Safeguarding

Score: 3

3 - Evidence shows a good standard

What people expect

I feel safe and am supported to understand and manage any risks.

The local authority commitment

We work with people to understand what being safe means to them and work with our partners to develop the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect. We make sure we share concerns quickly and appropriately.

Key findings for this quality statement

Safeguarding systems, processes and practices

There were effective systems, processes and practices to make sure people were protected from abuse and neglect. Managers carried out regular audits of safeguarding cases to ensure procedures were followed and this was reported to a corporate board. Safeguarding was embedded throughout front line teams with a specialist worker within the out of hours team and good internal relationships between safeguarding and other teams including the quality assurance and locality teams.

There were strong partnerships through the Safeguarding Adults Board working across the 3 local authorities in the place of Berkshire West. This ensured a co-ordinated approach to safeguarding adults in the area. Partners told us, there were close working relationships, and they were in close contact with each other, which avoided delays and resulted in better outcomes for people.

There was a strong multi-agency safeguarding partnership in place across Berkshire West, with clearly defined roles and responsibilities for responding to concerns. Information and learning were shared across all local authorities in the safeguarding board partnership. The board was well attended by partners including health, care providers and the voluntary sector and advocacy providers. The presence of the voluntary sector and advocacy providers was seen as essential to ensure the board heard peoples voice and there was a commitment to broaden the voluntary sector presence to include smaller local groups providing services at community level. The ASCS data reflected 91% of people who use services said those services had made them feel safe. This was above the England average of 85%. In the SACE 85% of carers said they felt safe which was above the England average of 80%.

Staff told us they had relevant training, support, and supervision to enable them to carry out their safeguarding duties effectively. There was a safeguarding learning and development group that supported training and ensured that training covered areas identified by Safeguarding Adult Reviews. The learning and development group monitored the effectiveness of training and impact on practice. Training was available in a range of formats in addition to formal training there were podcasts and webinars to increase accessibility.

Responding to local safeguarding risks and issues

The local authority worked closely with partners to reduce risks to prevent abuse and neglect from occurring. There was a well-established Safeguarding Adult Review (SAR) panel chaired by the ICB, covering the 3 authorities in Berkshire West. There had been no SARs within West Berkshire, however learning was taken from SARs in neighbouring authorities to reduce risks and prevent similar occurrences in West Berkshire. For example, there was a commitment to deepening understanding of the Mental Capacity Act 2005 and embedding learning beyond local authority staff. As well as responding to SARs the safeguarding board also carried out thematic based audits and had done an appreciative enquiry around self-neglect to understand strengths and areas for improvement.

Responding to concerns and undertaking Section 42 enquiries

Safeguarding teams worked proactively with providers. Providers told us, there was an open and supportive culture focussed on keeping people safe. There was a system in place to manage care quality issues that were raised but which did not meet the safeguarding section 42 threshold. This meant issues could be raised and dealt with, to prevent risk escalating and therefore preventing a safeguarding concern arising in the future.

When safeguarding enquiries were conducted by other agencies there were protocols in place. For example, the manager of the safeguarding team delegated some enquiries to health and had regular meetings with the health trust so they could give updates on their part of the enquiry and ensure oversight. There were clear standards and quality assurance in place for conducting Section 42 enquiries. A Section 42 enquiry is the action taken by a local authority in response to a concern that a person with care and support needs may be at risk of or experiencing abuse or neglect. There were no safeguarding concerns awaiting initial review. All decisions regarding concerns were made in 72 hours with enquiries starting on the day the concern was raised. Enquiries were then prioritised and picked up immediately in locality teams. Managers used a dashboard to monitor active Section 42 enquiries, following up any that had been open for more than 30 days.

Partners told us, there was good communication from safeguarding teams informing them of the outcomes of safeguarding enquiries. There was a waiting list in relation to Deprivation of Liberty Safeguards (DoLs) applications where some people had been waiting over a year. 250 out of 561 assessments in the year 2023/24 were still waiting for a decision. There were 22 applications that had been waiting over a year. DoLs is when people in care homes and hospitals are deprived of their liberty in a safe and correct way, to receive care and treatment. This is legally authorised under the Mental Capacity Act 2005 and is only done in the person's best interests and when there is no other way to look after them. The DoLs waiting list was managed using the ADASS risk-based system to prioritise cases. Safeguarding cases were prioritised, and the hospital discharge team said where they had urgent applications these had been dealt with immediately. There was an awareness through leadership in the local authority that the backlog created both a financial and reputational risk for the local authority. The DoLs team had fortnightly meetings with the legal team to discuss ongoing DoLs cases and to get guidance on priorities. Best interest assessors worked closely with care homes, and with support for families. As part of assessments, they could also pick up on any care quality concerns and look at adult social care records to understand if alternative less restrictive approaches had been tried.

Making safeguarding personal

Safeguarding enquiries were carried out sensitively without delay, keeping the wishes and best interests of the person central. Making safeguarding personal was at the heart of the safeguarding processes. Frontline staff told us they wouldn't close a case if they had not got the person's voice but would mitigate risk whilst waiting. People were supported through the safeguarding process, and teams had a good understanding of ensuring people were supported in line with their human rights and the implementation of the Mental Capacity Act 2005 and Equality Act 2010. However, the team highlighted that there were sometimes delays caused by a lack of advocates. This was being addressed by the recruitment of more advocates so it was anticipated this would be resolved in the future.
