

Report to: Partnerships Scrutiny Committee

Date of Meeting: 25 February 2016

Lead Member / Officer: Lead Member for Social Care (Adults and Children's Services)/Service Manager: Specialist Services

Report Author: POVA Co-ordinator

Title: Annual Report on Adult Protection in Denbighshire 1st April 2014 – 31st March 2015.

1. What is the report about?

This report is a follow up to the annual performance report for Adult Protection presented to Partnership Scrutiny in November 2015.

2. What is the reason for making this report?

A request from members for more detail in relation to the allegation of abuse within nursing and residential care homes and within an individual's own home.

3. What are the Recommendations?

That members receive and comment on the report and acknowledge the important nature of a corporate approach to the Protection of Vulnerable Adults and the responsibility of the Council to view this as a key priority area and to place it alongside the commitment and significance given by Denbighshire to Child Protection.

4. Report details

4.1 Although many referrals will take less than a year to complete, they are spread throughout the year and as a result completed referrals in the year will not necessarily equate to the number of reported referrals meeting the threshold, as some referrals will be received or completed outside the reporting period. This report refers to referrals that were completed during the period 1/4/14 – 31/3/15, irrespective of when they were received. There were 73 referrals completed within this period.

4.2 Of the 73 referrals completed, 78% (56) alleged abuse occurred within a care home (nursing or residential) setting or within the individual's own home in the community. This report will focus on the category of abuse, alleged perpetrator and the overall outcome. See the appendix for greater detail.

4.3 The overall outcomes of the 42 referrals within a nursing or residential care home setting

Proven/Upheld	16
Inconclusive	10
Disproved	5
Admitted	1

Likely on balance of probability	4
Unlikely on balance of probability	5
Allegation withdrawn	1

4.4 The outcome for the alleged victim and the alleged perpetrators

Risks reduced /improved safeguards	19
Risks removed	23
Extra training/extra supervision for staff	16
Staff dismissed/disciplinary	9/3 = 12
Revised policies/procedures	19
Criminal prosecution	1

4.5 Categories of abuse – Please be aware there may be more categories being considered within 1 referral

Neglect	14
Emotional/psychological	9
Financial	6 – by family/friends
Physical	18
Sexual	4

4.6 All safeguarding referrals which involve care providers are discussed with Contracts Officers. Many of the issues, and the way they have been addressed by home managers, are evidence of good practice and these are noted as part of the contract monitoring process. Contracts Officers attend strategy meetings and address issues from a contract perspective with additional monitoring where necessary. They also ensure that such issues are considered as part of an Escalating Concern process where that is appropriate. The Contracts team now monitors 64 care homes. Of these 21 were the subject of a safeguarding referral during the 2014/15 year. There was also one referral for an incident which occurred in a Denbighshire County Council care home. The majority of these issues were addressed at the time with no ongoing concerns with 19 of the care homes only recording 1 or 2 incidents in the year. Two of the homes with higher levels of safeguarding issues were the subject of Escalating Concerns at the time as reported in the quarterly quality monitoring reports sent to Chairs and Vice Chairs of Scrutiny.

4.7 Case study

An allegation of neglect was received in respect of a female resident in a care home which related to a pressure ulcer. This allegation related to NHS staff who were supporting this individual in the care home. It needs to be noted here that the responsibility of managing pressures ulcers when an individual lives in their own home or a residential setting lies with community nursing services.

This case was a very complex case taking 18 months before completion with the initial lead being taken by the police, who undertook a criminal investigation, concluding that the threshold of wilful neglect was not met and therefore no further action would be taken by them.

This case then returned to be managed under the Policy and Procedures for the Protection of Vulnerable Adults (POVA). A non-criminal investigation was

commissioned to be undertaken by BCUHB with clear terms of reference. In determining an outcome it is important to note that a non-criminal investigation has the same purpose as a criminal investigation and must be undertaken to the highest professional standards. However, its conclusions are based on the balance of probabilities rather than the threshold of beyond reasonable doubt, as is required in criminal cases.

The outcome of this investigation determined that there was evidence to support the allegation of abuse. There was documentation to support that there had been a failure by the district nurses to carry out their duty of care to a good enough standard. The professionals involved in the strategy meeting concluded that on the balance of probability it had been proven/upheld that this individual had suffered neglect.

A case conference was held involving family and key staff members to provide feedback. A review of the current safeguards were undertaken, for not only the individual, but inclusive of the potential implication to other vulnerable adults. The outcome for the named staff members were that disciplinary procedures were followed; extra training and revised policies/procedures were also put in place for this service delivery.

This referral was correctly recorded as having occurred in the residential setting, but as illustrated above the actual allegation of abuse was against NHS employees who provided a service into the care home.

4.8 The alleged perpetrators of abuse in individuals' own homes

Independent sector staff	7
Family/friend	4
Another service	2
Employee (direct payment)	1

4.9 The outcome for the alleged victim and the alleged perpetrators

Risks reduced /improved safeguards	7
Risks removed	7
Extra training/extra supervision for staff	4
Staff dismissed/disciplinary	3
Revised policies/procedures	2
Escalating concerns	1

4.10 Categories of abuse – Please be aware there may be more categories being considered within 1 referral

Neglect	6
Emotional/psychological	3
Financial	2
Physical	5
sexual	0
Domestic abuse	1

4.11 Case Study

The following is an example of an allegation of neglect and physical abuse against a family / friend. An individual stated that his friend/landlord and carer had assaulted him a few months earlier. The alleged victim did not want anyone informed as he was scared that the alleged perpetrator would beat him up again. The outcome recorded is that it was likely on the balance of probability that the vulnerable adult suffered this abuse. However this case could not move forward under a criminal investigation as the victim was not willing to make a statement to support police involvement.

5. How does the decision contribute to the Corporate Priorities?

The Protection of Vulnerable Adults arrangements contribute directly to the corporate priority to protect vulnerable people and enable them to remain living independently.

6. What will it cost and how will it affect other services?

This service is already featured within existing budgets.

7. What are the main conclusions of the Equality Impact Assessment (EqIA) undertaken on the decision? The completed EqIA template should be attached as an appendix to the report.

An Equality Impact Assessment is not required as this report makes no changes to policy.

8. What consultations have been carried out?

Not applicable

9. Chief Finance Officer Statement

There are no financial implications arising directly from this report

10. What risks are there and is there anything we can do to reduce them?

The model of delivery which shares the role and responsibilities of the Designated Lead Manager with team managers and senior practitioners presents a challenge to ensure a consistency of approach and quality in dealing with safeguarding referrals. The development of a senior practitioner post – DoLS lead as well as a Safeguarding Team Manager post ensures a more robust overview of the whole safeguarding process.

11. Power to make the Decision

Scrutiny's powers with respect to this matter are set out in Section 21 of the Local Government Act 2000 and article 6.3.4(b) of the Council's Constitution.

Contact Officer:

POVA Co-ordinator

Tel: 01824 706675