

Committee: Healthier Communities & Older People Scrutiny Panel

Date: 17th April 2013

Agenda item: 8

Subject: Safeguarding Older People Task Group – Department action Plan

Lead officer: Julie Phillips; julie.Phillips@merton.gov.uk

Lead member: Councillor Linda Kirby Linda.Kirby@merton.gov.uk

Forward Plan reference number:

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Recommendations:

- A. That the Healthier Communities & Older People Scrutiny Panel note the contents of this report to acknowledge recommendations in the attached action plan.
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1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1. The purpose of this report is to note and confirm recommendations following scrutiny panel meeting on 19th April 2012.

2 DETAILS

- 2.1. **Safeguarding Adults** Adult Safeguarding in Merton continues to grow as the awareness spreads amongst partner agencies and members of the public. Safeguarding Adults has also gained recent interest following the consultation and debate about new legislation and powers that should be given to front line workers to access adults at risk.
- 2.2. In Merton we now adopt the London multi agency procedures and this has been in place locally since June 2011. One of the most significant sections is the seven key stages of the safeguarding adult's process. This provides a common framework and consistency to responding to safeguarding alerts and referrals across London Boroughs.
- 2.3. The safeguarding adult's team has grown over the recent years to meet the demand for the rise in safeguarding alerts. During the year 2011/2012, the safeguarding team received 417 alerts. This is an increase from 2010/2011 of 376 alerts. To date for this year 2012/2013 has received 222 alerts. We are predicting a rise in alerts from last year.
- 2.4. The team consists of a safeguarding manager (social worker), lead practitioner (social worker), support officer and administration worker.
- 2.5. The main customer group where the most alerts are received are older people, with the most prominent areas of abuse are physical, financial and neglect/acts of omission. This trend is not new and reflects the wider picture. Due to recent media attention of care homes (e.g winterbourne view), there has been an increase in alerts about customers that live in care homes. The safeguarding team work with local care homes in Merton where there are concerns about the quality of care in partnership with the Merton

contracts team, Sutton and Merton PCT (if nursing is involved) and the Care Quality Commission.

2.6. **Deprivation of Liberty Safeguards (DOLS)** The Mental Capacity Act (MCA) 2005 was amended to provide safeguards for people who lack capacity specifically to consent to treatment or care in either a hospital or care home that, in their own best interests, can only be provided in circumstances that amount to a deprivation of liberty. The amendment came into effect on 1 April 2009. Merton are given funding from a department of health grant every year to perform our role as Supervisory Body. The safeguarding manager and lead practitioner are also Best Interest Assessors as well as having a pool of additional 12 Best Interest Assessors within Merton.

2.7. The safeguarding team have maintained a dedicated webpage for DOLS which enable care homes and hospitals to submit the required forms online for authorisation. Generally the referral rate across London remains low. In Merton, the referral rate has risen since the first year and remained a consistent number to date per year. We hold an annual DOLS awareness event for care providers in Merton which aims for care staff to gain an update and refresher regarding DOLS and bring any queries they have to discuss to help understand the subject better.

3 ALTERNATIVE OPTIONS

3.1. N/A

4 CONSULTATION UNDERTAKEN OR PROPOSED

4.1. N/A

5 TIMETABLE

5.1. N/A

6 FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

6.1. As directed in the attached action plan.

7 LEGAL AND STATUTORY IMPLICATIONS

7.1. N/A

8 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

8.1. N/A

9 CRIME AND DISORDER IMPLICATIONS

9.1. N/A

10 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

10.1. N/A

11 APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

- Scrutiny Action Plan

12 BACKGROUND PAPERS

12.1. N/A



**ACTION PLAN ARISING FROM THE RECOMMENDATIONS
FROM THE REPORT PRODUCED BY HEALTHIER
COMMUNITIES AND OLDER PEOPLE SCRUTINY PANEL
APRIL 2012**

**SAFEGUARDING ADULTS AND DEPRIVATION OF LIBERTY
TEAM**

**AUTHOR: SAFEGUARDING ADULTS
DATE: 8TH JANUARY 2013**

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INTRODUCTION

PURPOSE OF THE ACTION PLAN

To provide an update to the scrutiny group on the agreed recommendations as proposed by the Scrutiny Review Report (Safeguarding Older People 19th April 2012).

ACTION PLAN

	ACTION (RECOMMENDATION)	LEAD OFFICER	DEPARTMENTAL RESPONSE	INITIAL	UPDATE JANUARY 2013
1	Due to evidence provided highlighting the 52% rise in safeguarding referrals we recommend the appointment of a additional member of staff is made to the safeguarding team. (paragraph 21)	Safeguarding Adults Team - Julie Phillips	Agreed. Subject to budget.		No budget for this at present but will be looked at as part of adults services restructure in 2013.
2	To reduce risk of abuse, and reduce the high percentage of unintentional abuse referrals, we recommend providing structured lifting and handling training to unpaid carers offered on a personalised case by case basis. This should include training in areas that to help prevent or recognise abuse. This should be offered to carers as part of the reablement package.	Learning and Development Selina Gardiner	Agreed. A multi agency meeting to be arranged to discuss the financial implications of this recommendation. A budget will need to be agreed across all agencies to fund this training.		A meeting with carers has been set for February 2013 to discuss training needs. We will incorporate this recommendation into the plan for this year.

	<p>We further recommend that GP Surgeries across the Borough should be informed of the availability of this training as they maintain a register of unpaid carers. (Paragraph 35)</p>	<p>Learning and Development</p>	<p>Agreed. This could be undertaken with the general mail out of scheduled training for partner agencies.</p>	<p>We have a strategy in place for integrated training and development now that we are going into public health and so will be ensuring that we offer courses out to our integrated partners in a more structured way.</p>
<p>3</p>	<p>Domiciliary care providers should be encouraged to use CM2000 monitors to check the time gap between appointments, to assess whether travel time between appointments is realistic and will not force carers to rush. If these gaps are not realistic, appointments should be re-scheduled or re-allocated as necessary, while endeavouring to ensure continuity in care personnel for individual clients. (Paragraph 48)</p>	<p>Contracts Team – David Stark</p>	<p>Agreed, noting that providers will respond regarding the feasibility of this recommendation.</p>	<p>This is already in place. It is a contractual requirement that all Approved Domiciliary Care Providers have to use CM2000 to monitor their carers compliance to commissioned visit times. The Council monitor such data and agree with providers any appropriate actions to ensure visits are carried out in accordance with the requirements of the Council as set out in the contract.</p>

4	<p>Merton Council should continue to require all domiciliary care providers to carry out new CRB checks on their frontline staff every three years. Care providers should submit evidence that this has been done to the Council within three months of the renewal date. This requirement should be introduced into all new domiciliary care contracts signed by Merton forthwith. (Paragraph 55)</p>	Contracts Team	Agreed. This is already Merton Council's agreed process.	This is already in place. This is a requirement of all Adult Social Care Contracts.
5	<p>We recommend working with GPs to identify those with dementia living in their own home. (Paragraph 58)</p>	Service Manager Jenny Rees	<p>Agreed. The Merton Adult Access Team will receive and discuss referrals with outside agencies including GP surgeries who would like to refer customers to adult social care.</p>	<p>We are currently recruiting Health Liaison Workers to build up relationships with GP's and other Health Colleagues, we plan to contribute to the development of risk stratification systems because they do not currently include Dementia Patients. We are also going to be the first local authority (along with Sutton) to pilot social care use and inputting onto the Co-ordinate My Care System and this will create a virtual multi-</p>

	<p>We further recommend that their care packages should be regularly monitored, at least once a year and more often as need arises and situation deteriorates and whether or not a complaint has been made.</p>	<p>Service Manager Jenny Rees</p>	<p>This will be met through the usual review process within our review team in Access and Assessment. Clients that are allocated to a social care worker will have their review undertaken by that allocated worker. Any issues uncovered at a scheduled review will be taken back to management and discussed if case allocation is necessary.</p>	<p>disciplinary hub for supporting clients/patients at risk.</p> <p>Already in place through the review team and allocated social workers.</p>
6	<p>We recommend creation of a summary adult safeguarding document for distribution to adult social care users that contains clear, concise information stating what abuse is, who it should be reported to, what will happen next and what support they will get. (Paragraph 62)</p>	<p>Safeguarding Adults Team - Julie Phillips.</p>	<p>Agreed. This is in progress within the safeguarding adult's team.</p>	<p>We currently have information leaflets which are being updated to reflect Pan London safeguarding processes and will be available April 2013.</p>
7	<p>We recommend production of a DVD on safeguarding issues. As a starting point, ahead of a</p>	<p>Safeguarding Adults Team – Julie Phillips.</p>	<p>Agreed, noting that the recommended timescale depends on the capacity to deliver this.</p>	<p>This was not achievable due to inability to find an organisation that could take this forward and</p>

	<p>full PR & publicity campaign, this DVD should be produced in time for the celebrating age festival in 2012. It should also be distributed to service users and/or screened at Community Forum meetings, day centres and relevant events. (Paragraph 65)</p>			<p>lack of funds. We will reconsider this in 2013/14.</p> <p>As an interim measure we have now purchased a DVD produced by Action on Elder Abuse. We will screen this at key events.</p>
8	<p>We recommend using Elder Abuse Awareness Day (15th June) as an opportunity to increase understanding and awareness of elder abuse issues and how concerns can be reported via the abuse hotline. As a starting point that an article referencing this task group report and Elder Abuse Day should be prepared for the 2012 summer edition of My Merton (copy deadline early May). (Paragraph 66)</p>	<p>Safeguarding Adults Team – Julie Phillips</p>	<p>Agreed. This task has been completed. The article will appear in the next edition of My Merton.</p>	<p>Completed, the My Merton article was in the December 2012 edition.</p> <p>Elder abuse day and stand was marked in 2013 by a stall in Merton Link . 2013 will be marked in Merton led by the safeguarding adults team.</p>
9	<p>We recommend that the Safeguarding Hotline number be promoted in other Council publicity materials, including Council letters sent to residents, and as a footnote on Council</p>	<p>Communications Team – Bronwen Pickering</p>	<p>We understand that in this recommendation the panel means this to happen on a selective basis (for example for a specific period of time or for targeted recipients), and agree to this on this basis</p>	<p>This was promoted as part of the My Merton article dated December. Will continue to promote this throughout the year.</p>

10	<p>emails. (Paragraph 68)</p> <p>We recommend liaising with Sodexho to place information messages regarding elder abuse and how to report it on food or other packaging that goes into the homes of elderly or other vulnerable adults. (Paragraph 70)</p>	<p>Communications Team – Bronwen Pickering</p>	<p>We understand that the panel means such information to be made available to meals recipients at the beginning of their use of this service, and then at regular intervals, rather than to be on all products going into homes on a daily basis. On this basis we agree this recommendation</p>	<p>We will ask all contracted providers, by the end of February 2013, to ensure that all customers receive information messages regarding abuse and how to report it.</p>
11	<p>We recommend adding clear, concise information about the right of an individual to remain anonymous when reporting suspicions of abuse on the ‘Whistle blowing’ and ‘Safeguarding Vulnerable Adults’ page of Merton Council’s Website. These pages should also include an easy-to-understand timeline stating ‘What Will Happen Next’ after abuse or other suspicions are reported. Any printed material should be updated in the same way. (Paragraph 75)</p>	<p>Safeguarding Adults Team – Julie Phillips</p>	<p>Agreed. Our Support Officer in the Safeguarding Team is responsible for updating our safeguarding adult’s webpage regularly. This recommendation will be made aware to her to ensure it is clear on the webpage. The safeguarding adults team are currently updating their information which will include easy read and plain English.</p>	<p>This has been completed.</p>
12	<p>We recommend producing a booklet offering advice to self-funders on how to choose and</p>	<p>Commissioning Team –Rahat Ahmed-Man</p>	<p>We entirely support the principle of making information and advice available to self-funders, but</p>	<p>Completed - Merton Eye Launched in November 2012.</p>

			believe that this is best made available primarily through on line information in the portal to be launched later in 2012, with the use of this portal supported where needed by trained staff and volunteers. This will ensure that the information is kept up to date and is available to the widest range of potential users, for example relatives who live outside Merton.	
13	fund appropriate home care, and what pitfalls to look out for. (Paragraph 78)	Financial Assessments and Direct Payments Team.	We agree that the council should support self-funders in obtaining CRB checks. Officers will assess the budgetary impact of offering this as a free service and may recommend charging at cost, recognising that if the council assists with obtaining CRB clearances then the cost will be lower.	This is not viable as we do not have the budget to undertake CRB checks as we are charged the full cost.
14	We recommend offering free CRB checks for self-funders who employ local people to provide care services on their behalf. (Paragraph 79)	Finance Team	We do not agree that all people over 70 who fall into arrears should be contacted automatically by a member of the safeguarding team. This is because of the resource implications and because of potential complaints	Colleagues will make referral to safeguarding adults as and when necessary.
	We recommend people aged over 70 and known to be living alone, who fall into Council Tax, rent, care services or other arrears that come to the notice of the Local Authority, should not be sent a summons until			

	<p>they have been contacted personally by a member of the safeguarding team who is assured that there is an legitimate and acceptable explanation for the arrears. This policy should be implemented immediately. (Paragraph 86)</p>		<p>about how information has been used. However we would support all officers in the council being aware of possible safeguarding issues when people fall into arrears, and in those cases where there are clear reasons to think such issues exist then to make a referral to the safeguarding team and ask for contact to be made.</p>	
15	<p>We recommend that Trading Standards liaise with the Safeguarding Team to identify adults likely to be at risk of rogue traders and cold callers, and warn them in writing, bi-annually, about the dangers of cold-callers, sending 'No Cold-Callers' stickers they can put on their front doors. (Paragraph 87)</p>	<p>Trading Standards Team – John Hillarby</p>	<p>Agreed.</p>	<p>Trading standards provide regular talks to community groups covering cold callers and other risk issues. Although rogue traders and cold callers is not a big concern in Merton. If an issue arises they do targeted leaflet drops in the community jointly with the police.</p> <p>The do provide cold callers stickers at all events.</p> <p>Currently they are in the process of setting up an email distribution group highlighting any issues in Merton that the community need to be aware of.</p>

16	<p>We recommend all new users of personal budgets receive the leaflet referred to in Recommendation 6 - or otherwise given written details of the Safeguarding hotline - when their budgets are approved, and encouraged to report any concerns about misuse of their personal budget via the helpline. (Paragraph 89)</p>	<p>MAAT, Hospital, East and West Assessment and Support Planning Team</p>	<p>Agreed.</p>	<p>This happens already and the updated leaflet will be provided when it is available.</p>
17	<p>We recommend that the safeguarding adult's alerts are reported to the Healthier Communities and Older People Overview and Scrutiny Panel on green paper on a quarterly basis. (Paragraph 94)</p>	<p>Safeguarding Adults Team – Julie Phillips</p>	<p>Agreed on the understanding that trends rather than any personally identifiable information is shared.</p>	<p>This will come into operation from the 1st April 2013.</p>
18	<p>We recommend that a separate working group consisting of Council officers, care home managers, residential care users and elected members be formed to develop a 'Merton Standard' for care homes that goes beyond statutory requirements, and establishes a quality measure against which care establishments in</p>	<p>David Slark Commissioning</p>	<p>We agree that the working group described could profitably work together in order to agree and improve the standards which the council expects from providers from which it commissions services, and from other local providers if they are willing. We also agree that any information about quality of care and environment should be as</p>	<p>We have established provider forums in place, where quality of care standards required in accordance with our contracts are discussed. We will convene a special forum meeting with representatives from this forum and elected members to discuss improved standards of care in March 2013.</p>

	<p>the Borough can be rated. Performance indicators should include how effectively homes meet the physical, emotional, social, and privacy requirements of their clients, as well issues such as quality of fittings and furnishings, nursing and other staff to client ratios, etc. These ratings should be available to members of the public to assist them in choosing care homes. The Merton Standard could also stipulate continuing professional development requirements for managers, and pay levels for frontline staff.</p> <p>We further recommend that a Dignity and Care Conference be held for all interested parties in the Borough to explore this and other issues relating to the care of the elderly, including</p>		<p>accessible to our residents as possible. We will be keen to support Health watch in its role to oversee and assist these activities. We would not agree to the council applying public “ratings” to providers, on the basis that it is not appropriate for the council to duplicate the regulatory function of the Care Quality Commission, and that the resource implications would be significant.</p> <p>We support the holding of a Dignity in Care conference.</p>	<p>This is planned for September 2013.</p>
		<p>Safeguarding Adults Team – Julie Phillips</p>		

	how the Council can work with HealthWatch to monitor and improve standards of care for the elderly in the future. (Paragraph 104)			
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