

Annual REPORT 2010/11



Prevention • Response • Awareness

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Foreword



As Chair of the Bradford District Safeguarding Adults Board (BSAB), it gives me great pleasure to introduce our Annual Report for 2010/11. The report explains how partner agencies have worked together in Bradford to improve the safety of vulnerable adults.

This year, the Board oversaw the response of local agencies to nearly a 1000 referrals about the potential ill treatment of vulnerable adults. Fortunately, only a small proportion of these referrals involved serious abuse but it is vitally important that we work together to make a proportionate response to all concerns raised.

With regard to national safeguarding developments, the Board welcomes the 'Statement of Government Policy on Adult Safeguarding' in May 2011 which confirms that following the public consultation on 'No Secrets' and the review of adult social care by the Law Commission, the Government intends at a future date to introduce legislation to put Safeguarding Adults Boards on a statutory footing. The Board fully supports this proposal to ensure that agencies are accountable for the effectiveness of local safeguarding arrangements.

Locally over the last twelve months the Board has strengthened its membership and governance arrangements in anticipation of future changes and challenges, particularly by the creation of two new subgroups. These are the Performance and Quality Assurance and the Communication and Engagement subgroups. This highlights the importance the Board gives to involving those who use health and social care services and of taking their views into account to improve the quality and effectiveness of our safeguarding work. The Board has also strengthened its relationship with the Community Safety Partnership to ensure that safeguarding adults is fully aligned with the wider community safety agenda. The Board also intends to establish a strong reporting relationship with the soon to be established shadow Health and Wellbeing Board.

In 2009 the Board commissioned its first Serious Case Review, chaired independently, and received its report and recommendations in late 2010. The lessons learnt are being acted on by the partner agencies involved and the Board continues to monitor closely progress on the implementation of the Action Plan.

All of the agencies on the Board are experiencing high levels of change and increased pressure on resources. However each one would acknowledge that protecting vulnerable adults from harm and abuse is fundamental to their priorities. The challenge we all continue to face is how we do this effectively both as individual agencies and collectively as a Board. We need to continue to hold ourselves and each other to account for the work we do to safeguard adults.

A great deal has been achieved in Bradford but we are aware that there is still more to do. Our goal continues to be that all vulnerable adults who experience abuse or harm know how to seek help and feel safer and empowered as a result of the response they receive and the choice and support offered to them.

Finally, I would like to thank everybody who has contributed to the safeguarding of vulnerable adults for their hard work and commitment and through their work have demonstrated that the abuse of vulnerable adults is never acceptable.

Moira Wilson, Chair
Bradford District Safeguarding Adults Board

Introduction

The Bradford District Safeguarding Board Annual Report for 2010/11 considers the work of the Board over the last twelve months and how partner agencies have worked together to improve the safety of vulnerable adults. The report covers the Board's role and governance arrangements and the work of its subgroups. It provides information on safeguarding activity in 2010/11 and it also outlines the contribution partners have made in their own organisation with regard to safeguarding. The report also considers the Board's achievements over the last twelve months and its priorities for 2011/12.

Working Together Locally

Bradford Safeguarding Adults Board

The Bradford Safeguarding Adults Board is the multi-agency partnership that leads the strategic development of safeguarding adults work in the Bradford District. Partners agree to:

- Work together to set standards to improve the safeguarding of vulnerable adults in the District
- Ensure multi-agency policy and procedures are in place and applied consistently
- Monitor performance and make improvements where required
- Promote joint engagement with the community to raise awareness of safeguarding

Membership includes representation from the main statutory agencies (Bradford Council, NHS organisations, Police, Probation and Fire Service), housing and independent and voluntary sector organisations. A list of members of the Board in 2010/11 is included as Appendix 1 and diagrammatic representation of the Board's structure and reporting relationships is set out in Appendix 2.

Adult Protection Unit

The Adult Protection Unit is a team funded by contributions from some of the partner agencies from the Safeguarding Adults Board. The team is located in the Council's Adult and Community Services and carries out work on behalf of the Board including:

- Strategic support to the Board and the Chair
- Providing advice and support to partner agencies
- Promoting best practice
- Coordinating multi-agency responses to abuse and harm in care home settings

- Supporting Adult Protection Risk Assessment Coordinators (APRACs) to coordinate responses to abuse and harm in domestic or community based settings
- Monitoring the implementation of policy and procedures

Board Subgroups

The Board is supported by a number of subgroups which are accountable to the Board for progressing its Business Plan. The subgroups are:

- Improving Practice
- Performance and Quality Assurance
- Communications and Engagement
- Training

The chairs of the subgroups are also members of the Board and the Board's Delivery Group which is responsible for coordinating the work of the subgroups and supporting the Board.

Improving Practice Subgroup

The group works on behalf of the Safeguarding Adults Board to oversee the implementation and quality of safeguarding adults work across Bradford and Airedale. Matt O'Connor, Head of Safeguarding adults for NHS Bradford and Airedale chairs the group, which in 2010/11 met four times and engaged in work across a wide range of safeguarding related activities. Meetings were regularly attended by representatives from the independent sector, Adult and Community Services and all NHS Trusts and welcomed new representation from In-communities and an Adult Protection Risk Assessment Coordinator (APRAC) based in Adult and Community Services.

The group continued to monitor adult protection activity data and consider significant local and national cases and initiatives. In May 2010 Irene Jest shared an independent sector perspective of regulatory requirements, including routine reporting and pre-inspection documentation required by the Care Quality Commission. Other presentations included an update on regional work to establish alerting guidance relating to Deprivation of Liberty and the work in developing a risk assessment tool for inclusion in local multi-agency procedures.

We would particularly like to thank staff of the Adult Protection Unit for their work to introduce a web-based referral process. This highly successful project has been well received by alerters and positively supports safeguarding practice across Bradford District.

2011/12 is likely to bring significant challenges at a time of increasing public

expectation, service pressure and financial constraint. The group is conscious that proposals by the Association of Directors of Adults Social Services (ADASS) to change definitions from 'abuse' to 'harm' could potentially open up multiagency adult protection procedures to a much wider population. However, we await the governments' response to the Law Commissions report into adult social care and will need to consider the practice implications of any new legislative framework.

We have undertaken to review the wording of the alerting sections of the procedures and will work with the newly formed Communications and Engagement subgroup to ensure that any revisions are appropriate and accessible to services users, the public and professionals. We plan to analyse findings from the Serious Case Review and consider how learning can inform the continued development of safeguarding practice across all partners. We will also consider learning about the review process itself and make recommendations as to how any future serious case reviews may be undertaken.

Performance and Quality Assurance Subgroup

The Performance and Quality Assurance group was established in 2010/11 and is chaired by John Howarth, Adult Services Manager for Safeguarding, Quality and Customer Care. The aims of the group are to provide oversight and governance of the delivery of the Safeguarding Adults Board's strategic leadership role to protect vulnerable people from abuse and to provide assurance and evidence to the Board that safeguarding practice across all agencies is in line with agreed policy and procedures.

As the Performance and Quality Assurance subgroup develops, its focus will become more comprehensive but its initial task has been to establish a Performance and Quality Assurance framework which contains the following elements:

- Adult protection data set in line with the national Abuse of Vulnerable Adults (AVA) return
- Performance management of the Board's Business Plan
- Developing a system of case file audits to ensure practice is in line with policies and procedures
- Working closely with the Communications and Engagement subgroup to develop methods to receive service user/patient, carer and staff experience of the safeguarding process.
- Performance management of the implementation of Serious Case Review recommendations

Communication and Engagement Subgroup

In order to further strengthen the work of the Safeguarding Adults Board and

to assist in the delivery of the Business Plan, a Communications and Engagement Group has been established. The Communications and Engagement Group held its inaugural meeting in March 2011 when the following aims were agreed:

- To raise awareness of issues relating to the safeguarding of vulnerable adults across all service user groups, staff and the general public
- To develop mechanisms and approaches to receive feedback from service users/patients/carers and staff who have experienced the safeguarding process in Bradford and ensure it influences practice
- To develop mechanisms and approaches to involve service users/patients/carers/staff and the public in the development of safeguarding policy and practice
- To increase the confidence, knowledge and support of vulnerable people to report concerns relating to adult abuse.

The chair of the sub group is Chief Inspector Marianne Huison, West Yorkshire Police and the Deputy Chair Claire Blacka, Stonham Housing. The group comprises of representatives from both statutory and third sector agencies.

The first piece of work initiated is to form a service user group to act as an advisory group to inform and influence the work of the Board. The service user group's initial task will be to provide feedback on the drafts for two new Safeguarding Adults leaflets (one of which is an easy read guide) outlining the various forms of adult abuse and what help is available in Bradford.

The Communications and Engagement Group is also in the early stages of developing a Communications and Engagement Strategy and Delivery Plan for the Board.

Training Subgroup

The aim of the Training Subgroup is to work on behalf of the Safeguarding Adults Board to provide, develop, promote and oversee the implementation and quality of safeguarding training within the Bradford District.

Noel McEvoy (Airedale NHS Foundation Trust) took over as Chair from August 2009. The group acknowledges the significant role that Carol Rowe (Workforce Development Unit) and Matt O'Connor (NHSBA) have played in the work of the group.

All partner agencies are invited to nominate a representative to attend the Training Subgroup and other members may be co-opted to support particular areas of work. The group has met 6 times in 2010-2011 and has seen a significant increase in membership from groups that were not previously represented.

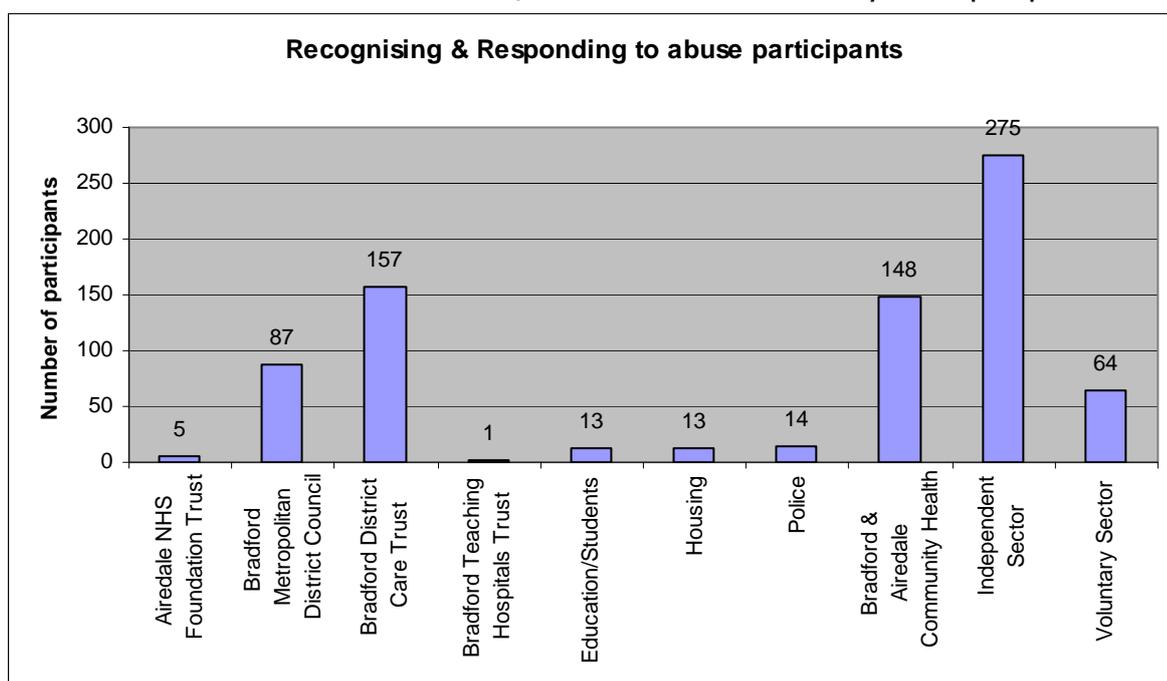
Key aspects of the group’s work involve developing and supporting the Strategic Training Plan based on the training needs analysis as approved by SAB by:

- Supporting agency contribution of trainer time, venues and other resources to the rolling programme of training to enable costs to be kept to a minimum.
- Provide routine training information to SAB by submitting the Training Task Group meeting minutes and to escalate any key risks and difficulties requiring SAB’s attention.
- To analyze data on staff attendance, no shows and the contributions made by different organizations
- Support the review and development of multi and single agency training materials and packages, ensuring consistency of the training programme across the district.

Ongoing safeguarding training is crucial to increasing awareness of adult abuse. It also promotes better understanding of how a multi-agency process works in order to safeguard vulnerable adults. Our training programmes achieve this by targeting specific tiers of responsibility within care providing agencies and organizations.

Introducing the work of the Adult Protection Unit is a short course aimed at student social workers; student nurses and primarily for anyone who is new to their workplace/job role and needs an understanding on the work of the Adult Protection Unit. 33 people attended this training in 2010/11.

Recognising and Responding to Abuse is a one day multi-disciplinary course offered to all front line staff across the district who work with vulnerable adults at risk of abuse. In 2010/11 it was attended by 777 people.



Role of the Service Manager is a two day course offered to managers of service provision such as ward, care home, resource centre, supported living and domiciliary care. This course includes a panel with the key agencies involved in safeguarding work – e.g. the Police, CQC, NHS and Supporting People. 92 people attended this course during 2010/11.

APRAC training, APRAC refresher training and APRAC workshops are provided specifically to assist Adult Protection Risk Assessment Co-ordinators (APRACs) in co-ordinating the safeguarding process once a referral is made. 28 APRACs attended the training in 2010/11.

Training for trainers is a two day course designed for those who would like to deliver multi-agency safeguarding adult training as well as in-house training. At the present time we have 10 established trainers and four who are gaining experience as trainers, providing training at four centres across the district. St Peters House, New Mill, Carlisle Business Centre and Airedale General Hospital. We would like to thank all our trainers for their continued commitment and support.

Financial Arrangements

The Safeguarding Adults Board and the Adult Protection Unit are funded by Bradford Council Adult & Community Services, NHS Bradford & Airedale, Bradford District Care Trust and West Yorkshire Police. Other partners contribute in kind e.g. input to training and involvement of staff in the work of the SAB and its subgroups.

Expenditure

Staff	287,580
Running costs	3,127
Resources & development	60
Safeguarding Adults Board*	10,013
Training delivery	4,000
Training admin/co-ordination	61,000
Total	<hr/> £365,780

* Costs incurred by the Safeguarding Adults Board were related to the running of the Serious Case Review and included independent chair and hospitality costs.

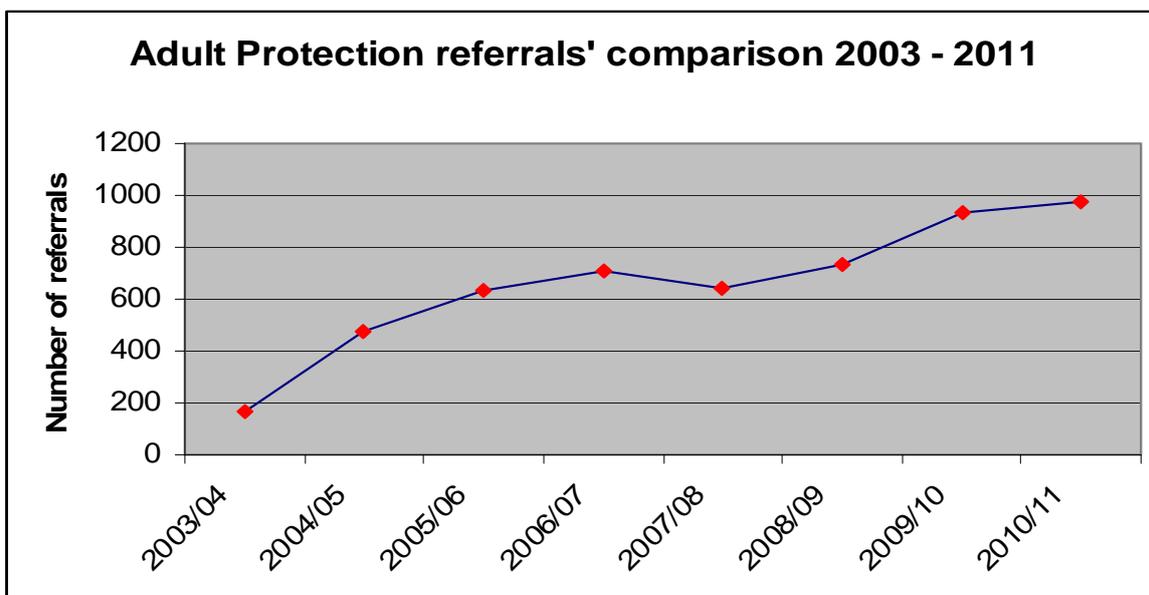
Safeguarding Activity 2010/11

The Board's multi-agency policy and procedures set out the circumstances in which a safeguarding alert and referral should be made and how it should be reported to the partner agencies. The procedures seek to ensure a proportionate response to each concern.

Safeguarding data is collected for the national Abuse of Vulnerable Adults (AVA) return. The data for the year 2010/11 is the first full year of data submitted by councils. The AVA return covers the number of referrals disaggregated by service user type, ethnicity and age, as well as type of abuse, location, referral source and relationship of alleged victims and perpetrators and the outcomes of investigations.

Key headlines:

- 975 referrals were received for potential investigation, a 5% increase on 2009/10. 109 of these referrals progressed to adult protection conferences
- 61% of referrals were made by social care staff and 28% from health staff. 11% of referrals came from other organisations such Care Quality Commission, Police, voluntary sector and family members.
- 46% of referrals related to older people, 13% to physical disability, 19% to mental health and 20% to learning disability
- The most common type of abuse is physical abuse (43%) followed by financial abuse (19%)
- 45% of referrals related to care home settings and 31% in the alleged victims own home.
- The person most likely to be the alleged perpetrator of abuse is another vulnerable adult (29%)
- Of all completed investigations, 49% were either substantiated or partly substantiated.

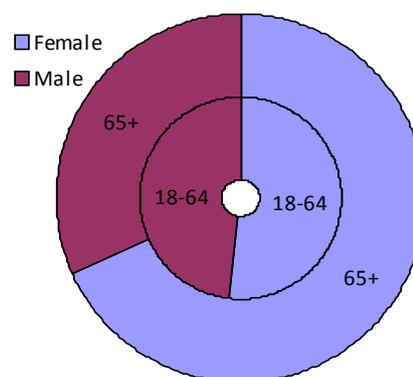


The 975 referrals to the Adult Protection Unit during 2010/11 translates to a rate of approximately 255 per 100,000 population. Early un-validated benchmarking figures indicate that Bradford is in line with the average number of referrals per 100k population reported in the group of Bradford's near statistical neighbours, and slightly above the Yorkshire and Humber average.

Demographic Breakdown of Alleged Victims

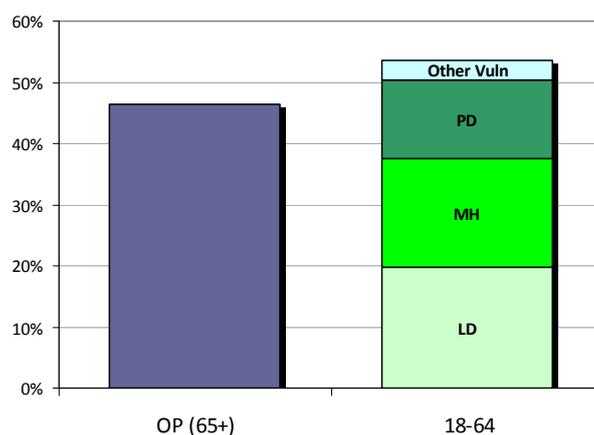
Age and Gender of Alleged Victim:

- The distribution across gender (all age) was approximately 60% women to 40% men
- The distribution across gender (18+64) was even (51% women), but this rose to approximately two thirds (66%) women for Older People (65+)



Alleged Victim Client Category

- Younger Adults represented just over half of the referrals within the period, with 45% of referrals relate to Older People
- For those referrals relating to people aged 18-64 those categorised as Learning Disabilities is the most prevalent (20% of total), followed by Mental Health (19%) then Physical



Disabilities (13%)

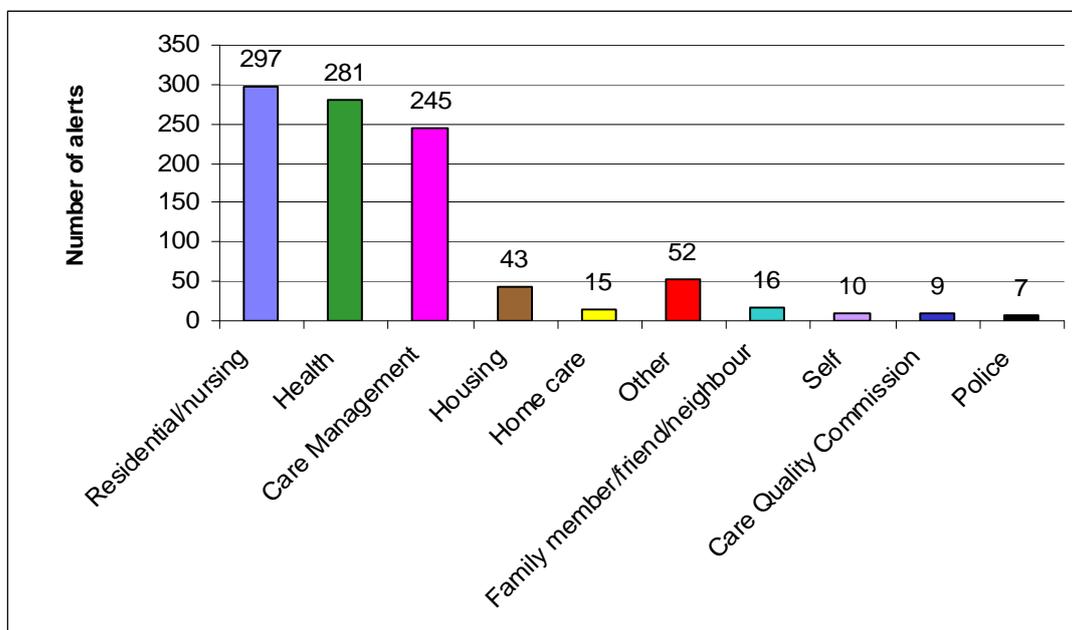
Ethnicity of Alleged Victim:

Ethnicity (All Age)	White - British	Asian/ Brit. Pakistani	White - Irish / Other	Asian/ Brit. Indian	Asian/ Brit. Bangla.	Black/ Brit- Caribbean	Other	Black/ Brit- African	Mixed
Referrals	81.9%	8.9%	3.8%	1.9%	0.6%	0.8%	0.4%	0.5%	0.9%
Population	77.0%	14.9%	0.7%	2.7%	1.1%	0.7%	0.2%	0.0%	1.7%

- White British represents the biggest proportion followed by Pakistani and White-Other
- The figure relating to White British (82%) is higher than the corresponding representation in the district's population (77%), as is the figure relating to White Other (3.8% against 1% in population)
- The percentage relating to those whose ethnicity is Pakistani (9%) is lower than the representation in the population – (15%)

Source of referrals

Adult protection referrals come from a variety of sources including statutory, independent and voluntary organizations as well as from members of the public.



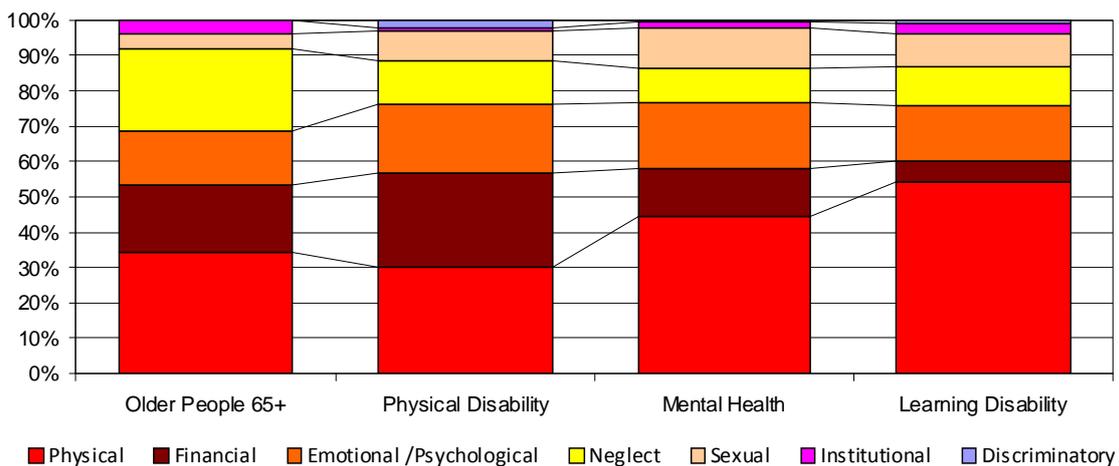
- the predominant source of referral is from professionals involved in the provision of social care at 61 % of the total. This includes care staff and service providers
- the next biggest source of referrals is from health professionals (28% of which 8% from MH staff)
- Self referrals (1.1%) and family referrals (1.5%) account for only a

- small proportion of the total
- Other professional bodies including the Police, Housing, and the voluntary sector again represent a small proportion of the total (5.3%)
- There have been 9 referrals from CQC (0.4%)

Type of abuse

The most frequent referrals concern allegations of physical abuse (38%) followed by neglect, financial and psychological abuse. In many cases however, investigations may concern more than one incident of abuse and more than one form. The distribution of types of abuse varies between client groups with physical abuse account for a higher proportion of referrals for the LD and MH 18-64 group than older people where neglect is more common. Financial abuse is more prevalent in the PD 18-64 group.

Type of abuse by client category (Older People, PD 18-64, LD 18-64 and MH 18-64)



Abuse Type and Gender

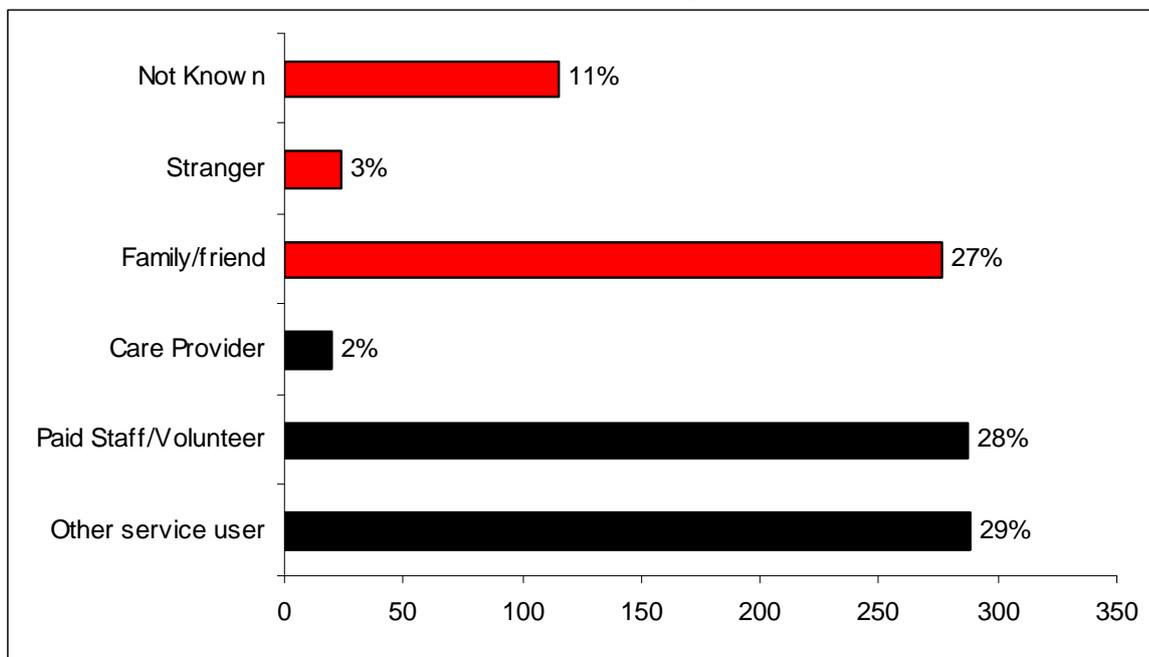
The distribution of type of abuse shows that alleged victims who are female aged 18-64 are proportionately more likely to be recorded as suffering emotional abuse or sexual abuse than males. Males 18-64 are more likely to be recorded as suffering physical abuse or material abuse.

Within the Older People demographic, females are proportionately more likely to be the victim of alleged financial abuse or physical abuse than males, who in turn are proportionately more likely to be recorded as suffering neglect than females.

Alleged Perpetrators

This year it can be seen that the 3 main categories of perpetrators are evenly matched (family / friend, paid staff / volunteer, other service user) whilst in the previous year (2008/09) staff were the over-riding category of perpetrator by a factor of almost 2.

Relationship of Perpetrator to Victim (All Ages)



Relationships and Abuse Type

For referrals relating to **people aged 65+**, in approximately 31% of cases the alleged perpetrator is a personal acquaintance. This includes other partners (6%), family members (19%), or a neighbour or friend (4%). In approximately a fifth of cases the relationship is another vulnerable adult – 20%. In 12% of cases the alleged perpetrator is social care staff.

For referrals relating to physical disability and sensory needs for people aged **18-64**, other family member, friends and volunteer represent the largest group of alleged perpetrators (34%) followed by other vulnerable adults (17%). Professionals, including both social care and health represent 20% of the total. The proportion of partner being the alleged perpetrator (8%) is higher than all other victim categories.

Data for those alleged victims identified with **mental health needs** or a **learning disability** follows a similar pattern:

- The principal alleged perpetrators are other vulnerable adults – (MH 42%, LD 46%)
- Professionals account for approximately one fifth (20%) in both categories

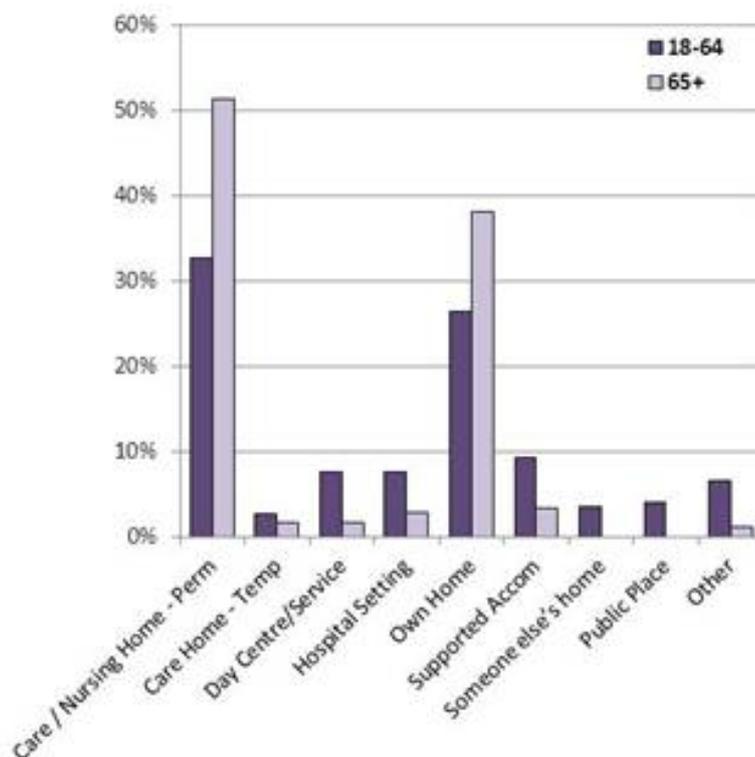
- Other family members, friends or volunteers account for 20% MH and 14% LD

Location of alleged abuse

Analysis indicates that there are differences in the pattern of data based on the age group of the alleged victim (and therefore to a certain extent the category of the alleged victim)

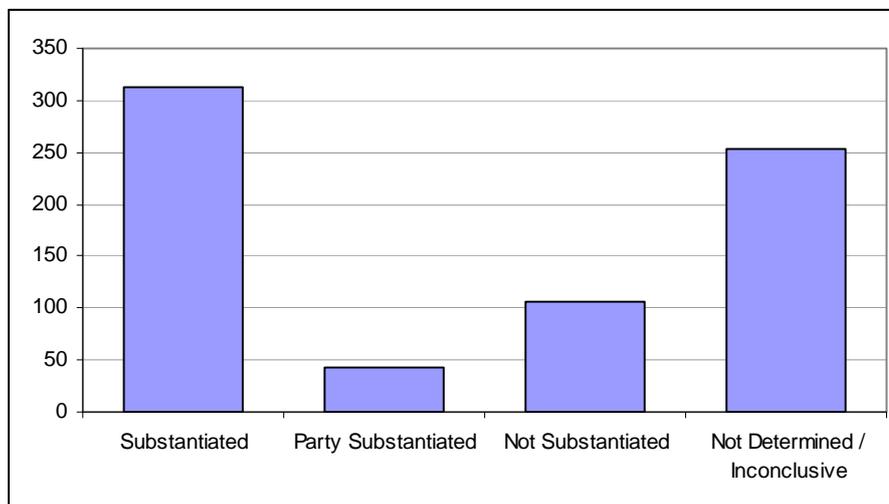
For Older People the majority of alleged abuse would appear to take place in institutional settings with 54% of referrals relating to care/ nursing home setting, the majority of which are private sector. The next largest grouping is the alleged victims own home 34%

For those who are aged 18-64 (including PD, LD and MH) the most likely location is in a permanent care home / nursing setting (35.4%) although at a smaller rate than for Older People. 6.1% of referrals relate to day care or a service setting and 8.2% of referrals relate to a hospital setting, almost three times the rate for Older People. Over a quarter (28%) relate to the alleged victim's own home, with an additional 8.4% of incidents being reported as having occurred in supported accommodation.



Case Conclusions

In the period April 2010 to March 2011, 714 investigations were completed, some of which started prior to April 2010. The completed investigations are therefore a different cohort from those commenced during the reporting period.



In terms of outcomes for these cases, year end data for 2010/11 shows that of all completed investigations approximately two fifths (42%) were substantiated, 6.5% were partially substantiated, 16% were not substantiated and 35% had an inconclusive outcome – in these cases, following an investigation, it was not possible to establish whether abuse occurred or not.

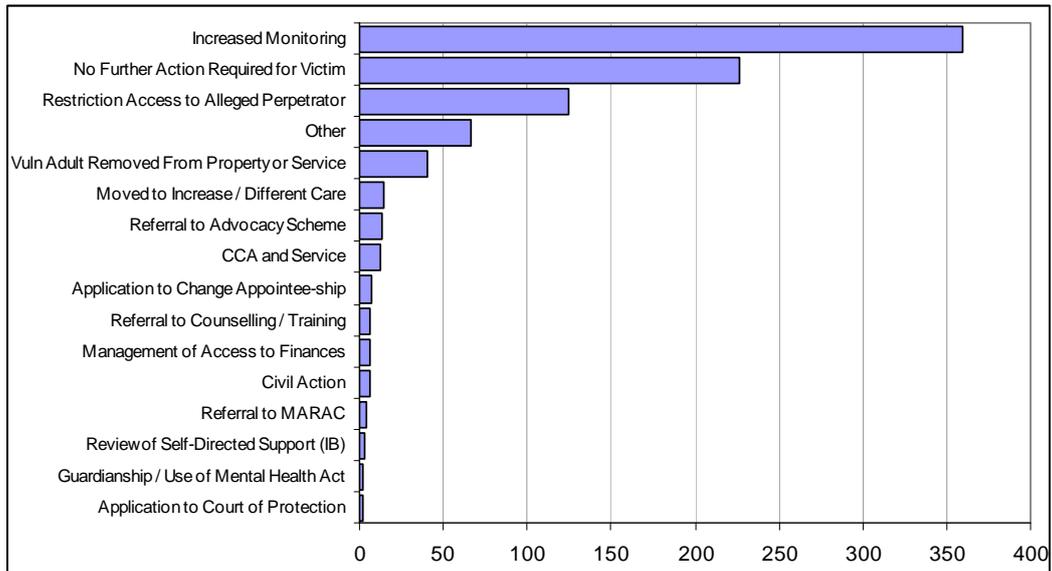
In relation to the different categories of alleged victims:

- For Older People and those with Physical Disabilities approximately 40% were substantiated or partly substantiated, whereas over half of investigations were substantiated, or in part, for those with Mental Health needs (54%) or Learning Disabilities (60%)
- 19 % of cases were not substantiated for Older People, 16% PD, 11% MH and 12% LD
- Approximately 40% of cases related to PD were inconclusive, one third of cases relating to Older People and Mental Health (OP 36%, MH 35%) and approximately one quarter of cases related to Learning Disabilities were inconclusive (26%)

Outcomes For Alleged Victims

Outcomes for victims and alleged perpetrators are recorded at the conclusion of the investigation according to the criteria set down in the national Abuse of Vulnerable Adults (AVA) statistical return.

The most frequent outcome for the victim is increased monitoring accounting for approximately 40% of cases, followed by no further action (25%) and restriction or management of access to the alleged perpetrator (14%)



Reports from Partner Agencies

This section of the report provides an outline of some of the work carried out within by partner agencies.

Airedale NHS Foundation Trust

The safeguarding of adults within Airedale NHS Foundation Trust is done by adhering to the No Secrets document and our local policies and procedures. We work with three different social services departments: Bradford, East Lancashire and North Yorkshire. Our internal policies and procedures have to be able to cope with the fact that these partners deal with safeguarding referrals in varying ways. We ensure consistency of our approach by working closely with Bradford Safeguarding Board and with its sub-groups. As an organisation Airedale NHS Foundation Trust has representation on SAB, Improving Practice and Training task groups.

During 2010/11 we had 94 safeguarding referrals related to the Bradford District. Training plays a vital role in raising awareness of abuse. It gives staff the confidence to report suspected case of alleged abuse, informs them as to what support is available to them once a referral is made, and it enables staff to support and safeguard people experiencing abuse as well as to help prevent it in the future.

848 staff have been trained in recognising and responding to abuse. The majority of these are direct care staff, i.e. nurses, physiotherapists, occupational therapists, speech therapists and dieticians. 60 more staff have been trained who are not clinically based. These include volunteers, clergy and interpreters. The plan is to continue training in recognising and responding and also to develop a shortened course to present to staff that have less clinical contact with patients but nevertheless could witness abuse. These include ward hostesses, domestics and porters.

NHS Bradford and Airedale (NHSBA)

Health workers provide care and treatment in a wide range of settings including; peoples own homes, community facilities, health centres, clinics and hospitals. As such, all health staff have a vital role to play in safeguarding adults who may be at risk of abuse.

As the commissioner and leader of local health services, we have continued to work with our providers and as a key partner in the Safeguarding Adults Board, to ensure that health services are working effectively in order to –

- Prevent abuse
- Recognise and respond to concerns of abuse and contribute to protection plans
- Develop practice and constantly improve the quality of care and support.

Safeguarding adults has remained a high priority for the NHSBA Board with leadership from the Director of Nursing, supported by regular safeguarding updates to the Boards' sub-groups. The organization's ongoing commitment to safeguarding adults has been demonstrated through increased capacity within the safeguarding team in recognition of increasing expectation, awareness, and scope of safeguarding adults practice.

Within NHSBA, we have developed targeted safeguarding training for commissioning staff and re-written our Safeguarding Adults Procedures to reflect organizational changes. We continue to lead on a wide range of safeguarding related initiatives, including; falls prevention, patient safety, do not attempt resuscitation procedures, end of life care and the Deprivation of Liberty Safeguards for hospitals.

Raising safeguarding adults awareness across the wider health community is a key part of our safeguarding strategy and in 2010/11 we provided professional support, training and professional development events to a wide range of health practitioners including; General Practitioners, Dentists, Ophthalmologists, Pharmacists and hospice staff.

As part of our commissioning and performance management role, we have continued to embed comprehensive safeguarding quality standards into contracts with our providers. These standards include clear expectations that all health providers will demonstrate commitment to multiagency safeguarding work.

During 2010/11, NHS Bradford and Airedale has maintained consistent and active participation in the Safeguarding Adults Board, Delivery Group and sub-groups, including providing the chairperson to the Improving Practice Sub-Group. We also recognise the importance of effective multi-agency safeguarding work and continue to make a significant contribution to multi-agency training provided on behalf of the Safeguarding Adults Board.

In addition to supporting the strategic work of the Local Safeguarding Adults Board, in 2010/11 we have contributed to regional safeguarding developments through the work of the Regional Strategic Safeguarding Adults Network and the Regional NHS Commissioners Network. At a national level we were very pleased to be able to contribute to the recently published Department of Health safeguarding adults guidance for health services.

Looking forward to the coming year, we are likely to see considerable challenges as we enter a transitional period and work to support the development of emerging Clinical Commissioning Groups. NHS Bradford and Airedale will endeavour to take forward the new NHS guidance and will continue to work collaboratively with multi-agency partners across the District to safeguard adults at risk. Specifically we will work to; gain greater assurance regarding the quality of NHS funded care and nursing home placements, continue our work to support General Practitioners and other independent

contractors with safeguarding adults practice and work with advocacy groups and providers to ensure that practice is consistent with the Mental Capacity Act (2005) and Deprivation of Liberty Safeguards.

Bradford & Airedale Community Health Service (BACHS)

Bradford and Airedale Community Health Service provides a range of specialist Community Health Services across the District and is committed to ensuring all staff have the skills to identify abuse and safeguard their patients and clients.

During 2010 / 2011 BACHS reviewed the Safeguarding Adults Policy and training requirements in line with multi agency procedures. The organisation allocated Safeguarding Adults responsibility to the Head of Children and Family Services and Children's Safeguarding which facilitated cross fertilisation of learning from incidents across all service areas and provided assurance to the BACHS Board through the development of an annual safeguarding adults report.

The appointment of a part time nurse for safeguarding adults has strengthened the organisations monitoring and assurance processes through the implementation of data collection around referrals and concerns and the auditing of patient records around safeguarding practice compliance.

Monthly monitoring of training compliance across all staff groups and service areas is in place and reported through the Quality and Patient Safety Committee. All BACHS acquired category 3 and 4 pressure ulcers are reported to the safeguarding adults nurse and a root cause analysis is conducted and lessons learnt are cascaded across all service areas.

Bradford District Care Trust (BDCT)

Bradford District Care Trust provides a range of specialist health and social care services across Bradford, Airedale and Craven for people with mental health conditions and learning disabilities. All of the Trust's service users and family carers fall within the scope of adult protection procedures.

During 2010 / 2011 BDCT has continued to implement its safeguarding adult training strategy, aiming to ensure that all staff fully understand their roles and responsibilities. The Trust has also continued to ensure that its Community Team Leaders have advanced training to act as Adult Protection Risk Assessment Co-ordinators.

Increasing staff awareness has meant that adult protection referrals from BDCT have risen significantly. Year on year Trust staff are identifying more abusive situations and working with service users and other organisations to offer better protection.

BDCT continues to work closely with the multi agency partnership, contributing to the work of Safeguarding Adults Board and its sub groups. For the past 8

years it has seconded a worker to the Adult Protection Unit. The Trust continues to contribute to the pool of staff trained to deliver multi agency training across the district. The Trust also participates in the local Multi Agency Risk Assessment Conference (MARAC) concerning high risk domestic abuse.

Bradford District Care Trust Priorities 2011/12

- From the 1st April 2011 BDCT has being joined by a large cohort of staff from Bradford and Airedale Community Health Services as part of the Transforming Community Services (TCS) agenda.
- Work has commenced to integrate the safeguarding adult's policies from the two organisations and to implement a new training strategy. Since becoming one organisation safeguarding has been the subject of a Trust Board development day.
- Future Plans for the Co location of Safeguarding Children's and Adults Team are underway.
- Safeguarding interview questions will be incorporated in to all trust posts as part of the Safeguarding Children and Adult requirements and responsibilities will be clearly outlined in all job descriptions.
- A Safeguarding Awareness week is being planned for the Autumn
- A Trust wide strategic forum has being established to lead on the development of Safeguarding Adults and Children practice across the Trust and will be chaired by the Executive Director Lead for Safeguarding.
- A Safeguarding audit will be undertaken in the Autumn
- BDCT will continue to be an active member of Bradford Safeguarding Adults Board and its sub groups.

Bradford NHS Teaching Hospitals

The number of people in the hospital population who are vulnerable and have extra needs to safeguard them is increasing. This means our staff have to be informed and pro-active in working with other statutory authorities to ensure safety of these patients both during their hospital stay and on discharge. Most of the safeguarding problems experienced by vulnerable people are in their daily lives outside the hospital. The problems are often discovered when people come into hospital. This requires our staff to work closely with other agencies to ensure safety for people when they leave hospital. This can be Social Workers, Community Staff or the Police.

To ensure that concerns are dealt with in the most effective way, the Trust has

a Safeguarding Adults Co-ordinator post. This post is held by a Senior Manager whose role is to put structures in place to enable clinical areas to fulfill their responsibilities in safeguarding vulnerable people. The Trust also has a Safeguarding Adults Committee. The Committee reports to the Risk Management Steering Group. The purpose of the Committee is to work towards establishing a safeguarding culture in the organisation and put in place procedures that will recognise and alert whenever neglect or abuse is identified.

The Trust has implemented a major piece of work on assessing and learning from pressure ulcer incidents. All serious hospital acquired pressure ulcers are investigated and causation analysed to determine if there has been any failures in care and if there are any lessons to learn or improvements which need to be put in place. This is done using a Root Cause Analysis Tool and Action Plan.

We have been working jointly with staff in the Bradford District Care Trust's Learning Disability Service to support patients with learning disabilities when they come into hospital; this has greatly improved the hospital experience and increased our staffs' understanding of the special needs of these patients.

We provide extensive in-house training programme of our staff both on Safeguarding Adults and the Mental Capacity Act. A member of staff has completed the Training for Trainers Course and is contributing to District-wide training programme. In addition an E-learning module has been developed for Safeguarding and is part of the Mandatory Induction Programme. A Trust-wide audit is being done to check the knowledge and understanding of Safeguarding and Mental Capacity Act issues among our staff. The results will enable us to identify gaps in knowledge and plan focused training and improvements where indicated.

Our plans include:

- increasing reporting of issues and developments to the Trust Board to improve their awareness of Safeguarding Adults issues.
- using the Trust-wide Safeguarding Committee to improve clinical staffs' confidence in safeguarding procedures for patients, and promote learning from complaints.
- working with other colleagues and agencies to develop information for service users.

Bradford Domestic Abuse Partnership

In May 2010 the Bradford Domestic Abuse Partnership was rated as 'Excellent' in an external evaluation commissioned by the Home Office. The 3 day evaluation report described the Bradford Domestic Abuse Partnership as "a very good example of a coordinated community response to domestic abuse...This partnership can stand comparison against any similar structure

within the UK and it has much to be proud of in terms of its future vision, strategic leadership and service provision.”

In considering Bradford’s success the report highlights some of the relevant factors as including:

- The role of the Local Authority in providing concerted and substantial leadership and commitment
- A history of multi-agency working and a strong and active specialist sector
- a remarkable consistency of approach to the issue of domestic abuse
- the sense of the need to work together to provide specialist services for women, work in an integrated and coordinated way and for each individual agency to respond effectively was very powerful.

During the football World Cup 2010 a district wide campaign was run aimed at reducing domestic violence in the district. The number of reported incidents during this time fell to the lowest in Bradford since 2004.

During 2010, the Multi-Agency Risk Assessment Conferences (MARACs) were externally evaluated. The Co-ordinated Action Against Domestic Abuse (CAADA) Quality Assurance exercise considered how well the Bradford MARACs met CAADA’s ten principles for an effective MARAC. CAADA described the Bradford MARACs as well established with evidence of good practice observed in many areas. They highlighted the following in respect of both MARACs:

- A range of agencies are referring to the MARAC
- Research and information sharing is a strength of the MARAC as is administration
- There were elements of good practice within action planning such as joint actions between agencies and engagement with the victim prior to the MARAC. Areas for development focused on actions being SMART (specific, measurable, achievable, realistic and timely).

During 2010/11 the MARACs heard 500 cases, an increase of 181 cases since 2009/10. The repeat incident rate for MARACs in Bradford has reduced from 28.8% during 2009/10 to 20.2% during 2010/11.

16 Days of Action Against Gender Violence is an international campaign which runs November 25th and December 10th. During 2010, the Bradford Domestic Abuse Partnership used the campaign to raise awareness of the prevalence of violence against women and girls and to promote the extensive range of services available across the Bradford District. The campaign was used to launch the Bradford Tackling Violence Against Women and Girls Strategy 2010 – 2013.

Supporting People

The Supporting People programme governs the funding and contract management of services that support a wide range of adults at risk. The programme is managed in Adult and Community Services and forms part of a new and integrated adult care and housing related support commissioning service.

Safeguarding and the protection of adults at risk continue to form part of our strategy to reduce risk to those in need. Newly commissioned and remodelled services embed the principle of prevention and our quality assurance processes ensure that risks are minimised through good quality service delivery.

Work has taken place to integrate quality assurance with care so that there is a consistent and joined up approach to managing contracts where the principles of risk reduction are applied throughout the care and housing related support sector. The Bradford Integrated Quality Assurance Framework takes the best and appropriate safeguarding standards from across care, health and housing related support and merges into common standards that all providers should be working toward. We will apply these standards to all contracts and there is an expectation that providers demonstrate they are compliant with them.

In 2011 we have seen great achievements in the Supporting People sector with a marked improvement in demonstrably higher standards of service delivery. We have driven service improvement and taken difficult decisions to decommission where standards are not being met. This combined approach is resulting in the best quality services where we can be confident that providers have in place the right policies to protect adults at risk.

In 2011 a new framework agreement for people with learning disabilities is being introduced. Suppliers on the framework have successfully demonstrated that they provide quality services with safeguarding policies and procedures that meet with expected standards. This means that we can have greater assurance that people who receive support from suppliers on the framework are safeguarded against abuse. Similar process is under consideration for other client groups.

West Yorkshire Police

The last 12 months have seen some significant changes in relation to safeguarding adults within the Bradford District. The volume of adult protection cases referred to the police has increased considerably over the last 12 months rising from 350 cases on 2009/10 to 452 cases in 2010/11; this increase reflects a similar trend across West Yorkshire. Referrals received range from concerns of emotional or financial abuse to serious assaults.

West Yorkshire Police maintain that 'Safeguarding is everybody's business' and therefore all police officers and police staff have a responsibility to identify and

protect the public. Neighbourhood Policing Teams work closely with the communities they serve and are in an ideal position to identify when an adult may be being abused. Over the last year 30 NPT officers have attended an Adult Protection Awareness Course to give them a greater insight into the issues and raise their awareness around the signs and symptoms of abuse so that they can be more effective in identifying when abuse may be taking place.

In December 2010 a review was undertaken of the specialist Safeguarding provision across the Bradford District and following recommendations from the review on 30 March 2011 a Bradford District Safeguarding Unit was established under the management of Detective Inspector Karen Ferris. The new unit has dedicated and specialist staff working across the disciplines of Domestic Violence, Adult Protection, Missing Persons and Child Sexual Exploitation. This new unit means that for the first time partner agencies and the public in Bradford have a single point of contact with the police for these disciplines.

Following a West Yorkshire wide review of Safeguarding and a successful pilot at Calderdale whereby the Child and Public Protection Unit was amalgamated with the Safeguarding Unit we anticipate that over the next 12 months the District Safeguarding Unit will be further strengthened by child and Public Protection officers and will provide the specialist policing response to all safeguarding issues.

At a National level the Association of Chief Police Officers (ACPO) have commissioned the National Police Improvement Agency (NPIA) to produce guidance for the Police Service in relation to 'Safeguarding and Investigating the Abuse of Vulnerable Adults'. This guidance will be the first National guidance produced specifically for the police service and its publication will raise awareness of abuse and provide a more consistent approach in dealing with Adult Abuse. It is anticipated that this advice will be available later this year.

West Yorkshire Probation

West Yorkshire Probation Trust in Bradford contributes to Adult Safeguarding by supervising a range of adult offenders in the community - many of whom have been convicted of serious crimes against victims - some of whom may be regarded as 'vulnerable'. Our primary mechanism for managing those deemed most serious is MAPPA (Multi Agency Public Protection Arrangements) - which places a statutory duty on partner organisations to cooperate in the management of High Risk offenders living in the community. An area to be developed is the better identification off those offenders appearing in MAPPA whose victims might be deemed to be 'vulnerable' - we are currently therefore trialling an additional screening process with the Adult Protection Unit (APU).

In 2010/11 there were an average of around 30 High Risk offenders managed by Bradford MAPPA at any one time. This means that all the agencies working with these offenders are involved in planning our work - both the assessment and management of the risks posed - the aim being to put in place measures

to safely monitor, manage and limit the risks: these 'plans' are regularly reviewed. By their nature these offenders tend to be those who have committed the most serious violent offences, or who have convictions for serious sex crimes. The offenders in MAPPA are a dynamic group - and the number screened in or out over the course of a year is much higher - there were 190 cases screened last year.

Probation interventions through accredited programmes also has an impact on vulnerable adults by seeking to mitigate future risk through group based programmes that aim to reduce the likelihood of reoffending. The Integrated Domestic Assault Programme and the Sex Offender Treatment Programme are both nationally accredited and available for offenders who fit the criteria. These programmes have good rates of success although tend to be over-subscribed: we continuously work to streamline entry processes and to ensure the offenders benefit from attendance. To this end IDAP has now been augmented by a reduced 'dosage' programme run as a specified activity - Safer Relationships - which is appropriate for offenders whose domestic violence history is less serious but never-the-less significant.

As one of the few agencies working directly with perpetrators, Probation's contribution to helping to protect vulnerable adults is one of helping to build good assessments of risk and, through effective partnership and close supervision, the management of risk. In relation to MARAC Probation staff regularly contribute reports, or help deliver action plans, through our two Designated Senior Probation Officers who attend the MARAC's in Bradford North and South. An area of development for Probation is to better size this cohort by improved internal accounting of the numbers of cases we have active in MARAC. Another area we want to improve on with the APU is the cross-referencing with those offenders convicted of Domestic Violence who are linked into MARAC by a common victim - again this is an area currently being looked at by Probation and the APU.

Adult and Community Services

It is good to report a year of progress in promoting safeguarding within the service at a time of major change for both ourselves and the wider Council.

There is evidence of increased recognition of safeguarding issues resulting in action by our staff as recorded in alerts and follow up action. Managers have been supported by an active APRAC support group which has been well attended and APRACs are also completing the re-accreditation process. The implementation of refresher training is evaluating positively as a support to them in their roles. The Department has undertaken an audit of internal practice and used this to help improve procedures and training for staff.

In November 2010 the service launched a new Access and Information Service with a District Wide responsibility. This has enabled us to make significant improvements in the handling of initial contacts and better co-ordination with

the SAB Safeguarding Unit. Together they are providing a better response to potential safeguarding issues and it is hoped the planned NHS "111" contact service will allow even greater scope for co-ordination of response to requests for advice, information and assistance.

Increasingly the role of the Council is that of commissioner of services and there is good evidence that introduction of a quality framework into the approach is producing better quality standards which will help address some of the concerns about externalising services. This is particularly important as increasing numbers of people elect to manage their own care and take a personal budget in the form of a direct payment. We are supporting this in a number of ways and it is worth highlighting the prepaid cards. This payment card allows electronic recording of all transactions allowed greater transparency in the use of funds and earlier detection of any irregularity. Hopefully this will help protect service users from any misuse of their funds as personalisation is extended across social care and introduced in health.

West Yorkshire Fire and Rescue Service

West Yorkshire Fire and Rescue Service (WYFRS) has been a member of Bradford's Safeguarding Adults Board (SAB) since the beginning of 2008, recognising that safeguarding children and vulnerable adults is everybody's business, and remains committed to playing an active role in safeguarding work. The involvement with Bradford SAB assisted in demonstrating to other West Yorkshire Districts SAB's that we were an important partner to have around the table, and we now have representation on all 5 SAB's.

WYFRS fully implemented its new 'Safeguarding Children and Vulnerable Adults Policy and Procedures' late December 2010, and since then has seen an increase in alerts raised by staff via the 'cause for concern' form. WYFRS High Risk Manager has lead responsibility for ensuring the policy and procedures are effectively implemented, and referrals are made to the safeguarding units in a timely manner. In Bradford alone, operational crews and Prevention staff are responsible for carrying out over 16,000 home fire safety check visits each year, and are best placed to identify any safeguarding concerns within the home environment. To support the staff in raising concerns, WYFRS is in the process of developing a safeguarding e-learning training package to cover 'recognising and responding to abuse', and once this is rolled out in early 2012, it will be a mandatory course for all WYFRS staff to complete. We will be liaising with the District safeguarding units over the training content. With our new robust reporting procedures, we can effectively record safeguarding referral activity and give appropriate feedback on actions taken to the staff who have raised the concern, thus giving them the confidence to raise concerns in the future. All safeguarding activity is reported to the WYFRS's Driving Diversity Board on a quarterly basis.

WYFRS also continues to actively work with the Bradford MARAC and MAPPA processes to ensure that all fire safety issues are raised and interventions put

in place for those most at risk, recognising the importance of a multi-agency approach to reducing injury amongst vulnerable adults.

Achievements and Future Priorities

The Board's Business Plan 2010/12 sets out key actions identified to enhance and improve safeguarding across the partnership. The Business Plan is structured around four main themes:

Key Theme One:- Governance and Partnership

Ensure that SAB governance structures and arrangements are strengthened and are robust to enable it to fulfil its strategic role in leading inter-agency partnership working at all levels of safeguarding adults work.

Key Theme Two:- Practice and Quality Standards

Ensure that safeguarding practice is of a high standard in line with agreed policy and procedures and commissioning standards

Key Theme Three:- Empowerment and Engagement

Ensure that people know how to access safeguarding and are supported through the safeguarding process. Also that people have the opportunity to feedback on their experience of the process.

Key Theme Four:- Workforce development

Ensure that a wide and varied range of training and development opportunities are available for frontline staff and managers across all agencies to support the safeguarding of vulnerable adults.

Appendix 3 sets out progress made on the Business Plan actions and ongoing priorities for 2011/12.

Particular achievements in 2010/11 were:

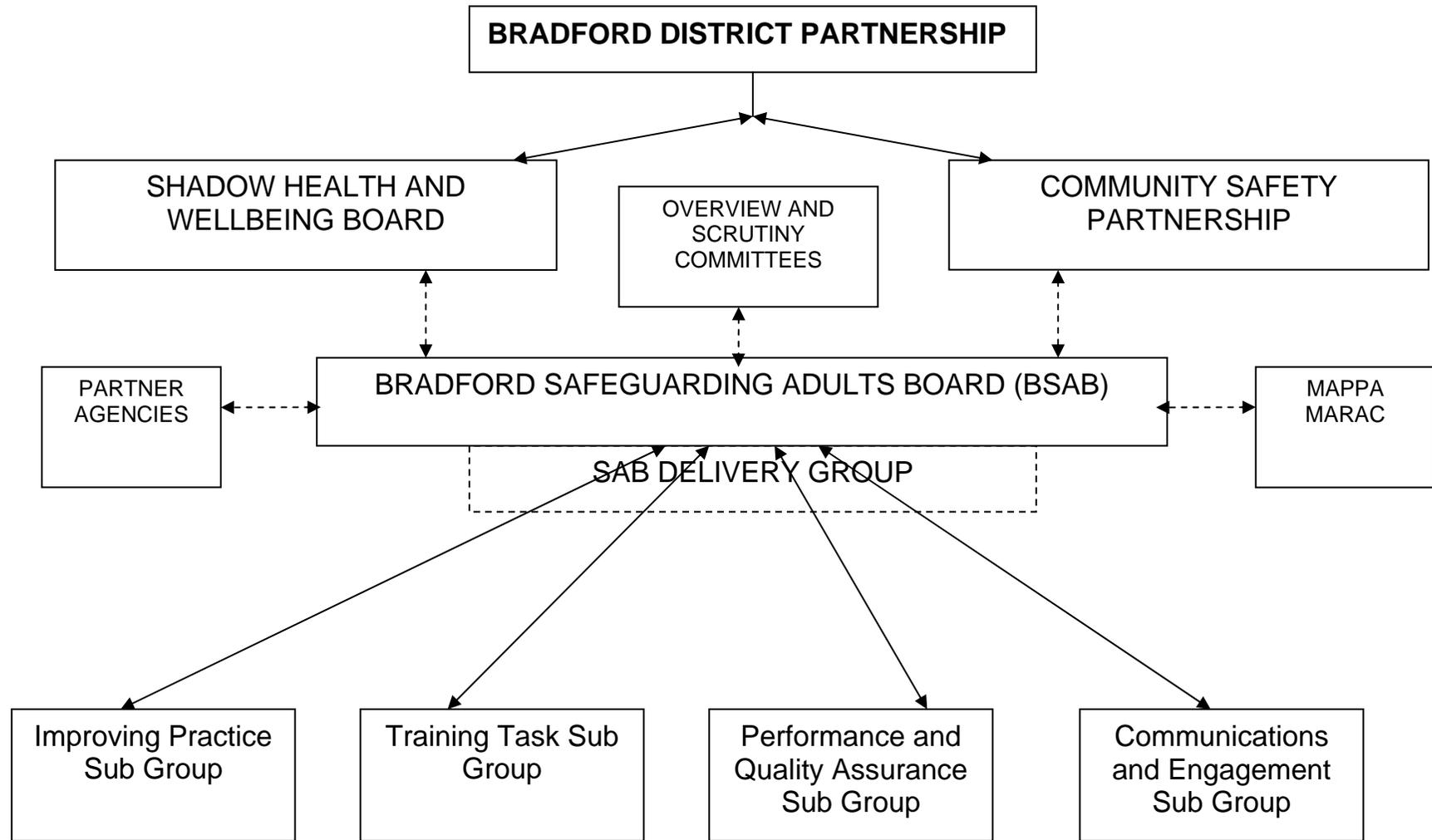
- Completion of the Serious Case Review and implementation and ongoing monitoring of the agreed action plan
- Strengthening of the Board's governance arrangements and capacity to exercise its leadership role
- Review of safeguarding training and development of specific tailored training courses
- Support arrangements developed to support Adult Protection Risk Coordinators
- Development and adoption of a risk assessment tool to support the management of risk
- Strong links established with West Yorkshire Probation Service and MAPPA arrangements
- Implementation of an electronic adult protection referral system to improve access to the public and professionals

Appendix 1 - Members of the Safeguarding Adults Board in 2010/11

Organisation	Representative
Bradford Adult and Community Services	Moira Wilson, Chair, Strategic Director, Adult and Community Services
Bradford Adult and Community Services, Integration and Transitions	Guy Van Dichele, Assistant Director, Integration and Transitions
	Deputy: John Howarth, Service Manager, Safeguarding, Quality and Customer Care
Bradford Adult and Community Services, Operational Services	Fred Bascombe, Service Manager, Disabilities
	Deputy: Jan Burrows Service manager, Assessment & Support
West Yorkshire Police	Chief Inspector Marianne Huisson
NHS Bradford and Airedale	Jo Coombs, Director of Nursing, Quality and Partnership
	Deputy: Liz Allen, Deputy Director of Nursing
Airedale NHS Hospital Trust	Elaine Andrews, Assistant Director for Patient Safety
	Deputy: Noel McEvoy, Safeguarding Adults Lead
Bradford Teaching Hospitals Trust	Jackie Hansford, Safe Guarding Lead
Bradford District Care Trust	Nicola Lees, Executive Director of Operations and Nursing
Bradford and Airedale Community Health Services	Cathy Wolfendin, Head of Children and Family Services
West Yorkshire Fire and Rescue Service	Ruth Cornelissen, Assistant Senior Prevention Manager
West Yorkshire Probation Service	Stuart MacPherson, Area Manager
Chair, Training Task Sub-group	Noel McEvoy, Safeguarding Adults Lead, Airedale NHS
Chair, Improving practice Sub-group	Matt O'Connor, Head of Safeguarding adults for NHS Bradford and Airedale
Chair, Communication and Engagement Sub-group	Chief Inspector Marianne Huisson
Chair, Performance and Quality Assurance Sub-group	John Howarth, Service Manager, Safeguarding , Quality & Customer Care
InCommunities	Harry Whittle, Director of Estate & Support Services
Supporting People Provider Forum	Claire Blacka
Independent Sector	Konrad Czajka
	Irene Jest/Gill Sangster
Choice Advocacy	Dave Rosser

Organisation	Representative
Alheimers Society	Paul Smithson
Community Safety Partnership / Domestic Abuse Partnership	Val Balding
Strategic Disability Partnership	Gill Bowskill
Bradford Adult Protection Unit	Robert Strachan Debi Morton

Appendix 2 – Bradford Safeguarding Adults Board structure and reporting relationships.



Accountability link →

Reporting link - - - ->

Appendix 3 - Bradford Safeguarding Adults Board Business Plan 2010/12 Progress Report

Key Theme One: Governance and Partnership

Ensure that SAB governance structures and arrangements are strengthened and are robust to enable it to fulfil its strategic role in leading inter-agency partnership working at all levels of safeguarding adults work.

Key Actions	Responsible Subgroup	By When	Key milestone / desired outcome	Progress
Introduce proposals to strengthen governance of the SAB, including establishing SAB Delivery Group		March 2010	Delivery Group and new subgroups in place / enhanced capacity and coordination of actions to deliver SAB priorities	Achieved
Establish a Performance and Quality Assurance subgroup	Delivery Group	March 2010	P and QA subgroup established / enhanced capacity to provide assurance that policy and procedures are consistently applied	Achieved
Review SAB and subgroups membership, terms of reference and establish risk register for SAB and subgroups	Delivery Group	November 2011	Agreed SAB Memorandum of Understanding / robust governance arrangements in place	Draft MOU to be presented to Board meeting in June 2011 with sign off at September 2011 meeting
Oversee implementation of the recommendations from Serious Case Review, monitor delivery of action plans and report back to SAB	Improving Practice	March 2012	Implementation of action plan recommendations / lessons learnt and improved practice	Action plan agreed, positive progress on implementation and regular updates provided to SAB. Improving Practice subgroup to review SCR protocol
Work with GP Alliances to ensure that safeguarding adults is given high priority in planned GP consortia arrangements	Communication and Engagement	March 2012	Delivery of planned training and resource pack for GP's / increased priority given to safeguarding adults	Training to be delivered at GP Protected Learning Time events in 2011 and 2012. Adult protection resource pack in preparation.
Develop a more strategic response to hate crime and the abuse of vulnerable adults	Communication and Engagement	June 2011	Formal reporting relationship established between SAB and Community safety Partnership / community safety improved for vulnerable adults through engagement with CSP and other agencies	Report presented to CSP in June 2011. Reporting relationship agreed.

Key Theme Two:- Practice and Quality Standards

Ensure that safeguarding practice is of a high standard in line with agreed policy and procedures and commissioning standards.

Key Actions	Responsible Subgroup	By When	Key milestone / desired outcome	Progress
Review Adult Protection Unit functions and outputs and develop a service specification for the Unit	Delivery Group	March 2012	Review completed and agreed specification / clarity of roles and responsibilities	Capacity of APU increased as part of Council restructure. Future consideration of opportunities for more integrated safeguarding arrangements across partner agencies.
Review with commissioners safeguarding adults elements of both the Council's contracts and the NHSBA standards and agree a set of common requirements for inclusion in all contracts held by the council and NHSBA	Performance and Quality Assurance	March 2012	Safeguarding standards embedded into Quality Assessment Framework and contracts / people benefit from quality services	Jointly agreed framework is being progressed by commissioners with input from safeguarding leads
Develop a safeguarding performance minimum data set for key partners to improve performance management	Performance and Quality Assurance	June 2011	Regular performance reports to SAB / improved understanding of safeguarding activity across the District	Regular performance reports presented to P and QA subgroup and SAB. Using AVA data to benchmark with other authorities
Improve practice in relation to recognising the links between hate crime and abuse of vulnerable adults	Improving Practice	March 2012	Established links and working relationships / community safety is improved for vulnerable adults	Links established with CSP Chairs Coordinating Group and training course being developed for Neighbourhood staff
Audit current safeguarding arrangements and practice against the ADASS standards and the Department of Health Empowerment and Autonomy Checklist	Performance and Quality Assurance	November 2011	Audit completed / areas for development identified for business planning	Initial audit carried out against ADASS standards as part of regional Joint Improvement Partnership work programme
Review the format of the Adult Protection Procedures to ensure they are user friendly	Improving Practice	March 2012	Review of procedures completed / procedures are accessible and user friendly for staff and the public	Review of website procedures underway. Discussions across West Yorkshire to develop joint policies and procedures
Develop a system of case file audits in Adult and Community Services and Bradford District Care Trust teams using an agreed audit tool for safeguarding	Performance and Quality Assurance	March 2012	Case file audit system in place / assurance that policies and procedures are being followed.	Case file audit undertaken in Adult and Community Services – action plan being developed. Further work being undertaken with BDCT

Key Theme Three:- Empowerment and Engagement

Ensure that people know how to access safeguarding and are supported through the safeguarding process. Also that people have the opportunity to feedback on their experience of the process.

Key Actions	Responsible Subgroup	By When	Key milestone / desired outcome	Progress
Identify and develop methods to receive feedback from service users/patients on their experience of the safeguarding process	Communication and Engagement	September 2011	Mechanisms in place for service user representation and involvement/ feedback used to improve practice and outcomes	C and E subgroup established. Service user focus group established.
Review methods of service user representation and involvement in the development of safeguarding policy and practice	Communication and Engagement	September 2011	Mechanisms in place for service user representation and involvement/ feedback used to improve practice and outcomes	C and E subgroup established. Service user focus group established.
Develop a risk assessment tool and protocol.	Improving Practice	September 2011	Risk assessment tool in place / vulnerable people exercise control over their lives and are supported to manage risks	Completed
Review of 'Your Life, Your Choice' (Personalisation programme) to ensure safeguarding is built into policy and practice	Improving Practice	March 2012	Review completed with recommendations / assurance of practice relating to personal budgets	Bradford Independent Reviewing Team established, piloting of pre-payment card to safeguard against financial abuse and establishment of Support Options Team to provide greater scrutiny of service delivery
Agree, implement and promote the safeguarding communications and engagement plan to develop wider awareness of safeguarding	Communication and Engagement	March 2012	Communication and Engagement plan agreed / clear mechanisms to communicate and engage with all stakeholders	Current communications plan being reviewed and developed. Easy Read guide developed and generic leaflet – How to recognise and respond to abuse.
Consideration of opportunities to develop greater awareness of safeguarding in neighbourhoods, locality working etc..	Communication and Engagement	March 2012	Established links and working relationships / community safety is improved for vulnerable adults	Links established with CSP Chairs Coordinating Group and training course being developed for Neighbourhood staff

Key Theme Four:- Workforce development

Ensure that a wide and varied range of training and development opportunities are available for frontline staff and managers across all agencies to support the safeguarding of vulnerable adults.

Key Actions	Responsible Subgroup	By When	Key milestone / desired outcome	Progress
Undertake a review of the organisation and coordination of multi-agency training arrangements	Delivery Group	September 2011	Review completed / strengthening of coordination of training arrangements	Training coordination capacity to be developed
Review the content of current training courses and development of a trainer resource pack	Training	March 2012 – ongoing activity	Review completed and areas of development identified / staff are confident in their role and responsibilities	All training courses reviewed – APRAC training updated and Role of Service Managers training pack updated. New practitioner adult protection and risk assessment course introduced.
Development of support and learning opportunities for Adult Protection Risk Assessment Coordinators and managers	Training September	2011	New development opportunities in place / staff are confident in their role and responsibilities	Mandatory APRAC refresher course introduced, APRAC support group established and joint forums developed with Childrens

**Safeguarding Adults Board:
members:**

Airedale 
NHS Foundation Trust

Alzheimer's Society


Bradford and Airedale

Bradford District 
Care Trust

Bradford Teaching Hospitals 
NHS Foundation Trust

Bradford 
Safeguarding Children Board


BRADFORD





 Care Quality
Commission



 REGISTERED
NURSING HOMES
ASSOCIATION
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