not due to be published until October 2018, but it is expected to show an increase in activity. For the year 2016-17 there was an 11% increase nationally for DoLS applications.
17. The north east region had 995 DOLS applications per 100,000 adult population. The North East is more than double the England average of 492 per 100,000 for DOLS applications.
18. Analysis of this data showed that local authorities in the North East received more applications per individual compared to other regions. 23% of individuals in the north east region received more than one DoLS application during the year, compared with 14% nationally. The proportion of authorisations granted during the year for less than 90 days duration was 24% in the north east as compared to 17% nationally. Subsequently the greater numbers of applications received in the North East region compared to other regions can be partially ascribed to supervisory bodies granting authorisations for shorter lengths of time, thereby requiring more frequent applications as each authorisation ceases.
19. There has been a significant impact on the budget for Deprivation of Liberty as it has involved using independent Best Interest Assessors (BIAs) at a considerable cost but the alternative would be leaving people unlawfully deprived of their liberty. In addition there is a cost for Mental Health Assessors as all DoLS also require assessments to be carried out by them. The costs prior to Cheshire West in 2013/14 and in subsequent years are shown below:

	2013/14	2014/15	2015/16	2016/17	2017/18
Independent BIA's	0	£84,442.84	£108,441.3 3	£154,141.8 4	£140,048.0 2

Mental Health Assessors	£56,653.90	£125,052.00	£138,420.54	£162,814.57	£143,434.24
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For the year 1 April 2018 to 20 July 2018 the figures to date are:

- Independent BIAs: £36,780.30
- Mental Health Assessors: £29,116.28

20. There has been a plan in place working towards reducing this cost by limiting our reliance on independent BIAs. This includes making better use of the BIAs within Darlington Borough Council and training more social workers. Further reductions could be made following consideration of employing one further BIA and a business case has been put forward for this which would considerably reduce the need to use independent BIAs.

Deprivation of Liberty in settings other than care homes or hospitals

21. The Deprivation of Liberty Safeguards cannot be used in settings other than care homes or hospital. However, people can still be deprived of their liberty in other settings, such as supported accommodation or within their own home. In these situations an application has to be made to the Court of Protection (COP) for the deprivation to be considered and authorised if appropriate.

Advocacy

22. The Relevant Person's Representative role is a crucial part of the DoLS to protect the right of the individual. This role offers representation, support or protection for the individual and their family to give them a voice within the system. This includes supporting challenges to authorisations or conditions. In Darlington the authorisations granted for the period 1 April 2017 – 31 March 2018, 216 cases have been represented by a paid advocate as there was not an appropriate family member to take on this role. In the year to date from 1 April 2018 to 20 July 2018 this number is 73. It should be noted that these are based on the number of authorisations during the time periods and some individuals could have had more than one authorisation during this period and the paid RPR role would continue.

Law Commission Review of DoLS

23. The government tasked the Law Commission to review the Deprivation of Liberty Safeguards. In 2017 the Law Commission found that there was a compelling case to replace the DoLS scheme. As a result the Law Commission recommended that the DoLS scheme be replaced with a new regime termed the Liberty Protection Safeguards.

24. The Mental Capacity (Amendment) Bill is intended to implement/amend these reforms and was first introduced to the House of Lords on 3 July 2018 with a second reading on 16 July 2018.

QUALITY STANDARDS MONITORING OUTCOMES 2018-2019 (YEAR 6)

**AGREEMENT FOR THE PROVISION OF RESIDENTIAL CARE
FOR ADULTS AND OLDER PEOPLE AND OLDER PEOPLE WITH
MENTAL HEALTH PROBLEMS 2013-2019**

SUMMARY REPORT

Purpose of the Report

1. The purpose of this report is to inform Adults and Housing Scrutiny Committee of the results of the quality standards visits for 2018 - 2019.

Background

2. The current Agreement for the Provision of Residential Care for Adults and Older People with a Mental Health Problem (OPMH) commenced 1 April 2013, and is in place until 31 March 2019 as the Council exercised the option to extend the Agreement for a further 3 years.
3. The Agreement was negotiated with care home providers in 2012. A programme of meetings took place throughout 2012, which looked at the Agreement, Service Specification, Quality Standards, and Fee Levels. These were reviewed in consultation with providers and their comments and feedback were used during the development period.
4. The Contracts Section worked through the service outcomes within the Agreement to produce a set of quality standards (See **Appendix A**). In addition to these standards, each care home has been independently assessed and allocated a grading which is based on environmental standards. In 2012, as part of the negotiations undertaken with providers, the number of quality standards and environmental grades were reviewed and consolidated into 10 quality standards and 3 environmental grades (listed below), which together provide a picture of the standard of care being provided in each home, and determine the fees received by the providers.

Quality Standards:

- a. Effective recruitment procedures
- b. Staff development requirements
- c. Social and leisure outcomes
- d. Plans of care requirements
- e. Nutrition
- f. Management of medication

- g. Safeguarding/Whistleblowing/DoLS
- h. Health and safety
- i. Monitoring and quality of service
- j. Clean and safe environment

Environmental grades:

Grading	Environmental Compliance Level	Number of Care Homes
Grade 1	100% compliance	7
Grade 2	75% - 99% compliance	9
Grade 3	55% - 74% compliance	1
Grade 4	Less than 55% compliance	1

5. The Quality Standards process, which forms part of the Agreement, requires two contracts officers to visit all contracted care homes for older people on an annual basis between April and June to monitor the care home against the agreed quality standards. These standards along with the home's environmental grade determine the fee level for the coming year.
6. The level of quality compliance achieved by the Care Home is then graded A - C as outlined in the table below.

GRADING	QUALITY STANDARDS COMPLIANCE LEVEL
Grade A	All 10 standards fully met
Grade B	9 standards fully met
Grade C	8 standards or less fully met

7. During the consultation, providers were also asked to complete a questionnaire on their cost breakdown, and from the financial evaluation it was determined that the formula that had been applied in the previous agreement was still financially sound to reflect the true cost of care. The formula uses the relevant agreed indices from October of each year to review the cost of care in Older Peoples Residential Care.
8. The introduction of the 'National Living Wage' from 1 April 2016 was taken in account when the Council reviewed the rates for 2016/17.
9. The previous agreement did not place any financial penalty on a provider if they breached the agreement. This was reviewed and the Agreement now states *"Where a Contractor is in breach of the Agreement and a suspension of new placements has been placed upon the Care Home during the year the Price payable will be reduced to that of quality standards Grade C from the date of the breach of Agreement letter, and this Price will remain until the breach of Agreement is resolved, and the Contractor has no restrictions on taking new admissions into the Care Home"*.

10. The fee table now contains 12 permutations ranging from 1A to 4C. The numeric grade is based on the environmental standards set in 2006, with the letters A - C being the level of standards achieved. The current table of fees is seen below:

**RESIDENTIAL FEE RATES FOR 2018 - 2019
APPLICABLE FROM 1 APRIL 2018 - 31 MARCH 2019**

GRADE	A	B	C
1	£528.00	£502.00	£475.00
2	£525.00	£499.00	£473.00
3	£501.00	£476.00	£451.00
4	£490.00	£466.00	£441.00

An additional £20 per bed per week will be paid for Older People with a Mental Health Problem

Current Market Position

11. There are currently 18 care homes signed up to the Agreement. At the outset of the financial year 2018/19 there were 19 care homes however one home went into administration in May 2018 and closed on 22 June 2018, and for the purpose of reporting an up to date position their results have not been included.
12. Following the successful transfer of 29 residents to alternative placements, the occupancy levels across all 18 homes are currently at 83%.
13. The care home closure has resulted in a decrease in the number of beds available within Darlington from 918 to 877, a reduction of 4.5%. As reported last year there remains a shortfall within the availability of nursing beds, and more specifically within nursing OPMH.
14. Last year there was a decrease in the number of homes achieving an A Grade with 9/19 homes achieving an A Grade. Following poor results achieved in 2015 the Contracts Section now undertake announced monitoring visits in November/December to look at how homes have implemented the recommendations made from the feedback given. Each home is given both verbal and written feedback from these visits. In addition the programme of visiting, any new care home manager/regional manager receives a visit from the Contracts Section for one to one sessions regarding how the quality standards process works and to ensure their full understanding of the standards and how they could be met. Managers are also encouraged to contact the team should they have any queries.

Quality Standards Results 2018/19 - (Ref Chart QS 1)

- a. 11 Care Homes gained 10 standards
 - b. 2 Care Homes gained 9 standards
 - c. 3 Care Homes gained 7 standards
 - d. 2 Care Homes gained 5 standards
15. The results of the quality standards for 2018 - 2019 demonstrates an improvement in the number of homes who have achieved an A Grade, with 11/18, (61%) achieving an A Grade compared to 9/19, (47%) last year. 5 homes have achieved less than 8

standards which is the same as last year. Individual Quality Standard outcomes have been detailed in **Appendix 2** of this report.

16. Overall 12 homes have maintained the same grade as last year, 4 homes have increased their grading, and 2 have decreased their grading.

Grade	Year 15 -16	Year 16 -17	Year 17 - 18	Year 18 - 19
A	9/21	12/19	9/19	11/18
B	6/21	2/19	5/19	2/18
C	4/21	5/19	5/19	5/18

17. Of the 11 homes achieving A Grade - 8 homes maintained their A Grades from last year, and 3 homes have improved their rating to be an A Grade. 1 previously rated A grade home has decreased their rating to a C grade.
18. Of the 5 homes that were a B Grade last year, 1 home has remained the same, 2 homes have improved their rating to an A Grade, 1 home has decreased their rating, and 1 home has now closed.
19. Of the 5 homes that were a C Grade last year, 3 homes have remained the same, 2 have improved their grading by 1 Grade.
20. Of the 5 homes rated as a C grade this year, 3 homes passed 7 standards, and 2 homes passed 5 standards.

Conclusion (Ref Table QS 2 & QS 3)

21. The overall change in compliance from last year is encouraging in respect of the increase in homes achieving an A Grade. However it is disappointing to note that 3 previously 'C' graded homes have not improved.
22. Contract Officers continue to report that where there have been changes in management, resulting in multiple managers being in a home in any one year, or where there have been significant gaps between managers, standards slip very rapidly, and it is disappointing to see this given the level of support provided by the Contracts Team.
23. Written feedback will be given to providers, and action plans will be required from each home to address all of the shortfalls. The contracts section will monitor The C Graded homes against their outcomes and action plans in November/December 2018.

Yvonne Hall - Service Manager Contracts & Brokerage ext. 5869

INDIVIDUAL QUALITY STANDARDS OUTCOMES

- a. In relation to the individual standards themselves;
- b. Only 1 of the 10 standards (Nutrition) was achieved 100%.
- c. An improvement has been identified in the number of homes achieving standards 1, 3, 4, 5, & 7.
- d. A reduction has been identified in the number of homes achieving standards 2, & 6.
- e. The same level of compliance has been identified with standards 8, 9, & 10.
- f. 6 care homes have failed standards they failed last year.

Standard 1 - Effective recruitment procedures.

This standard looks at staff recruitment processes, reference & DBS checks, and induction process including the completion of the Care Certificate within 12 weeks of start date. (The officers check the files of staff who have been recruited in the 12 - 18 months).

5 homes failed this standard compared to 7 last year.

The homes that failed this standard had either no evidence or insufficient evidence to demonstrate that staff had commenced and completed the Care Certificate within the recommended 12 week timeframe. Some homes had made no checks in relation to staff that came with an NVQ qualification to determine that they were competent in all areas of the Care Certificate. This can easily be achieved by applying the self-assessment toolkit Skills for Care recommend.

In addition to this, there were anomalies identified in respect of recruitment checks such as references from previous employers, and a lack of training needs assessments.

Standard 2 - Staff Development Requirements.

This standard looks at training and development, including staff members having a learning and development plan, 75% of staff having NVQ qualifications, bi-monthly staff supervisions and annual appraisals.

4 homes failed this standard which is an increase since last year.

The common shortfall in this standard remains the same as in previous years, in relation to the staff having no learning and development plans, and an inadequate number of supervisions. 1 home did not have the required number of staff trained to NVQ level 2 or above.

Since last year's visits 3 of the 4 homes have had a change in management, and from experience this is one of the first areas to suffer when there are management changes in the home.

Standard 3 - Social and Leisure Outcomes.

This standard looks at social activities, a dedicated activity co-ordinator role in the home, social and leisure outcomes for residents, including resident's involvement in care planning and risk assessment.

1 home failed this standard, compared to 2 last year.

Standard 4 - Plan of Care Requirements.

This standard looks at key workers, risk assessments, care plans, and the requirement for a pre assessment of needs followed by full assessment of the residents need being completed within 48 hrs of admission. Care plans for physical, mental health, social, emotional needs are required to be completed within 72 hours of admission & reviewed monthly as a minimum.

1 home failed this standard, compared to 3 last year.

The home did not have any record of pre-admission assessments for 4 of the residents.

Care plans had been completed within the 72 hour timescale for 4 of the 9 individuals, some had been completed outside of this timescale however the care plans for 1 resident who had been admitted on 14/05/18 did not have completed information until over a week later. There was a care plan audit on file dated 17/05/2018 which stated that all actions were to be completed within 72 hours, which was clearly not the case. In addition there was an inconsistent approach in relation to the timescales for the completion of risk assessments.

There was a care plan audit process in place but there was not much evidence on file to show that many had been completed since February 2018.

It was also noted that there had been a change in management of the home in the first 6 months of this year, and a reorganisation of senior management posts.

Standard 5 - Nutrition.

All homes passed this standard.

This standard is monitored by the Focus on Under Nutrition team (FoUN), who has provided training and support to care homes on this initiative. They visit each home annually and if they meet the requirements of FoUN the home is given a certificate. If they do not meet the required standards the home will not be issued with a certificate until it does.

Standard 6 - Management of Medication.

This standard looks at the Policies and Procedures for medication management in the home, and that these correspond with the medication system the home adopts. This includes six-monthly competency checks for all staff who undertake medication administration, reviewing residents who are on anti-psychotic drugs, staff signature checks, and clear identifiable information on the Medication Administration Records (MAR) for each resident.

5 homes failed this standard, 4 more than last year.

The common failure in this standard across all 5 homes is in relation to competency checks for staff responsible for administering medication. None of the homes had undertaken the required number of competency checks. 2 homes had revised company

policies that required annual competency checks, however the requirement for 6 monthly checks has been an integral part of this standard since the contract commenced.

In addition it was also observed that;

- a. 1 home, staff had not had any annual refresher training on the Boots monitored dosage system (MDS) system that the home use since 2016.
- b. 1 home had changed pharmacy supplier from Boots to Averroes and there was no evidence that staff had undertaken training in relation to the Averroes system of drug management.
- c. 1 home did not have relevant care plans in place for the management of anti-psychotic drugs.

Standard 7 - Safeguarding & Whistleblowing.

This standard looks at training in respect of adult safeguarding at both level 1 and Level 2, Mental Capacity Act (MCA) and Deprivation of Liberty's (DoLS) training and how the home manages safeguarding.

1 home failed this standard, compared to 2 last year.

Records indicated that only 61% of staff had received Level 1 safeguarding training. No-one had received Level 2 safeguarding training, although the manager and deputy were booked on a course following the visit, however the manager had been in post since Sept 2017. There was also a shortfall in the numbers of staff trained in the MCA and DoLS. Of the residents' files examined 50% did not have the safeguarding threshold document in place.

Standard 8 - Health & Safety.

This standard looks at Health & Safety (H&S), risk assessments, action plans for heat wave, cold weather and business continuity, H&S training, moving and handling training, food hygiene, safeguarding. It also includes inspection reports & service checks in respect of fire, gas and electric, water, food hygiene, and service records for lifting equipment.

2 homes failed this standard, which is the same as last year. Neither of the homes that have failed this year, had failed last year.

The reasons that homes have failed to meet this standard varied across the 2 homes;

- a. 1 home had undertaken a fire risk assessment, with the result showing a moderate rating, however there was no information available to confirm the completion of the actions identified. Evidence provided showed that 'costings had been requested'. In addition the emergency lighting had not been tested since January 2018.
- b. 1 home had not been recording water temperatures weekly on a number of occasions, and fire drills had not been taking place as the maintenance person had not undertaken fire safety training. A business continuity plan was in place but no evidence that it had been tested or reviewed.

N.B. All of the above have been raised with the respective homes to action at the end of the visit.

Standard 9 - Monitoring & Quality of Service.

This standard looks at customer satisfaction, stakeholder feedback, audit checks, comments and complaints, and staff misconduct investigations.

1 home failed this standard, which is the same number as last year, however it is a different home that failed.

The home demonstrated;

- a. No evidence of feedback from families and friends.
- b. Stakeholder feedback was available but there was minimal input and it was not dated.
- c. No evidence of how the home completed the National Minimum Data Set (NMDS).
- d. No action plan from the recent CQC inspection where they were rated as 'requires improvement'. The report was published in March 2018.
- e. There was evidence of audits having taken place however there was a lack of evidence regarding actions required, and who was responsible for these along with timescales.

Standard 10 - Clean and safe environment.

This standard looks at the recruitment, induction, supervision and appraisals for ancillary staff, cleaning plans and records in respect of deep cleaning, and the quality and quantity of furnishings, bedding, and towels.

1 home failed this standard, which is the same number as last year, however it is a different home that failed.

The home demonstrated;

- a. A lack of supervision and induction plans for cleaning staff.
- b. Staff supervision records highlighted a common theme regarding staff feeling they did not have enough time to complete all of the tasks. During feedback it was identified that the domestic hours had been reduced but had now been increased.
- c. Cleaning plans in place for staff to complete, however records showed some areas had not been cleaned daily as per schedule.
- d. During a walk round the officers noted crumbs/debris on the floors and some malodour present. 1 toilet was out of use, and the staff toilet bin was overflowing onto the floor.

Quality Standards Year 6
2018 - 2019

QS 1

	Effective Recruitment Procedures	Staff Development Requirments	Social and Leisure Outcomes	Plan of Care Requirements	Nutrition	Management of Medication	Safeguarding Whistleblowing & DOLs	Health and Safety	Monitorin g and Quality of Service	Clean and Safe Environment	Total met
HOME	1	2	3	4	5	6	7	8	9	10	
Care Home 1	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	10
Care Home 2	Green	Green	Green	Green	Green	Red	Green	Green	Green	Green	9
Care Home 3	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	10
Care Home 4	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	10
Care Home 5	Red	Green	Green	Green	Green	Green	Green	Green	Green	Green	9
Care Home 6	Red	Red	Green	Green	Green	Red	Green	Red	Green	Red	5
Care Home 7	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	10
Care Home 8	Red	Green	Green	Green	Green	Red	Green	Red	Green	Green	7
Care Home 9	Red	Red	Red	Green	Green	Red	Green	Green	Red	Green	5
Care Home 10	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	10
Care Home 11	Red	Red	Green	Green	Green	Green	Red	Green	Green	Green	7
Care Home 12	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	10
Care Home 13	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	10
Care Home 14	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	10
Care Home 15	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	10
Care Home 16	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	10
Care Home 17	Green	Red	Green	Red	Green	Red	Green	Green	Green	Green	7
Care Home 18	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	10
18 homes											
% homes met standard	72%	78%	94%	94%	100%	72%	94%	89%	94%	94%	

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**Residential Fee Levels
2018/2019**

QS 2

Comparison by Year

Name of home	2015	2016	2017	2018
Care Home 1	2A	2A	2A	2A
Care Home 2	2B	2C	2C	2B
Care Home 3	2A	2A	2A	2A
Care Home 4	2A	2A	2A	2A
Care Home 5	1A	1A	1B	1B
Care Home 6	1C	1C	1C	1C
Care Home 7	2A	2A	2A	2A
Care Home 8	1B	1B	1A	1C
Care Home 9	4C	4C	4C	4C
Care Home 10	1B	1A	1A	1A
Care Home 11	2C	2B	2C	2C
Care Home 12	3A	3A	3B	3A
Care Home 13	2A	2A	2A	2A
Care Home 14	1B	1A	1A	1A
Care Home 15	1B	1A	1A	1A
Care Home 16	2A	2A	2B	2A
Care Home 17	1C	1A	1B	1C
Care Home 18	2B	2C	2C	2A

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ADULT SOCIAL CARE TRANSFORMATION PROGRAMME

SUMMARY REPORT

Purpose of the Report

1. The purpose of this paper is to update Scrutiny on the progress of the Adults Social Care Transformation Programme, which was last reported in April 2018.

Summary

2. The Care Act provides the context to review and implement a new, clear operating model for adult social care services, which can be owned and understood by staff, service users and carers, and which can deliver good quality services at a sustainable cost.
3. This Transformation Programme is enabling this sustainable operating model to be delivered in Darlington and deliver efficiencies which will support the delivery of the Medium Term Financial Plan (MTFP).

Recommendation

4. It is recommended that :-
 - (a) Scrutiny Committee note the progress on plans to transform Adult Social Care.
 - (b) Scrutiny Committee participates as a key stakeholder group as and when Member input is required during the transformation programme.
 - (c) Members ask any questions and request further information.

Suzanne Joyner
Director of Children and Adults

Background Papers

MTFP

Elaine Taylor: Extension 6079

S17 Crime and Disorder	n/a
Health and Well Being	Adult Social Care is central to health and wellbeing
Carbon Impact	None
Diversity	If significant changes are proposed an EIA will be undertaken
Wards Affected	All
Groups Affected	People in receipt of, or potentially in receipt of Adult Social Care
Budget and Policy Framework	MTFP
Key Decision	No
Urgent Decision	No
One Darlington: Perfectly Placed	Aligned
Efficiency	New ways of delivering care have the capacity to generate efficiency

MAIN REPORT

Information and Analysis

The need for Transformation

5. As detailed in the previous updates the need for Transformation arose due to:-
 - (a) The need to modernise adult services in Darlington
 - (b) Changes in local demographics, which impacts on resources
 - (c) To ensure that we support people to remain as independent as possible, at home
 - (d) Increasing pressure on Adult Social Care budgets

Programme objectives

6. To develop a new operating model that will be sustainable going forward.
7. The associated work continues to be delivered through a systematic and controlled delivery of projects and task and finish activities that are separated into 4 work streams:-
 - a) **Managing Demand** – Focussing on a robust preventative approach which is delivered through effective signposting and self-screening; an effective first point of contact and improved use of assistive technology. Enabling independence will divert those at risk of becoming vulnerable due to health and care needs away from dependence on formal care systems. Individuals will be able to access information and advice to help them manage their care needs. They will know what support networks are available to them locally, what they are entitled to, and who to contact when they need help.
 - b) **Maximising Independence** - The reduction in reliance on formal care settings is paramount to a sustainable future care model, focussing on a strength based approach to assessment; aiming to maintain independence for as long as possible; delivering care at the right point in an individual's circumstances, in their own home where possible and ensuring effective use of community resources and social prescribing. This combined with defined periods of reablement interventions when there is a change in circumstances, to get people back to normal function where possible. Where joint care is required, strong partnership working supports the individual to receive joined up care, regardless of the funding.
 - c) **Self-Directed Support** – Implementation of an effective Resource Allocation System along with effective use of personal budgets and direct payment across the population to enable purchase of specialist service provision, where this is more cost effective than contracted services. This combined with effective use of the eligibility criteria should ensure cost effective use of resources.
 - d) **Effective and Responsive Best Value Provider Economy** - To ensure a thriving, varied social care market within Darlington where providers offer continuously improving, high-quality, safe and innovative services. This includes work to develop markets for care and support that are sustainable over time. The work will have regard to ensuring a sufficiency of provision in terms of both capacity and capability to meet anticipated needs for all people in their area needing care and support regardless of how they are funded. The market will support the increased use of direct payments.
8. These work streams are underpinned by a number of cross cutting projects that are required to support the changes in service delivery:

- (a) **Workforce** – supporting staff to achieve a different approach to the provision of social care through cultural change, leading to supporting positive risk taking and a focus on strengths and the delivery of just enough care at the right time to support independence. Training and workforce development in support of a changed culture and approach to service delivery with effective recruitment and retention that attracts good quality candidates and develops high quality staff. Backed up with quality practice and procedure guidance that is well communicated and useful to staff and a clear policy and criteria to support staff taking a strength-based positive risk-taking approach.
- (b) **Business Process Reengineering** – Effective processes to be put in place to support social care staff in practice, maximising the time they can spend with clients, including effective and improved reporting and improved business intelligence. This coupled with effective use of ICT systems and mobile working to produce a LEAN working system with systematic removal of waste and increased value added work with clients.

Programme Deliverables and Progress

- 9. The programme is progressing well with some work now complete and many more nearing completion.
- 10. The programme is regularly reviewed and new work added; project completed; the scope of pieces of work widened as applicable, all done via stringent change control methodology.
- 11. Overall the Transformation Programme remains on track with further quantifiable progress in many areas relation to:-
 - (a) Strength based package reviews continue to progress well
 - (b) Reablement pathway improvements are now fully scoped with many changes have been implemented
 - (c) First point of contact changes are in progress
 - (d) Short Stay bed usage, new process for staff and new performance monitoring in place to accompany the guidance
 - (e) Practice guidance and policy/procedure review – document is completed and is in the process of being signed off by Adults SLT.
 - (f) DTOC validation and implementation of E-Notifications from health are nearing completion.
- 12. Projects which have been completed since the last update are:-
 - (a) Mobile/agile working has now been rolled out in Adults to all social care staff
 - (b) The Just Checking Assessment tool has been implemented and is transitioning to business as usual,
 - (c) Improvements to Validation Forum are well embedded and although this has transitioned to business as usual, improvements are still being made such as implementation of Chairs Guidance to ensure consistency of approach.
 - (d) Directory of Services is live.
 - (e) Review of the eligibility criteria in relation to medication is complete.
 - (f) Review of housing links with ASC has been completed and meetings streamlined to ensure more efficient communication and case discussion.
 - (g) The Transitions pathway review from Childrens to Adults is now complete.
- 13. The budget position is also in a much healthier position, with targets being over achieved in this financial year.

14. A high level summary of the progress against each work stream and their associated projects is provided in the table below:

Work stream	Project/Deliverable	Delivery Date	Lead	Status
				S=Service Led C=Commissioning Led F=Finance Led
Managing Demand	An online community directory	Nov 2017	C	Complete – now business as usual
	An online self-assessment and screening tool (the portal):-	Nov 2018	S	Not live – technical issues to resolve
	<ul style="list-style-type: none"> Care Need Screening Financial Contribution Screening On line Financial Assessment 	Nov 2017 Nov 2017 Apr 2018	S	Design Complete Design Complete Design Complete
	Implementation of Just Checking assessment tool as a default screening at assessment stage	Oct 18	C	Complete- transitioning to Business as usual
	A vibrant voluntary community sector, groups and networks (BCF)	Nov 2018	C	In progress
	A realigned single front door Review of service Implementation of new model	Nov 2017	S	In progress Complete Not started
	Strengthen validation forum arrangements	Sept 2017	S	Complete – now business as usual
	Section 117 Aftercare & risk	Apr 2017	C	Complete
	Vane House/Sensory Impairment Review	Aug 2019	S	In progress
	E Notifications from health & DTOC verification (BCF)	Oct 2018	S	In progress
	Maximising Independence	Strength based review of Care Packages	On going	S
Financial contributions towards S117 packages of care		Jan 2019	S	In progress
Intermediate care provision & Reablement Review DBC		Sept 2018	S	In House-Complete Health-In Progress
Implementation Commissioned Beds review (BCF)		Dec 2018	S C	In progress Not Started
Short stay beds		Nov 2018	S	In progress
Transformation Team desk top review		Aug 2018	S	Complete
Self-directed support	Resource Allocation System	Jan 2019	F	In progress
	Eligibility criteria	Dec 2017	S	Complete
	Direct Payment phase 1	Dec 2018	C	Complete
	Direct payments phase 2		C	Being scoped
An effective, responsible and best value provider economy	Refresh the Market Position Statement & Commissioning intentions 17/18	Mar 2018	C	Complete
	Off framework Value for money checklist	Jun 2017	C	Complete

Work stream	Project/Deliverable	Delivery Date	Lead	Status
	Review of In House Adult day opportunities/services		C	Being scoped
	Brokerage function	Jun 2017	C	Complete
	Extra Care Provision – Package reviews	Feb 2017	C	Complete
	Extra Care - Contract & Service delivery model	Nov 2018	C	In progress
	Housing Options for all ASC client groups	Mar 2018	S	Complete
	Maximising the value of DFG	Oct 2018	C	In Progress
	Review of telecare/telehealth	Mar 2019	C	In progress
	Review of Brokerage and future team development Initial Report Phase 1 Phase 2	May 2018 Feb 2019	C	Complete In progress Being scoped
Business processes	Mobile/Agile working Adults Pilot	Apr 2018	S	In progress
	Adults Roll out	Jul 2018		Not started
	Childrens roll out Phase 2	Apr 2018		In progress
	Optimisation of agile working		S	Not started
	Adults LL implementation:- Data Capture & Performance Reporting – improved Business Intelligence & Budget Reporting and PMF refresh following LL implementation	Mar 2019	P	In progress
	Transitions Pathway Review	Jan 2018	S	Complete
	Mental health pathway review		S	Not Started
	LL phase 2 – business process review		S	Not Started
ASC policy, practice guidance and local procedure review	Dec 2018	S	In Progress	
Workforce	Directorate WF Development Strategy	On-going		On-going
	Effective recruitment process			
	Staff retention			
	Leadership Capacity and Capability			
	Effective management oversight			
	Cult of innovation & Creativity			

NON-RESIDENTIAL CHARGING POLICY CONSULTATION

SUMMARY REPORT

Purpose of the Report

1. To provide Scrutiny with a summary of the changes proposed within a revised Care and Support (Charging and Assessment of Resources) for Non-Residential Services Policy.

Summary

2. Following a complaint made to the Local Government and Social Care Ombudsman (LGSO) the Council has completed a new public consultation on its charging policy relating to Non-Residential Services in respect of the treatment of income from benefits.
3. It is a requirement of the LGSO judgement that cabinet are aware that there is a choice on how the Council considers the treatment of income from benefits in The Care and Support (Charging and Assessment of Resources) for Non-Residential Services Policy.
4. Following the consultation process it is proposed that the Council will continue to treat income from all eligible benefits in the financial assessment as per the revised Care and Support (Charging and Assessment of Resources) for Non-Residential Service Policy.

Recommendation

5. It is recommended that :-
 - (a) For scrutiny to be aware of the forthcoming cabinet report in November 2018
 - (b) The Council's Policy continues to be that the default position is that all of the eligible benefits that the Council has the discretion to include in The Care and Support (Charging and Assessment of Resources) for Non-Residential Services Policy will be included.

Suzanne Joyner
Director of Children and Adult Services

Background Papers

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P Haselhurst Extension 6737
H McQuade Extension 5404

S17 Crime and Disorder	There are no crime and disorder implications in this report
Health and Well Being	This decision is likely to impact on the health and wellbeing of Darlington residents.
Carbon Impact	There are no carbon impact implications in this report
Diversity	The impact of this decision on Diversity has been considered and is laid out in the main body of the report
Wards Affected	There are no wards identified as being particularly impacted upon in this report
Groups Affected	Individuals being considered for Adult social care support will be impacted by the proposal laid out in this report
Budget and Policy Framework	This decision does not represent a change to the budget and policy framework.
Key Decision	This is a key decision.
Urgent Decision	This is not an urgent decision.
One Darlington: Perfectly Placed	This decision will not contribute to the aim of One Darlington: Perfectly Placed
Efficiency	This decision will not impact on the efficiency of the Council.
Impact on Looked After Children and Care Leavers	This report has no impact on Looked After Children or Care Leavers.

MAIN REPORT

Information and Analysis

6. Following a complaint made to the Local Government and Social Care Ombudsman (LGSO) the Council has completed a new public consultation on its charging policy relating to Non-Residential Services in respect of the treatment of income from eligible benefits.
7. Under the Care Act 2014, its guidance and associated Regulations, the Council has discretion about the treatment of income from eligible benefits for people who receive care and support in a non-residential setting (apart from prescribed benefits which the law says must be disregarded).

8. The Care Act 2014 originally stated that when taking into consideration income from benefits the Council must include income from benefits from the list below. This was the position that was put before Cabinet in November 2016.
9. In 2016 an amendment to the Care Act 2014 was made which allowed Council's to consider which eligible benefits are taken into consideration when completing a financial assessment.
10. The Council's report to Cabinet of 8 November 2016 said "Any income from the following benefits will be taken into account when considering what a person can afford to pay towards their care from their income":
 - (a) Attendance Allowance, including Constant Attendance Allowance and Exceptionally Severe Disablement Allowance
 - (b) Bereavement Allowance
 - (c) Carers Allowance
 - (d) The Care component of Disability Living Allowance
 - (e) Employment and Support Allowance or the benefits this replaces such as Severe Disablement Allowance and Incapacity Benefit
 - (f) Income Support
 - (g) Industrial Injuries Disablement Benefit or equivalent benefits
 - (h) Jobseeker's Allowance
 - (i) Maternity Allowance
 - (j) Pension Credit
 - (k) The Daily Living component of Personal Independence Payment
 - (l) State Pension
 - (m) Universal Credit (excluding any child, childcare and/or housing element)
 - (n) Working Tax Credit.
11. The report that went to Cabinet in November 2016 was factually incorrect and Cabinet were wrongly informed that they had no discretion in relation to these benefits being taken into account. Adult Social Care has now consulted on whether the Council should take income from these benefits into account as part of a financial assessment.
12. It is proposed that the Council's Policy continues to remain the same, which would be that all eligible benefits continue to be considered when completing the financial assessment.
13. It is proposed that we will also add another bullet point to this list, namely any other benefits which are not listed above and that are not classed as prescribed benefits which the law says must be disregarded.
14. The Council carried out a consultation process during the period 3 September 2018 to 1 October 2018. A letter and briefing paper was sent to all individual's receiving Adult Social Care support and information was shared across the wider community. Consultation events were held at the Extra Care Housing schemes and an open consultation event was held at the Dolphin Centre. A full equality impact assessment has been completed.
15. The council currently receives £2m of income from The Care and Support (Charging and Assessment of Resources) for Non-Residential Services Policy.

Outcome of Consultation

16. To be confirmed in November 2018 cabinet. It is to be recommended that no change to the benefits being considered during the financial assessment for an individual receiving adult social care is made.
17. Scrutiny's views on the proposal to Cabinet are requested.

WORK PROGRAMME

SUMMARY REPORT

Purpose of the Report

1. To consider the work programme items scheduled to be considered by this Scrutiny Committee and to consider any additional areas which Members would like to suggest should be added to the previously approved work programme.

Summary

2. Members will recall that, at previous meetings of this Scrutiny Committee, discussions have been held and agreement reached on areas which this Scrutiny Committee wished to undertake a number of pieces of work. Although there are a couple of areas where work is still on-going, the majority of this work has now been completed and Members are requested to consider areas where it would like to focus its work over the next Municipal Year.

Recommendations

3. It is recommended that Members note the current status of the Work Programme and consider any additional areas of work they would like to include.
4. Members' views are requested.

Paul Wildsmith
Managing Director

Background Papers

No background papers were used in the preparation of this report.

Author: Shirley Burton

S17 Crime and Disorder	This report has no implications for Crime and Disorder
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Health and Well Being	This report has no direct implications to the Health and Well Being of residents of Darlington.
Carbon Impact	There are no issues which this report needs to address.
Diversity	There are no issues relating to diversity which this report needs to address
Wards Affected	The impact of the report on any individual Ward is considered to be minimal.
Groups Affected	The impact of the report on any individual Group is considered to be minimal.
Budget and Policy Framework	This report does not represent a change to the budget and policy framework.
Key Decision	This is not a key decision.
Urgent Decision	This is not an urgent decision
One Darlington: Perfectly Placed	The report contributes to the Sustainable Community Strategy in a number of ways through the involvement of Members in contributing to the delivery of the eight outcomes.
Efficiency	The Work Programmes are integral to scrutinising and monitoring services efficiently (and effectively), however this report does not identify specific efficiency savings.
Impact on Looked After Children and Care Leavers	This report has no impact on Looked After Children or Care Leavers

MAIN REPORT

Information and Analysis

5. The format of the proposed work programme has been reviewed to enable Members of this Scrutiny Committee to provide a rigorous and informed challenge to the areas for discussion.
6. Each topic links to the outcomes and the conditions in the Sustainable Community Strategy – One Darlington Perfectly Placed:-

SCS Outcomes:

- a) Children with the best start in life
- b) More businesses more jobs
- c) A safe and caring community
- d) More people caring for our environment
- e) More people active and involved
- f) Enough support for people when needed
- g) More people healthy and independent
- h) A place designed to thrive

Three Conditions:

- a) Build strong communities
- b) Grow the economy
- c) Spend every pound wisely

7. In addition, each topic links to performance indicators from the Performance Management Framework (PMF) to provide robust and accurate data for Members to use when considering topics and the work they wish to undertake. There are some topics where appropriate PMF indicators have not yet been identified however; these can be added as the work programme for each topic is developed.
8. The topics have been grouped into three sections as follows:
 - a) Overarching e.g. Health Watch; Performance Management
 - b) Adult Social
 - c) Housing

In some cases topics have been grouped together where they are closely related such as Welfare Reform and Universal Credit.

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ADULTS AND HOUSING SCRUTINY COMMITTEE WORK PROGRAMME

2018/19

Topic	Timescale	Lead Officer	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
<p>Performance Management and Regulation</p> <p>Regular performance reports to be programmed</p> <p>End of Year Performance (including Compliments, Comments and Complaints)</p>	<p>Quarter 1 – 11th September, 2018</p> <p>Quarter 2 – 18th December, 2018</p> <p>Quarter 3 – 12th March, 2019</p> <p>Quarter 4 – End of Year – 3rd July, 2019</p>	<p>Pauline Mitchell/ James Stroyan/ Christine Shields</p>	<p>More people healthy and independent</p> <p>A safe and caring community</p> <p>Enough support for people when needed</p>	<p>Build strong communities</p> <p>Spend every pound wisely</p>	<p>Full PMF suite of indicators</p>	<p>To receive quarterly monitoring reports and undertake any further detailed work into particular outcomes if necessary.</p>
<p>Support for Adults with autism</p>	<p>Review to commence June 2017.</p> <p>Completion date September, 2018</p>	<p>Christine Shields</p>	<p>More people healthy and independent</p> <p>A safe and caring community</p>	<p>Spend every pound wisely</p>	<p>ASC 023 ASC 043 ASC 044 ASC 089 ASC 113 ASC 131 ASC 137 ASC 155 ASC 161</p>	<p>To undertake an in-depth review into the support pathway within Darlington.</p> <p>Task and Finish Review Group established.</p>

Adult Social Care Transformation Programme	30 th October, 2018	Christine Shields/ James Stroyan	A safe and caring community Enough support for people when needed	Building strong communities		Update on progress of all work streams
Adult Transport Service	TBC	James Stroyan	Enough support for people when needed	Spend every pound wisely		To look at the revised policy
Darlington Adults Safeguarding Board Annual Report	30 th October, 2018	Ann Baxter	A safe and caring community	Build strong communities	ASC 028 ASC 029 ASC 059 ASC 061 ASC 062 ASC 199 ASC 200 ASC 201 ASC 202 ASC 203 ASC 204 ASC 205 ASC 206 ASC 207 ASC 209 ASC 210 ASC 213 ASC 214	To consider the Annual Report on the work of the Board and to receive reassurance that adult safeguarding is being addressed and an effective approach is in place. To be advised of the key issues for the Board and funding.

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Quality Assessment – Annual Monitoring of local care homes for older people	30 th October, 2018 18 th December, 2018	Christine Shields	Enough support for people when needed	Spend every pound wisely		To look at the outcome of the assessment and undertake any further work if necessary. Representative of CQC to attend a meeting
Customer Engagement in Housing Services	18 th December, 2018	Pauline Mitchell	More people active and involved	Build strong communities		To look at work being done within communities and how the Customer Panel engage with new communities.
Homelessness Strategy and the Homelessness Reduction Act	July 2019	Pauline Mitchell	A safe and caring community Enough support for people when needed	Build strong communities	HBS 027	To look at the impact following the introduction of the Act. Update on current position within Darlington
Syrian Refugees/Asylum Seekers and other Refugees	18 th December, 2018	Pauline Mitchell	Enough support for people when needed	Build strong communities		To look at the support services provided.
Housing Business Plan and Housing Revenue Account	18 th December, 2018	Pauline Mitchell	A place designed to thrive	Build strong communities Spend every pound wisely. Grow the Economy		To monitor the Housing Strategy and ensure it delivers and meets its objectives. To look at the priorities for maintenance

New Build Housing	18 th December, 2018	Pauline Mitchell	A place designed to thrive	Building Strong Communities		To review new build housing and undertake visits.
Community Equipment Service	18 th December, 2018	Christine Shields	More people healthy and independent. More people active and involved	Spend every pound wisely	ASC 005 ASC 015	To monitor spend and review the operation of the contract following its award in 2015. Case studies
Welfare Reforms and Universal Credit Welfare Reforms Update Task and Finish Review established	11 th September, 2018	Pauline Mitchell/ Anthony Sandys	Enough support for people when needed More businesses and more jobs	Build strong communities Grow the economy		To look at the impact of the roll-out of Universal Credit in Darlington and the potential impact on residents and Council services.
Deprivation of Liberty Safeguards (DoLS)/Mental Capacity Act	30 th October, 2018	James Stroyan	A safe and caring community Enough support for people when needed	Build strong communities	ASC 063 ASC 064	To look at the outcomes and experiences of those who lack capacity and are subject to a DoLS and to look at how partners work together to ensure high quality services and outcomes. Update on impact following new legislation

ARCHIVED ITEMS

Quality Assurance Arrangements – Domiciliary Care	3 rd July, 2018	Christine Shields	More people healthy and independent Enough support for people when needed	Building strong communities Spend every pound wisely	ASC 157 ASC 158	To look at the quality of care of commissioned services within Darlington for residents in domiciliary care. Domiciliary Care – Update on new contract/commissioned services/reassurance demand being met
Healthy New Towns	3 rd July, 2018	Miriam Davidson/ Hilary Hall	Enough support for people when needed A safe and caring community More people active and involved	Building Strong Communities		To consider how Scrutiny can be involved

Support to Carers	11 th September, 2018	Christine Shields	More people healthy and independent Enough support for people when needed	Building strong communities		To look at the Carers Strategy and Implementation Plan and ensure that structures and services are in place to support carers in their role and to allow them to live a life of their own alongside their caring role.
Advocacy	11 th September, 2018	Christine Shields	More people healthy and independent Enough support for people when needed	Building strong communities		To look at the advocacy services provided to support individuals to get the social care support that they need Scene setting – Members mystery shopping. Possible Task and Finish review
Better Care Fund	11th September, 2018	James Stroyan/ Christine Shields	More people healthy and independent	Spend every pound wisely	ASC 08 ASC 058 (ASCOF 3e) ASC 051 ASC 038 ASC 054 Inpatient Survey GP Survey	Progress through metrics. To monitor the impact and delivery of the Better Care Fund in achieving better care for residents by preventing unnecessary hospital and care homes admissions by allowing people to live more independently in the community.

JOINT COMMITTEE WORKING – HEALTH AND PARTNERSHIP SCRUTINY COMMITTEE

Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
Telecare and Telehealth Health and Partnerships to lead	Date to be advised	Christine Shields	More people healthy and independent More people active and involved	Spending Every Pound Wisely Build Strong Communities	To be determined	To scrutinise and challenge New Models of Care
End of Life and Palliative Care Health and Partnerships to lead	Date to be advised	CDDFT/CCG	A safe and caring community Enough support for people when needed.	Spending Every Pound Wisely Build Strong Communities	To be determined	To scrutinise processes in place across agencies
Better Health Programme Health and Partnerships to lead	Date to be advised	DBC/CCG/ CDDFT	More people healthy and independent	Build Strong Communities Spend Every Pound Wisely	To be determined	To scrutinise and challenge processes in place

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JOINT COMMITTEE WORKING – HEALTH AND PARTNERSHIPS AND CHILDREN AND YOUNG PEOPLES SCRUTINY COMMITTEES

Topic	Timescale	Lead Officer/ Organisation Involved	SCS Outcome	Darlington Conditions	Link to PMF (metrics)	Scrutiny's Role
<p>Domestic Abuse</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 68</p>	Date to be advised	Miriam Davidson	<p>More people healthy and independent</p> <p>More people active and involved</p> <p>Children with the best start in life</p>	<p>Spending Every Pound Wisely</p> <p>Build Strong Communities</p>	To be determined	