

ADULTS SCRUTINY COMMITTEE
8 SEPTEMBER 2026

SAFEGUARDING – ADULT SOCIAL CARE

SUMMARY REPORT

Purpose of the Report

1. To provide Adults Scrutiny Committee with an overview of Adult Social Care (ASC) safeguarding arrangements, including the Executive Strategy Procedure, services currently subject to those arrangements, and preventative and quality assurance activity to help adults with care and support needs live safely and free from abuse and neglect.

Summary

2. This report summarises ASC safeguarding arrangements in Darlington, including the statutory duty to respond where adults with care and support needs may be experiencing, or at risk of, abuse or neglect. It explains the key safeguarding functions that support this duty, including referral and triage, Making Safeguarding Personal, safeguarding enquiries, strategy meetings, the online portal, risk notifications, provider monitoring and multi-agency information sharing. These arrangements help ensure concerns are screened, prioritised and directed to the right response at the earliest opportunity.
3. The report also explains how the Executive Strategy Procedure is used where there are serious or repeated concerns about a care provider, organisation or complex safeguarding matter. This may include concerns about medication management, care planning, risk assessment, staffing, leadership, governance, neglect or acts of omission. The report updates Members on services that have moved through, or remain subject to, Executive Strategy arrangements during 2025 to 2026, and highlights work by ASC, the Safeguarding Adults Team, contracts, commissioning and partners to identify risks earlier, improve decision-making and strengthen assurance about provider safety and quality.

Recommendation

4. It is recommended that Members:
 - (a) note the contents of this report and the role of the Executive Strategy Procedure in supporting the Council's statutory safeguarding duties under the Care Act 2014 and Darlington Safeguarding Partnership procedures; and
 - (b) receive six monthly updates on services subject to Executive Strategy arrangements, including progress against provider action plans, learning from multi-agency activity, and wider themes relating to safeguarding, quality assurance and prevention.

ASSISTANT DIRECTOR
Joss Harbron, Assistant Director, Adult Social Care

Background Papers

5. Safeguarding Adult arrangements and the Executive Strategy Procedure presentation, Rachel Watt, Service Manager; Darlington Safeguarding Partnership Adult Safeguarding Multi-Agency Policy and Procedures, including Executive Strategy Process – Responding to Serious Concerns; Adults Scrutiny Committee report, Care Homes in Executive Strategy Measures / Arrangements, February 2026.

Rachel Watt: 6304

Council Plan	The report supports the Council Plan by promoting the safety and wellbeing of adults with care and support needs and strengthening partnership working with providers and safeguarding partners.
Addressing inequalities	The Executive Strategy Procedure supports a proportionate, person-centred response to adults who may be experiencing, or at risk of, abuse or neglect. It helps ensure adults with care and support needs receive coordinated protection and that provider concerns are considered in the context of wellbeing and Making Safeguarding Personal.
Tackling Climate Change	There are no direct climate change implications arising from this report.
Efficient and effective use of resources	The Executive Strategy Procedure supports coordinated multi-agency action, reduces duplication and helps target resources where risks are highest and sustained improvement is needed.
Health and Wellbeing	The report supports health and wellbeing priorities by focusing on safeguarding adults, reducing risk and improving the safety and quality of care.
S17 Crime and Disorder	There are no direct Section 17 Crime and Disorder implications arising from this report. Where concerns indicate potential criminal offences, these are considered through the appropriate safeguarding and partner agency arrangements.
Wards Affected	All wards may be affected, as adults with care and support needs may live in, or receive services from providers operating across Darlington.
Groups Affected	Adults with care and support needs, family carers, care providers, commissioned services, partner agencies and staff involved in safeguarding adults activity.
Budget and Policy Framework	There are no direct changes to the Budget and Policy Framework. Activity is managed through existing safeguarding, commissioning, contracts and ASC arrangements.

Key Decision	This is not a key decision.
Urgent Decision	This is not an urgent decision.
Impact on Looked After Children and Care Leavers	This report has no impact on Looked After Children or Care Leavers; the current care homes in Executive Strategy arrangements are registered for individuals over 55 years of age.

MAIN REPORT

Information and Analysis

6. Safeguarding adults is a statutory responsibility under the Care Act 2014 and Care and Support Statutory Guidance. The Council must make, or arrange, enquiries where it has reasonable cause to suspect that an adult with care and support needs is experiencing, or is at risk of, abuse or neglect and is unable to protect themselves because of those needs. Darlington's approach is also guided by the Darlington Safeguarding Partnership Adult Safeguarding Multi-Agency Policy and Procedures.
7. Safeguarding is everyone's responsibility. The Council works with partners to prevent abuse, reduce risk, share information appropriately and promote the adult's views and wishes. This is known as Making Safeguarding Personal and means the adult's safety, dignity, wellbeing and desired outcomes remain central to safeguarding activity.
8. ASC performance data for 2025 to 2026 shows safeguarding activity remains significant. During the year, 956 safeguarding enquiries were started, compared with 912 in 2024 to 2025 and 1,047 in 2023 to 2024. Of these, 305 progressed to a strategy meeting, a conversion rate of 31.9%. This shows that while many concerns are received, around one third require a formal strategy meeting. It reinforces the importance of effective triage, proportionate decision-making and early identification of themes, particularly where concerns relate to provider quality, repeated incidents or wider organisational risk.
9. Routes into ASC are also changing. The online portal gives people, carers, professionals and partner agencies a digital route to raise ASC requests, including safeguarding concerns. It supports flow by receiving information in a structured way, reducing reliance on telephone contact and helping staff identify the nature of the request earlier. It also supports triage by helping staff screen and direct contacts to the right response, such as advice, signposting, a new referral, a service at the point of contact, or safeguarding consideration. During 2025 to 2026, 91 people accessed the portal, compared with 44 the previous year. The main reasons were requests for occupational therapy assessments and Care Act assessments, but portal activity also included safeguarding adult concerns. Of the 91 portal contacts, 33 either progressed to a new referral or resulted in a service at the point of contact. Although portal activity remains a small part of overall demand, the increase shows more people are using digital routes to raise issues and seek support. The portal also provides additional intelligence on risks, access and patterns of need.
10. Risk notifications are part of the preventative safeguarding approach. They capture lower-level incidents, concerns and emerging themes that may not, on their own, meet the threshold for a formal safeguarding enquiry. When reviewed alongside safeguarding

referrals, provider monitoring information, complaints, CQC intelligence and professional feedback, risk notifications can identify patterns earlier. This is particularly important where concerns relate to repeated medication errors, falls, staffing pressures, poor communication, missed care, delays in escalation or other signs of deteriorating quality. The aim is to support earlier provider intervention and reduce escalation into serious or repeated safeguarding activity.

11. The Executive Strategy Procedure is used where there are serious concerns about a provider, organisation or complex safeguarding matter. It brings relevant agencies together to share information, assess risk, agree action, monitor improvement and decide when there is enough assurance to conclude the process. It does not replace individual safeguarding enquiries, which continue where an adult at risk needs a personal safeguarding response.
12. The procedure may be used where there are repeated safeguarding concerns, serious issues identified through contract monitoring, significant Care Quality Commission concerns, whistleblowing, or evidence of wider unsafe practice. It provides a structured way to review the overall safety, leadership, governance and quality of a service.
13. During 2025 to 2026, two services progressed out of Executive Strategy arrangements after improvement was evidenced. One was a residential service for adults, most of whom were living with mental health difficulties, where concerns included care planning, risk assessment, admissions, management stability and neglect. Key learning included the need for robust admissions processes, consideration of people already living in the service, and the right staff skills to meet people's needs safely. A second residential service for people with a learning disability improved its management arrangements and supported one person to move to a more suitable setting, reducing safeguarding concerns and supporting the wellbeing of others living there.
14. There are currently two care homes in Darlington subject to Executive Strategy arrangements. To protect confidentiality, they are referred to as Care Home 1 and Care Home 2. Both provide care to adults with care and support needs and have required sustained multi-agency oversight because of recurring safeguarding and regulatory concerns.
15. Care Home 1 is a residential and nursing care home with capacity for just over 40 residents. It has been subject to Executive Strategy oversight since December 2024 and remains relevant to the 2025 to 2026 reporting period. Concerns have included medication management, clinical governance, staffing, leadership, care planning, record keeping, pressure area care, equipment, and the recognition and escalation of deteriorating residents. The home has also experienced organisational instability and has operated at reduced occupancy to support closer oversight and safer staffing.
16. The multi-agency response for Care Home 1 has included Executive Strategy meetings, safeguarding enquiries, contract monitoring, Care Quality Commission engagement, input from health partners, medication optimisation support, public health advice and resident reviews. Admissions were suspended, later eased on a phased and tightly controlled basis when improvement was seen, and then suspended again when further concerns emerged. ASC currently undertakes five social work visits each week. There is also a block on admissions agreed with the Integrated Care Board and other local authorities with people

placed in the home. Executive Strategy oversight remains necessary while partners seek assurance that improvements are sustained and that safe, well-governed care can be consistently delivered.

17. Care Home 2 is a larger residential and nursing care home. It entered Executive Strategy arrangements in 2025 following repeated safeguarding and regulatory concerns about medication administration, staffing, neglect and acts of omission, care delivery, leadership and governance. The home has operated at less than half capacity for a sustained period and has experienced high staff turnover, reliance on agency staff and changes in senior management. New admissions remain suspended while the provider is required to evidence sustained improvement.
18. The main concerns for Care Home 2 relate to medication management, safe care and governance. These include missed or unactioned medication, discrepancies in records and stock, poor recording of topical and as-required medication, concerns about controlled drugs, underreporting of safeguarding incidents, delays in risk notification, gaps in care planning, poor communication, and cleanliness and infection prevention and control. The Care Quality Commission has taken regulatory action, including warning notices in relation to safe care and treatment and good governance, and the service has been rated inadequate.
19. The Executive Strategy group has required Care Home 2 to maintain an improvement plan, provide regular updates, evidence daily medication checks and governance audits, engage with safeguarding training and respond promptly to professional communications. The Council, Safeguarding Adults Team, contracts and commissioning colleagues, health partners, medicines optimisation colleagues, CQC and placing authorities continue to monitor the service. Improvements have been observed, and phased admissions have been agreed, subject to strict oversight and continued assurance.
20. Across both homes, the main issue is the recurrence of safeguarding themes rather than single incidents. These themes indicate weaknesses in governance, clinical oversight, leadership grip and learning from concerns. The Executive Strategy Procedure helps partners maintain focus, avoid duplication and require providers to evidence embedded and sustained improvement. The safety, wellbeing and dignity of residents remain the central focus.
21. Darlington's safeguarding triage arrangements support earlier identification of risk. Where a person is open to a social care team, triage is completed by the relevant team manager or senior practitioner. Where the person is not open to a Darlington team, triage is completed by the Safeguarding Adults Team. A safeguarding triage tool supports practitioners to gather information, consider safe contact, identify repeat concerns and apply Making Safeguarding Personal. Decisions to close referrals with no further action are reviewed through weekly referral meetings to support consistency and oversight.
22. Prevention remains a key part of Darlington's safeguarding approach. Current work includes the risk notification pilot, which helps identify patterns from lower-level incidents and concerns earlier. ASC also provides continuing professional development for practitioners and partners, and there are stronger links between the Safeguarding Adults Team, contracts, commissioned services, CQC and ASC teams. These arrangements help identify emerging risks, agree coordinated responses and reduce escalation.

23. Overall, the Executive Strategy Procedure provides an important assurance mechanism for Scrutiny. It supports a coordinated response to serious provider concerns, strengthens oversight of improvement activity, and ensures learning from safeguarding concerns informs wider quality assurance and provider monitoring.

Outcome of Consultation

24. This report is informed by ongoing multi-agency safeguarding activity, Darlington Safeguarding Partnership procedures, Executive Strategy meetings, provider monitoring and ASC safeguarding governance. No formal public consultation has been undertaken, as the report provides assurance and information to Scrutiny rather than proposing a policy or service change.