



Adult Social Care Safeguarding Report

July 2020

Commissioned by
Nottinghamshire Adults Safeguarding Board

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Introduction

In November 2018 Healthwatch Nottingham and Nottinghamshire (HWNN) was commissioned by Nottinghamshire Adults Safeguarding Board (NSAB) to assist in collecting experiences of the individuals who had been part of a safeguarding enquiry using the Making Safeguarding Personal Outcomes Framework (MSP).

MSP is described as follows:

‘The Making Safeguarding Personal (MSP) programme emphasises that safeguarding adults should be person centred and outcomes focussed.’

The aims of this project were to:

- Understand what people who are engaged and/or consulted with experiences of the safeguarding intervention were.
- Incorporate the findings into a report for Nottinghamshire Adults Safeguarding Board
- Use the findings to inform best practice in the delivery of MSP between health and care professionals and patients within services

Note: It was the actual process of referral and enquiry that was being analysed, not the details of investigations.

Background

Rationale for questions/notes on interpretation

The Adult Social Care Outcomes Framework (ASCOF) provides measures around how well services are meeting user and carer needs, and whether those services are promoting quality of life and support that is both personalised and preventative. The ASCOF is not a mandatory return presently, and the national measure for Safeguarding outcomes is provided to the NHS Information Centre through the Safeguarding Adults Collection. The use of the ASCOF provides a more focussed approach in engagement with adults at risk and circles of support to learn and improve practice from people who experience the service. This approach would also enable the Local Authority to analyse their internal self-assessment of the standard of safeguarding practice from quality assurance processes, against what adults at risk, family, friends and advocates experienced in a safeguarding intervention. Due to this the report is unable to make comparisons between Councils as there is no national benchmark relating to this style of engagement.

A national Safeguarding Working Group was established and developed the ASCOF measures tasked with developing sector approaches and data capture. These included:

- Department of Health (DH) policy
 - Care Quality Commission (CQC) representatives
 - DH and HSCIC statisticians
 - Council representatives
 - Association of Directors of Adult Social Services (ADASS) and Local Government Association (LGA) representatives
 - Researchers from the Social Care Workforce Research Unit at King's College, London
-
- The questions used were based on the Adult Social Care Safeguarding Guidance document provided by the Health & Social Care Information Centre (hscic).

To build on this work further local groups were consulted to ensure the approach was inclusive and asking the right questions to improve services i.e. Nottinghamshire Learning Disability and Autism Partnership Board and Disability Independent Advisory Group. This resulted in the developed questions receiving an additional level of screening before being selected as an effective way of seeking views about experiences of safeguarding enquiries. The agreed approach and information was proposed to be collected through a user survey or telephone contact in line with the ASCOF guidance, with the addition of face to face interviews being included as an option to maximise the methods of gaining feedback. Health watch Nottingham and Nottinghamshire as an independent organisation was selected by Nottinghamshire County Council in collaboration with Independent networks to provide credibility, consistency and reassurance to participants.

Q1: “Did you feel listened to during conversations and meetings with people about helping your relative or client feel safe”

This question aims to capture if the participant felt they were involved in the safeguarding enquiry as much as they wanted to be and whether they thought their view was heard and taken into consideration.

Q2: Did you get information during the concern? This could be spoken or written (all participants)

This question aims to capture whether participants were involved in the safeguarding enquiry as much as they wanted to be and whether they were kept up to date with what was happening.

Q3: Were you able to understand the information given to you when people were trying to help you stay safe during the concern?

This question aims to understand whether people understood the information they were given and that professionals were pitching the information at the correct level or taking time to explain the information given to participants.

Q4: How happy are you with the end result of what people did to try and keep your relative/client safe?

This question aims to understand how satisfied people were with the outcome of the safeguarding enquiry.

Q5: How happy are you with how people dealt with the concern throughout? (All participants)

This question aims to understand whether people were satisfied with the way they were treated during the safeguarding enquiry and the professionalism of those involved.

Q6: Do you feel that your relative/your client are safer now because of the help from people dealing with your concern?

This question aims to understand if what the Local Authority and partners did during the safeguarding enquiry and if actions taken have helped the adult at risk to feel safer, or whether those that supported the adult at risk feel that the adult at risk was made safer.

Reference: Adult Social Safeguarding Survey Guidance

Authored by: Adult Social Care Statistics Team Health and Social Care Information Centre

Published by Health and Social Care Information Centre

Our Approach and Survey Details

Details of participants who had given consent to be interviewed by HWNN were forwarded by Nottinghamshire County Council with service user consent being obtained, or a best interest decision being made by an advocate if the adult lacked capacity.

Details were logged by the HWNN Outreach and Engagement team who contacted adults at risk (or representatives) who had given their consent directly.

Surveys were carried out between 23 January 2019 and 26 June 2019 and were conducted either face to face or via telephone. (Some participants were uncontactable or had withdrawn consent and so could not be engaged with).

Interviewees were divided into three categories as follows:

- | | |
|---|----|
| • Adult at Risk | 6 |
| • Relative, friend or carer | 19 |
| • Independent Mental Capacity Advocates (IMCAs) | 6 |

Number of referrals from Nottinghamshire County Council	44
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Number of face to face interviews completed	2
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Number of interviews by telephone completed	29
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Total number of interviews completed	31
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Number of mis-referrals	1
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Total number of referrals who were unresponsive*	13
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*This included participants who had withdrawn consent (5) or were uncontactable/did not want to engage (8).

The surveys consisted of 8 questions in total. Questionnaires that were for the 'Relative/Friend/Carer' group had an additional variant question that applied if the service user was deceased.

In consideration of service user's capacity, a series of prompt cards were created to compliment the spoken questions. It was not necessary to use these cards during the individual surveys because only two interviews were face to face where they could have potentially been deployed.

Subsequently, all data collected was entered into SNAP surveys for analysis.

Data analysis was carried out by the Evidence and Insight Project team along with writing of the report.

Executive Summary

Unless you ask how do you know?

It is a significant demonstration of the transparency of governance processes that the users of services are asked about their experiences. This can be undertaken in a variety of ways but in order to ensure full and frank feedback respondents need to feel safe and secure that there will be no perceived repercussions. Using an independent partner to explore service user experiences is the hallmark of good practice and Nottinghamshire County Council should be commended on their robust approach regarding safeguarding processes for adults at risk.

Nottinghamshire Adult Safeguarding Board-The Aim of the Commissioned Evaluation

Healthwatch Nottingham and Nottinghamshire (HWNN) was contracted by Nottinghamshire County Council Adults Strategic team to evaluate the Local Authority's developments in meeting the Care Act 2014 requirements. The purpose of this evaluation is to promote and measure practice that supports an outcomes focus and person led approach to safeguarding.

Healthwatch Nottingham and Nottinghamshire

Healthwatch Nottingham and Nottinghamshire is an independent organisation that helps people get the best from their local health and care services. We work to give participants strong voice that is heard by those who design and deliver services.

We do this by listening to views and experiences of local health and care services, the good or not so good. We then use them to raise awareness of key issues.

Because we are an independent statutory body (established under the Health Social Care Act 2012) and cover all local NHS and social care services we can see, and highlight, concerns that others may not be able to.

The project objectives were

- To survey any adult with a care and support need who meets the criteria for a section 42 enquiry from 1st November 2018 to 15th March 2019. (Subsequently extended until the end of June 2019)
- To summarise the findings in a report and submit conclusions and recommendations from consultees to promote and measure practice that supports an outcomes focus and person led approach to safeguarding.

In addition, Healthwatch were asked to identify a case study for presentation to the Nottinghamshire Adults Safeguarding Board (NSAB). This demonstrates NSAB's and Nottinghamshire County Council's commitment to hearing the participants' voice at all levels in the respective organizations. Ideally this would be an adult at risk to present the lived experience of the safeguarding process. This would enhance the findings of the report for the board.

Both the 'Adults at Risk' and 'Relatives/Friends/Carers' groups, reported poorer communication between the Safeguarding teams and participants which was also reflected in slightly worse levels of understanding within these two groups than the IMCA group.

In the 'Relatives/Friends/Carers' group, there was a level of dissatisfaction associated with unhappiness with efforts made to keep their relative/friend/client safe.

Both groups exhibited examples of lack of awareness of boundaries/responsibilities between the Safeguarding team, themselves and third parties.

There were several references to safeguarding issues at Care homes.

Adult at Risk

Out of the 6 respondents to this category, 5 indicated that they felt they were always listened to or listened to quite a bit. Another 3 indicated that they felt that they had received a lot or quite a lot of information.

Out of the 6 respondents to this category, 5 indicated that they felt they had been able to understand all or most of the information given to them. Additionally, 5 respondents indicated that they were either very happy or quite happy with the outcome.

Again, 5 respondents indicated that they were either very happy or quite happy with how their concern had been dealt with whilst 4 respondents indicated that they felt safer now.

Two respondents out of six indicated that they did not feel at all safer now which is concerning given they are adults at risk.

However, 3 respondents indicated that they felt a lot safer and 1 felt quite a bit safer now)

This also links to potential 'riskier decisions' under the Mental Capacity Act.

Summary	Number
Very happy, a lot safer	7
Very happy, quite a bit safer	6
Quite happy, a lot safer	5
Not at all happy, not at all safer	3
Quite happy, not at all safer	3
Not at all happy, quite a bit safer	2
Not at all happy, a lot safer	1
Quite happy, not much safer	1
Quite happy, quite a bit safer	1
Quite happy, quite safer	1
Incomplete answer	1
Total	31

Generally, 'Adults at risk' indicated no major dissatisfaction in all of the categories except for communication.

One person commented that they felt frustrated by a lack of call backs and updates whilst another felt that they always had to chase for updates and felt patronised.

As this applied to 'Adults at Risk' one possible reason is that they were potentially more emotionally involved with the process and may have unrealistic expectations as to how the service can help them.

Relative, friend or carer

Out of the 19 respondents to this category, 16 indicated that they felt they were always listened to or listened to quite a bit. Another 12 indicated that they felt that they had received a lot or quite a lot of information.

Out of the 19 respondents to this category, 16 indicated that they felt they had been able to understand all or most of the information given to them. Additionally, 13 respondents indicated that they were either very happy or quite happy with the outcome.

Again, 15 respondents indicated that they were either very happy or quite happy with how their concern had been dealt with whilst 14 respondents indicated that they felt safer now.

Out of the 19 respondents who provided an answer 4 felt the individual was either not much or not at all safer now which is concerning. Additionally, 14 of the 19 respondents felt slight or much safer due to the intervention.

Generally, 'Relatives/Friends/carers' had more uneven satisfaction ratings to the questions asked specifically regarding feeling listened to and the amount of information received.

In total, 3 out of 19 respondents felt that they had not been listened to very much or at all. In addition, 7 respondents felt that they did not get very much or any information at all.

Out of the 19 respondents 5 were not happy at all with the end result of trying to keep their relative safe.

One respondent indicated that they would have found it easier if they had been given the telephone number of the Safeguarding Officer whilst another felt that they had received no support in trying to change the circle of friends that their relative was involved with which indicated a possible lack of understanding as to the boundaries of responsibility.

One possible reason for this is that Adults at risk are potentially more emotionally involved with the process and may have unrealistic expectations as to how the service can help them.

One respondent queried what powers there were for recommendations to be implemented.

Another respondent added that the intervention of the Nottinghamshire County Council Safeguarding Team had been reduced by the team contacting the service user's relative directly rather than the service itself.

Independent Mental Capacity Advocates (IMCAs)

Generally, IMCAs had the highest satisfaction ratings to the questions asked with no negative answers indicating dissatisfaction in any of the categories.

One possible reason for this is that as advocates, the IMCAs may be more objective and understand the roles and limits of the safeguarding process. They may also have more professional knowledge of Social Care services and processes and therefore interact differently and have different expectations.

Recommendations

Based on the findings in this report Healthwatch Nottingham and Nottinghamshire recommends the following:

1. Ensure that regular/timely updates are shared with participants and family/friends even if that nothing has changed based on their level of preferences and level of desired engagement from the initial contact.
2. Ensure that they have understood the information that they have been provided with to make informed judgements.
3. Manage participants and family/friends expectations, specify what aspects of help and support are covered by the Making Safeguarding Personal process and those that are not

Learnings for the future

This was an innovative piece of work with some anticipated and unanticipated challenges. The local authority may like to consider this learning to support a more effective future approach:

- The time to identify appropriate subjects for the survey needs to be extended along with monitoring of referrals made by each team
- Greater liaison with PoHWER before commencement of the project could lead to greater involvement of their advocates
- The majority of interviewees chose to be interviewed by phone
- Whilst consent was established to be interviewed by HWNN for some it was distressing or confusing and consent was withdrawn
- The method of participant selection needs reexamining to ensure a cross section of experiences and better coverage across all districts
- More work needs to be done by operational teams to encourage people to be interviewed about the process

In order to elicit more detailed information from interviewees the following questions could be added to future surveys:

- After each question add, 'Please explain why you have given the answer you have.'
- Did the social worker who led the investigation on your behalf give you their name and contact details (in writing) in case you needed them?
- Would you have felt more comfortable if the investigating officer was your 'usual' social worker?
- Did Nottinghamshire County Council keep you informed about what was happening?
- What do you think Nottinghamshire County Council Safeguarding team did well?
- Do you have any recommendations to improve the Making Safeguarding Personal process in Nottinghamshire?
- What did you want to happen as a result of the safeguarding investigation? Did anyone ask you this?
- Was what you wanted to happen achieved?
- Do you feel that the risk to you/your relative, friend or carer has been reduced? If not - can you think of a way to reduce risk e.g. change care package provider, stop

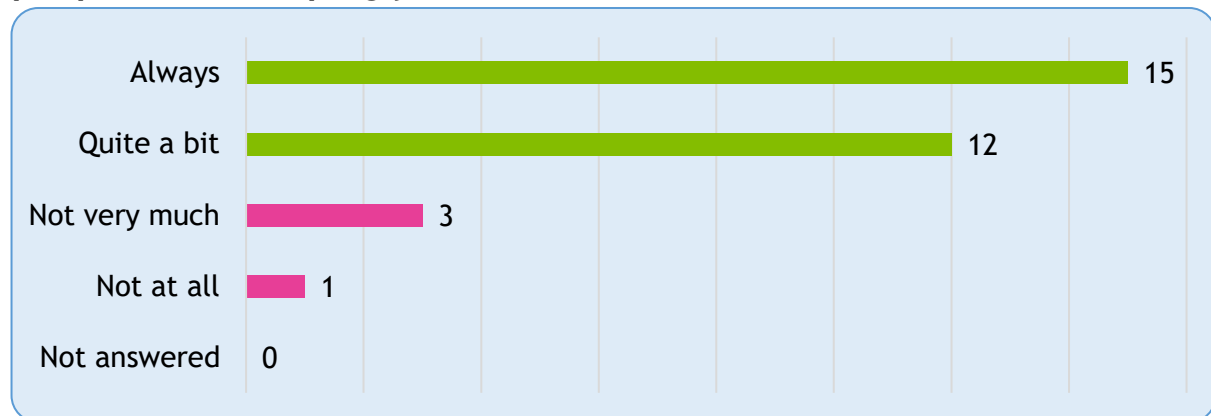
carer handling your money? Make sure member of staff (Care agency) does not go on to work with adults at risk again?

Healthwatch would be keen to work with the NSAB to address these challenges and has considerable expertise and insights that would support improved engagement.

Summary of Findings

All Respondents

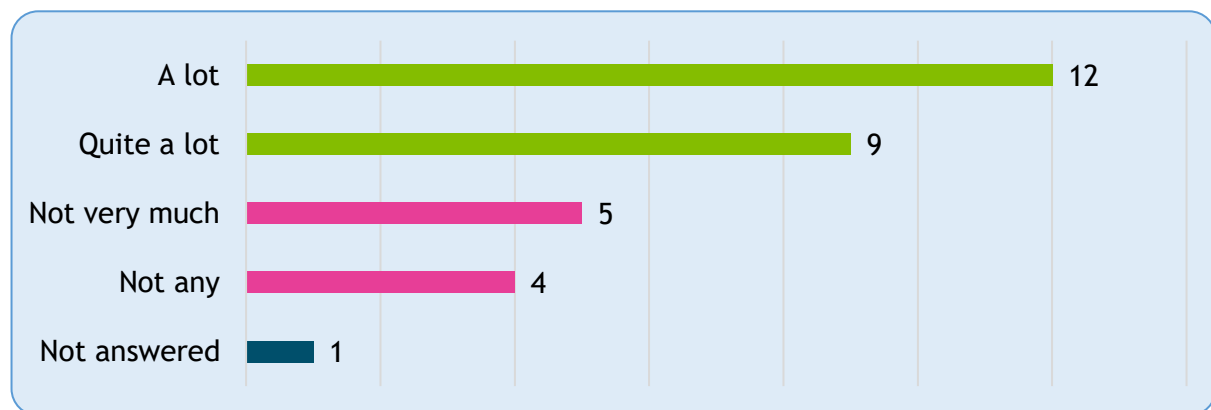
1. Did you feel listened to during conversations and meetings with people about helping you feel safe?



Out of the 32 respondents to this question, 27 indicated that they had felt they were always listened to, or listened to quite a bit during conversations.

However, 4 respondents indicated that they felt they had not been listened to very much or not listened to at all. This is maybe indicative of a larger concern.

2. Did you get information during the concern? This could be spoken or written?

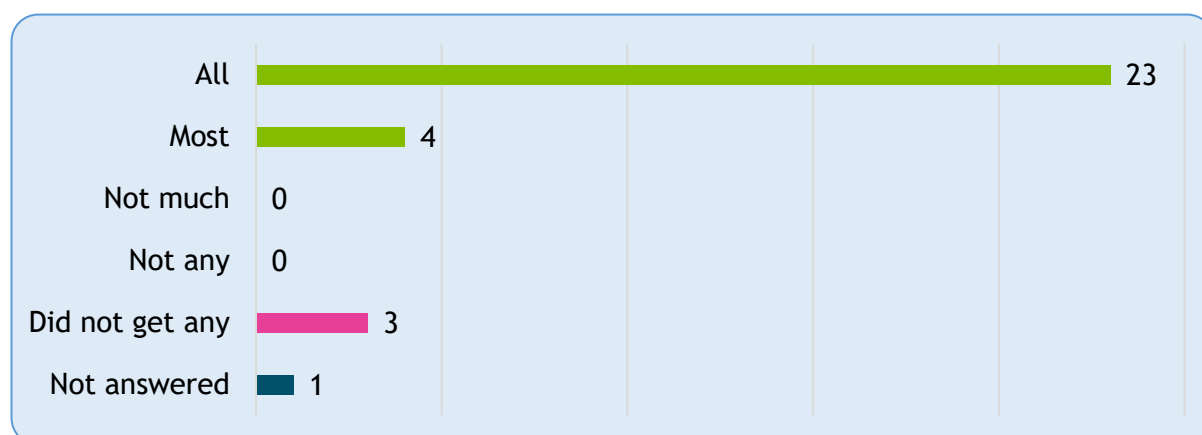


Out of the 32 respondents to this question, 21 indicated that felt they had received either a lot or quite a lot of information.

However, 9 respondents indicated that they felt they had received not very much or no information at all. This is maybe indicative of a larger concern.

Additionally, 1 respondent declined to provide an answer.

3. Were you able to understand the information given to you during the concern?

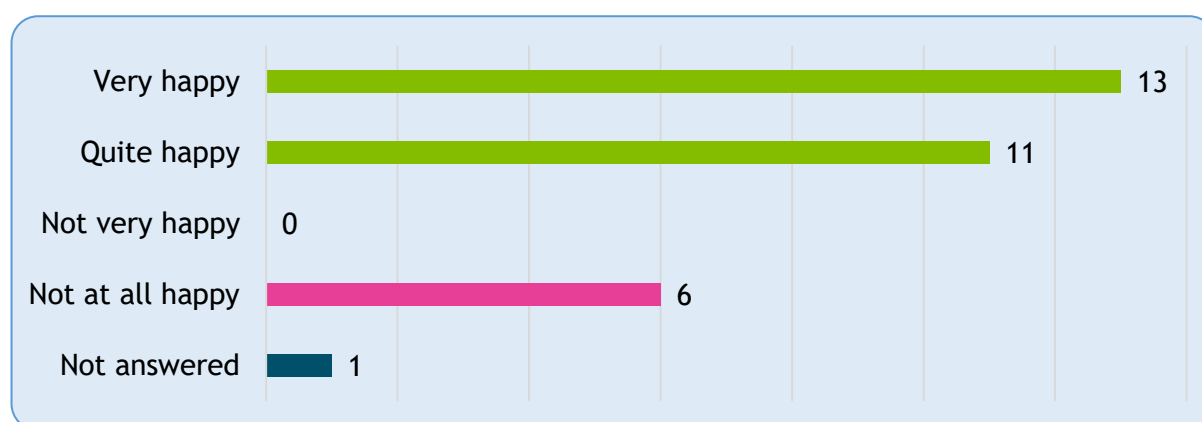


Out of the 32 respondents to this question, 27 indicated that they had been able to understand all or almost all of the information that they had been given during their concern.

However, 3 respondents indicated that they had not been given any information. This is maybe indicative of a larger concern.

Additionally, 1 respondent failed to provide an answer.

4. How happy are you with the end result of what people did to try and keep [the person you support/your client] safe?

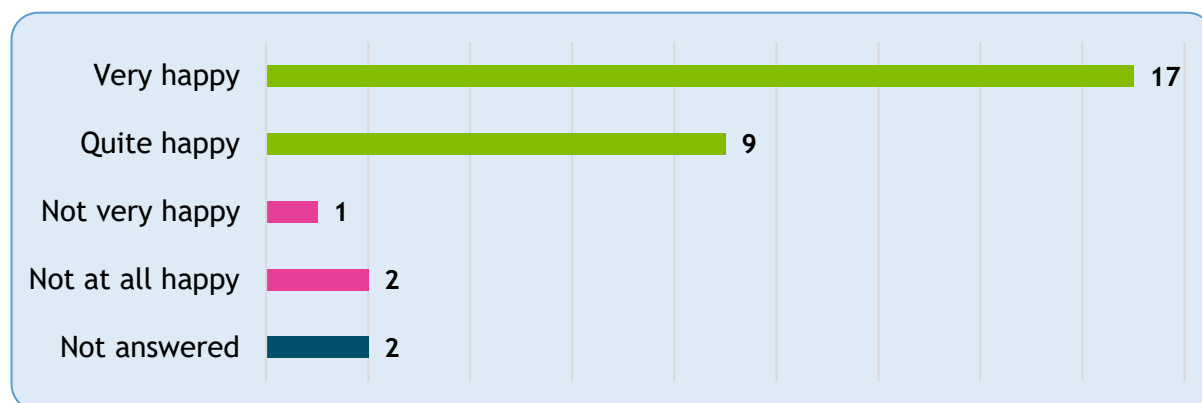


Out of the 32 respondents to this question, 24 indicated that they were very happy or quite happy with the end result of what people did to keep the person they supported safe.

However, 6 respondents indicated that they were not happy at all. This is maybe indicative of a larger concern.

Additionally, one respondent failed to provide an answer.

5. How happy are you with how people dealt with the concern throughout the process?



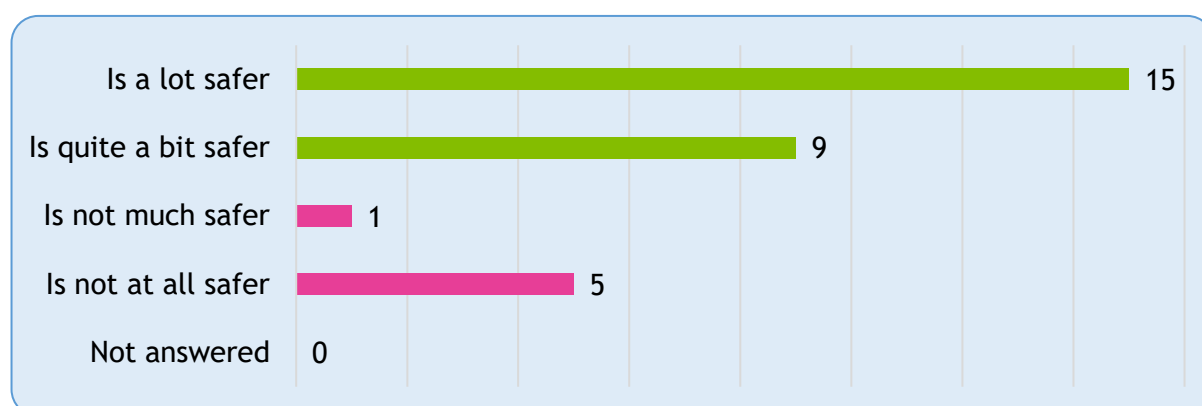
Out of the 32 respondents to this question, 26 indicated that they were very happy or quite happy with how people dealt with their concern throughout the process.

However, 3 respondents indicated that they were not very happy or not at all happy. This is maybe indicative of a larger concern.

Additionally, two respondents failed to provide an answer.

The following question was asked where the service user is alive.

6a. Do you feel that the person in this case is safer now as a result of the help from people dealing with the concern?

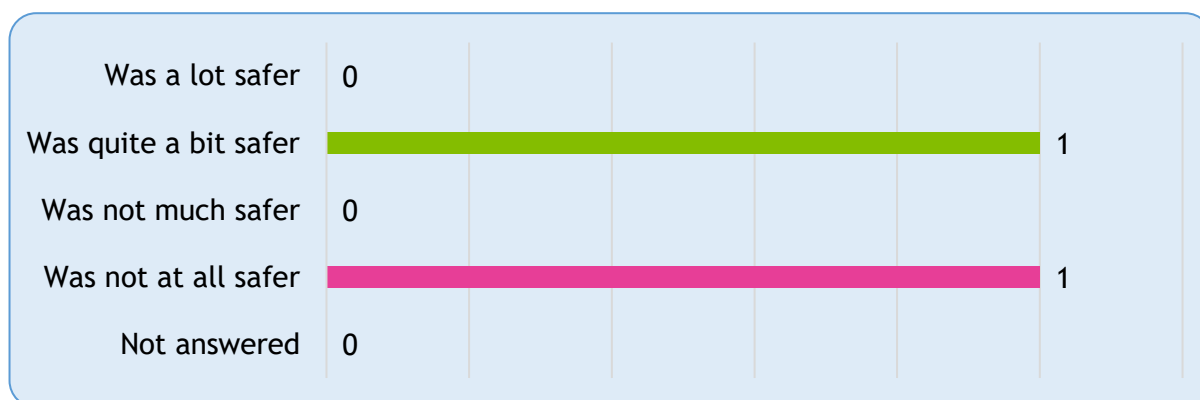


Out of the 29 respondents to this question, where the service user was still alive, 24 indicated that they felt the person in the case was either a lot or quite a lot safer.

However, 1 respondent indicated that the person was not much safer whilst five respondents indicated that they felt the person was not at all safer. This is maybe indicative of a larger concern.

The following question was asked where the service user is deceased

6b. Do you feel that the person in this case was made safer as a result of the help from people dealing with the concern?



Out of the 2 respondents to this question, where the service user was deceased, 1 indicated that they felt the person involved in the case was made quite a bit safer whilst the other 1 indicated that the person was made not a lot safer

In addition, a comparison was undertaken between the answers provided to the questions 5 and 6A and 6B. This also links to potential 'riskier decisions' under the Mental Capacity Act.

5. How happy are you with how people dealt with the concern throughout the process?

6a. Do you feel that the person in this case is safer now as a result of the help from people dealing with the concern?

6b. Do you feel that the person in this case was made safer as a result of the help from people dealing with the concern?

Summary	Number
Very happy, a lot safer	7
Very happy, quite a bit safer	6
Quite happy, a lot safer	5
Not at all happy, not at all safer	3
Quite happy, not at all safer	3
Not at all happy, quite a bit safer	2
Not at all happy, a lot safer	1
Quite happy, not much safer	1
Quite happy, quite a bit safer	1
Quite happy, quite safer	1
Incomplete answer	1
Total	31

Seven people were very happy with the end result and felt a lot safer.

Six were very happy and felt quite a bit safer.

Five people felt a lot safer and were quite happy with the end result.

Three people felt not at all safer and was not at all happy with the end result.

Although three people felt not at all safer they were quite happy with the end result. This is reflective of the Mental Capacity Act 2005 which stipulates that adults can make 'riskier decisions'.

Two people felt quite a bit safer but were not at all happy with the end result.

One person felt not a lot safer but was not at all happy with the end result.

One person felt not much safer now but they were quite happy with the end result.

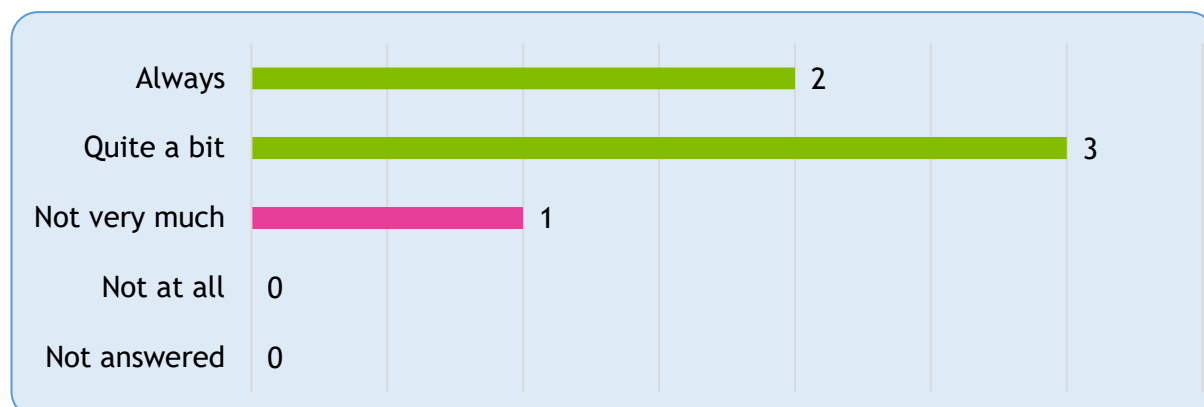
One person felt quite a bit safer now and were quite happy with the end result.

One person felt quite safer now and were quite happy with the end result.

One person provided an incomplete answer.

Adult at Risk

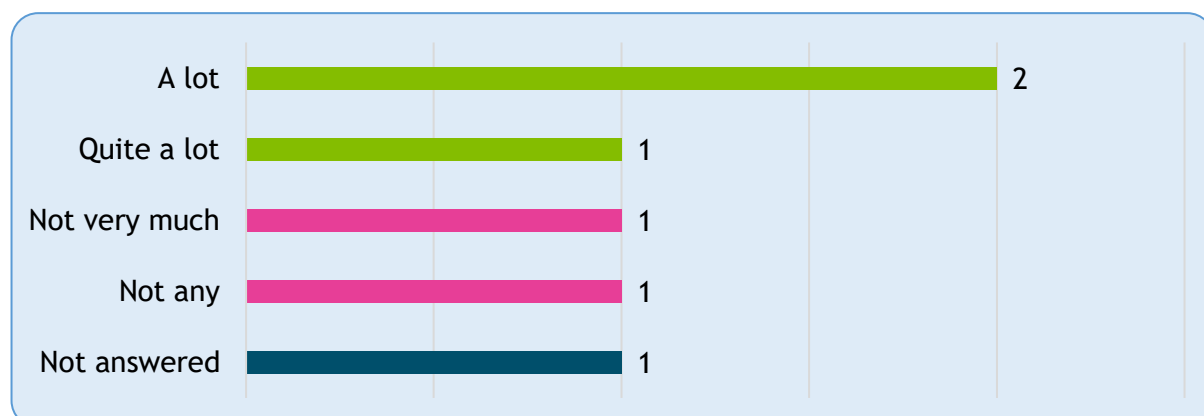
1. Did you feel listened to during conversations and meetings with people about helping you feel safe?



Out of the 6 respondents to this question, 5 indicated that they had either felt listened to or listened to quite a bit during meetings and conversations.

However, 1 respondent indicated that they had not felt listened to very much.

2. Did you get information during the concern? (This could be spoken or written?)



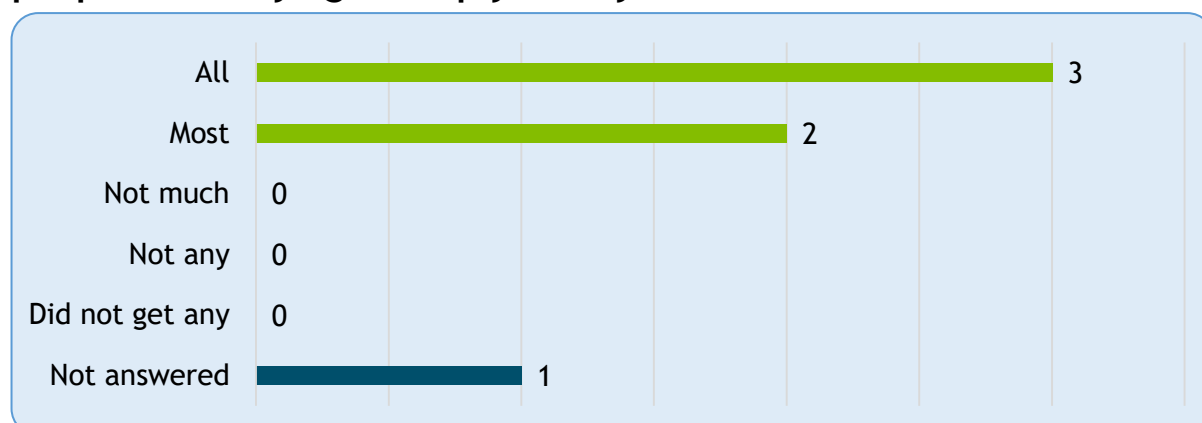
Out of the 6 respondents to this question, 3 indicated that they felt they had received a lot or quite a lot of information.

However, 2 respondents felt either that they did not get any information or got no information at all. This is maybe indicative of a larger concern.

Additionally, 1 respondent declined to provide an answer.

“Did not ring back when promised to. Communication very poor regarding housing issues. More information and communication needed. Need regular updates. Only got information when chased. Felt patronised.”

3. Were you able to understand the information given to you when people were trying to help you stay safe?

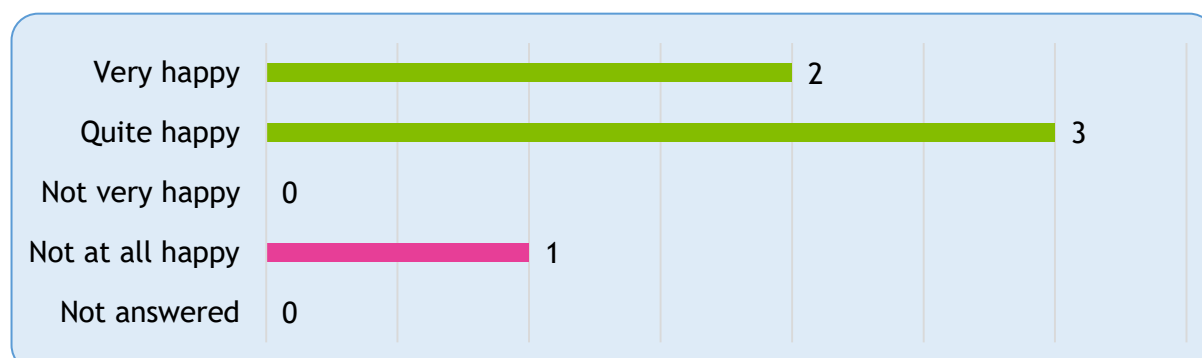


Out of the 6 respondents to this questions, 5 indicated that they had either been able to understand all or most of the information given to them.

No areas of larger concern were indicated.

Additionally, 1 respondent failed to provide an answer.

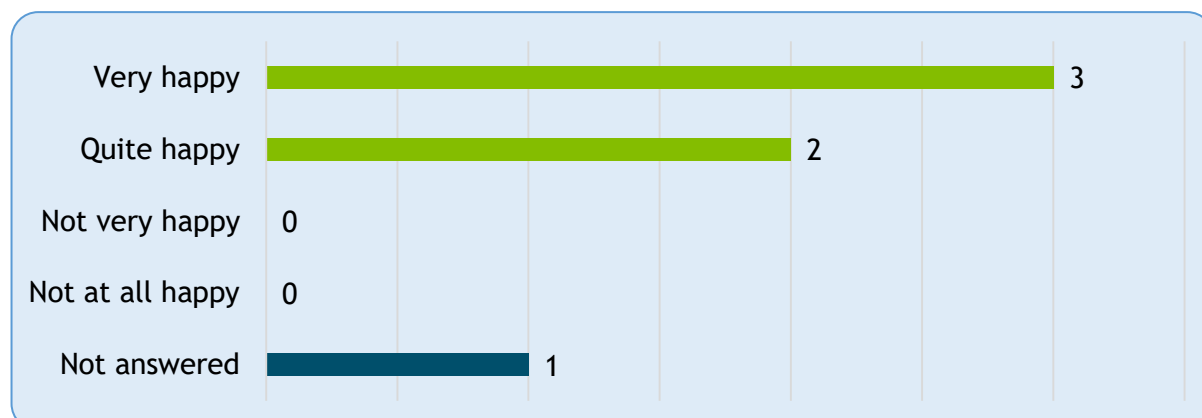
4. How happy are you with the end result of what people did to try and keep you safe?



Out of the 6 respondents to this question, 5 indicated that they either felt happy or quite happy with the end result of what people did to try and keep them safe.

However, 1 respondent indicated that they were not at all happy with the end result. This is maybe indicative of a larger concern.

5. How happy are you with how people dealt with the concern throughout the process?

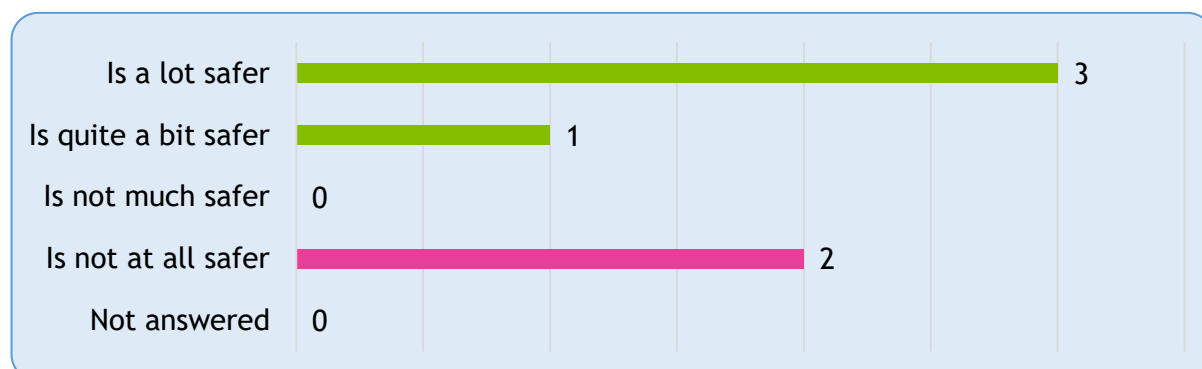


Out of the 6 respondents to this question, 5 indicated that they were either very or quite happy with the way people had dealt with their concerns throughout the process.

Additionally, 1 respondent failed to give an answer.

No areas of larger concern were indicated.

6a. Do you feel that you are safer now because of the help from people dealing with your concern?



Out of the 6 respondents to this question, 4 indicated that they felt they were either a lot or quite a bit safer now because of the help from people dealing with their concern.

However, 2 respondents indicated that they did not feel at all safer now. This is maybe indicative of a larger concern.

“Moved me out of the flat, able to use my garden so that I’m not afraid.”

7a. Is there anything else you think the council (or other organisations) could have done better during the time of this concern?

Lack of addressing service user's needs

One respondent commented that since being moved, although they felt safer, they had anxiety about locking themselves out of their new home.

"I'm anxious about accidentally locking myself out whenever I go out, even when I just sit outside."

Support

One respondent commented that they did not feel they had received sufficient support with their relative to change their circle of friends. This highlighted a lack of awareness as to where the boundaries of responsibility lay between the Social Care Team and personal responsibility.

"No support for issues with relative - drinking/drugs. Although this has now improved as relative is not mixing with same people."

Only one respondent declined to provide an answer.

Question 8 was not asked of 'Adults at Risk'.

Overall Summary

Two respondents indicated that they did not feel at all safer now which is concerning given they are vulnerable adults at risk of abuse.

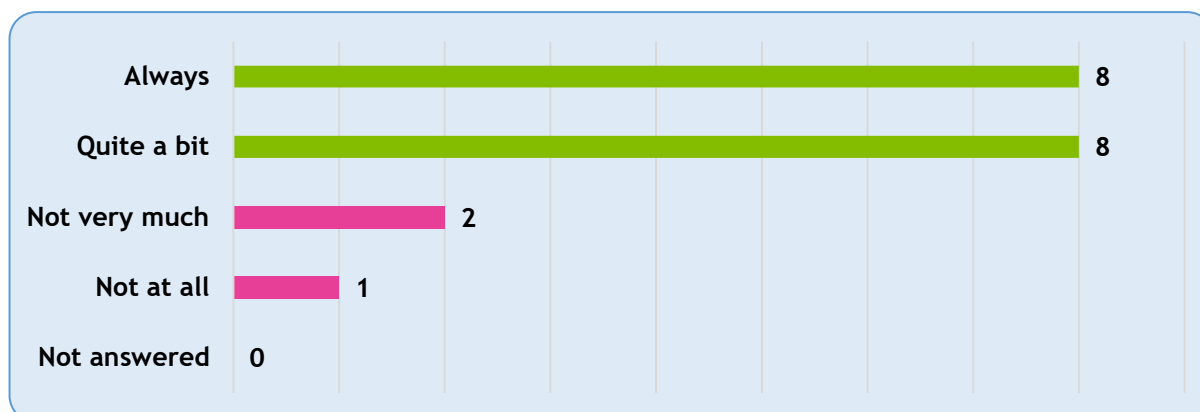
One person commented that they felt frustrated by a lack of call backs and updates. They felt that they always had to chase for updates and felt patronised.

Another felt that they had received no support for issues with their son's drinking and drugs - although this has now improved as the son is not mixing with the same people. This indicates a possible lack of understanding as to the boundaries of responsibility.

Adults at risk were potentially more emotionally involved with the process and may have unrealistic expectations as to how the service can help them.

Relative, Friend or Carer

1. Did you feel listened to during conversations and meetings with people about helping your relative feel safe?

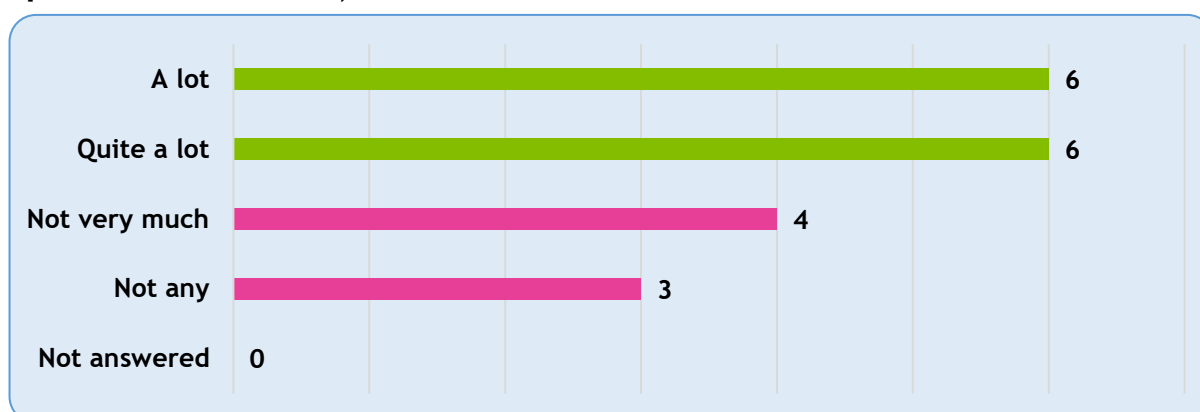


Out of the 19 respondents to this question, 16 indicated that they had either felt always listened to or listened to quite a bit during meetings or conversations.

However, 3 respondents did not feel listened to very much or at all. This may be indicative of a larger concern.

“Very good - kept them informed and then contacted by telephone/email re outcome. They are a support worker so understands issues.”

2. Did you get information during the concern? (This could be spoken or written?)



Out of the 19 respondents to this question, 12 indicated that they felt they had received a lot or quite a lot of information during their concerns.

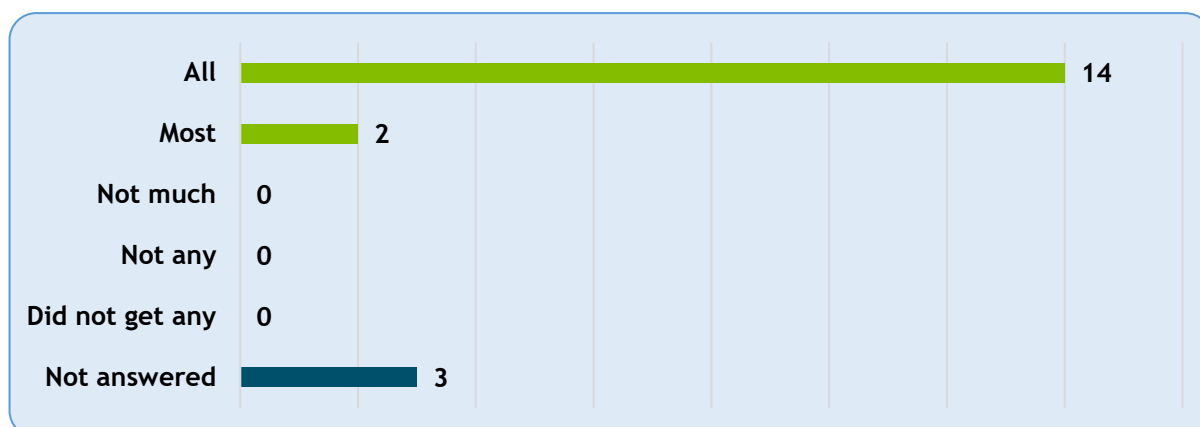
However, 7 indicated that they either did not get any information or got no information at all. This may be indicative of a larger concern.

“I got a lot of information but nothing in writing.”

“We would have appreciated at the end in particular if the safeguarding team had told us how things ended up.”

“Did not get information unless I asked. Would not tell me for 24 hours where my relative was.”

3. Were you able to understand the information given to you during the concern?



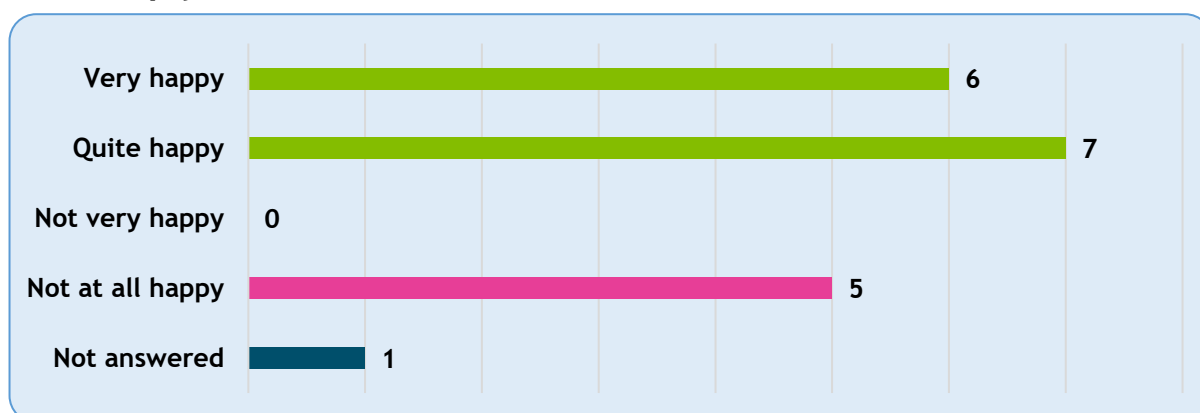
Out of the 19 respondents to this question, 16 indicated that they had either been able to understand all or most of the information given to them.

Additionally, 3 respondents failed to indicate an answer.

No areas of larger concern were indicated.

“Couple of phone calls with social worker. No meeting. Called to say that it was sorted. I didn’t fully understand.”

4. How happy are you with the end result of what people did to try and keep your relative safe?



Out of the 19 respondents to this question, 13 indicated that they either felt happy or quite happy with the end result of what people did to try and keep them safe.

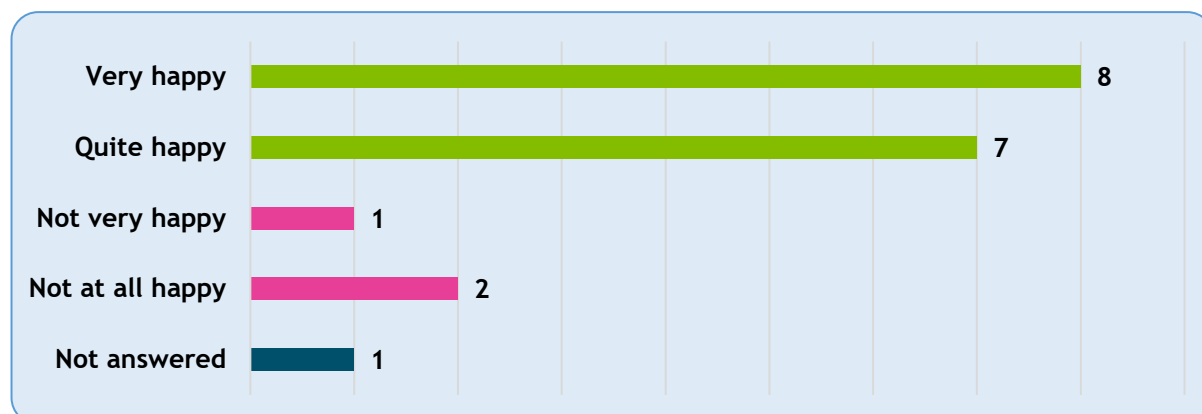
Additionally, 1 respondent failed to indicate an answer.

However, 5 respondents were not at all happy with the end result. This is maybe indicative of a larger concern.

“Relative released without support to go back to accommodation. Alternative accommodation not found for some time.”

“There could have been more sympathy and understanding of people’s situation. Fortunately I am able to do things myself, but many couldn’t, we were just told the council had no money, they couldn’t do this and they couldn’t do that.”

5. How happy are you with how people dealt with the concern throughout the process?



Out of the 19 respondents to this question, 15 indicated that they were either very or quite happy with the way people had dealt with their concerns throughout the process.

Additionally, 1 respondent failing to provide an answer.

However, 3 respondents indicated that they were not happy/not happy at all with how people dealt with their concern. This is maybe indicative of a larger concern.

"I couldn't fault the person I had contact with from the Safeguarding team. They did everything they could but service user wouldn't engage with them."

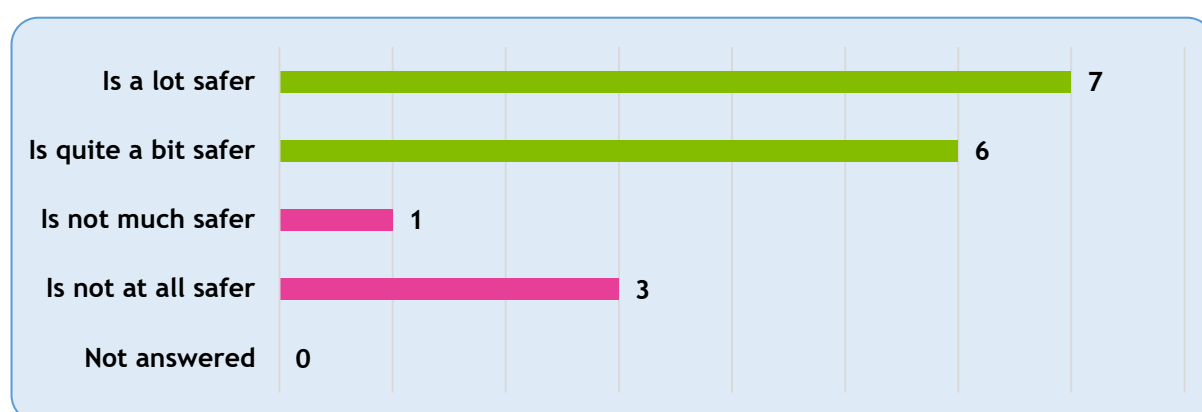
"It would have been good to have the phone number of the Safeguarding Officer. I wanted the safeguarding procedure to be quicker."

"A face-to-face visit from the safeguarding department during the process would have been helpful instead of or in addition to telephone updates."

"We wanted the safeguarding team to sum up the position in regard to our son."

Responses where the service user is alive.

6a. Do you feel that your relative is safer now as a result of the help from people dealing with the concern?



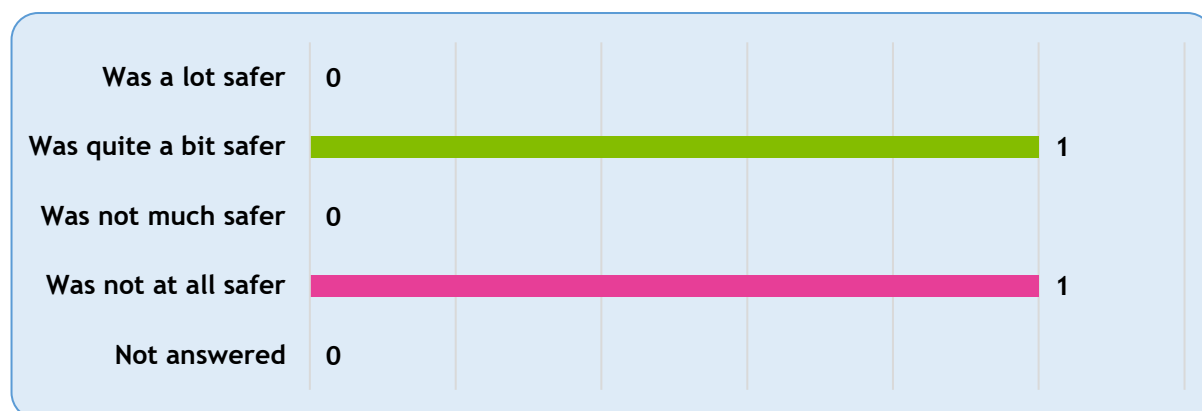
Out of the 19 respondents to this question, 17 respondents that they felt they were either a lot or quite a bit safer now because of the help from people dealing with their concern.

However, 4 respondents felt that the person in the case is either not much or not at all safer now. This is maybe indicative of a larger concern.

“The police were very good. They fetched my relation to stay with me overnight when my relative was sectioned. Social care have put mental health carers in place and service user goes to day care, but service user is still very unpredictable and relative is still very afraid.”

Responses where the service user is deceased

6b. Do you feel that your relative was made safer as a result of the help from people dealing with the concern?



Out of the 2 respondents to this question, 1 respondent indicated that they felt their relative was made safer as a result of help from people dealing with the concern.

However, the other respondent indicated that the person in this case was not at all safer.

7a is there anything else you think the council (or other organisations) could have done better during the time of this concern?

Positive feedback

Several respondents provided positive feedback covering a variety of themes, in particular, two respondents indicated positive communication experiences. Another, commented that they had an understanding of the issues Social Workers faced.

“Very happy.”

“County Council good. The provider did not resolve issue - bruise unexplained.”

“Relative moved before investigation. Then home investigated, NCC did all they could.”

“It was last year they had to call the police 3 times because service user was hurting them and they were frightened. Social Care have said that if another violent incident occurs relative will, “have to go through the whole (safeguarding) process again”.

Doctors have given service user tablets that calm them down and stop them wandering, Service user takes them at 5pm and then they feel safer.”

Lack/type of communication

“Service user has no capacity, but they had information that they said they could not legally give to us. We waited a lot longer than it should have been. The incident happened at the Day Service in the 3rd week of October, the parent found out about the safeguarding investigation in the 2nd week of January.”

“In the end the police told us how things had ended up.

“Staff member was suspended, then sacked, police investigation finished. Rumour that perpetrator got a new job in care. Bit worried that perpetrator was still working in care. The process worked well for relative, but worried about other vulnerable adults. Manager of Home is fine, upstanding, they were the ones who instigated the investigation - person on night shift had accessed relative’s bank card.”

“NCC could have contacted District Council directly rather than through relative - would have had more impact.”

Code of practice

One respondent indicated they felt that a code of practice relating to admissions/patient’s abilities should be introduced.

“Code of practice to be put in place regarding admission and patient’s abilities. Care home did not exercise due care.”

Unaware of Safeguarding

One respondent indicated that they had been unaware of what Safeguarding was until raised by a third party.

“It was the paramedics that brought up the safeguarding; we weren’t aware of issues I think if we have any concerns it’s around the agency staff I feel some tighter regulation of them.”

Boundaries of responsibility

One respondent commented on the distinction or responsibilities between the Safeguarding Team and personal responsibility.

“No I can’t really say anything regarding this; the family had to step up and sort out changes - the safeguarding team did what they had to, but I made the changes.”

Manner in which event was dealt with

“Not in the time it was dealt with. It is hanging - one person’s word against another. It was a bit pillar-to-post, back and forth at the start. But we got there eventually.”

One respondent declined to provide a comment.

8. Prior to the safeguarding incident(s) taking place, was there anything an agency missed that could have prevented the safeguarding incident(s) occurring?

Note: only 15 respondents out of a possible 20 answered this question as it was added after the survey started. Therefore, the first five interviewees were not asked this.

Out of the fifteen respondents, seven answered this question as 'no' whilst seven answered the question 'yes' and supported their answers with the following comment which broadly fell into the listed themes:

Support

Two respondents felt that the level of support received could have been more and mentioned a lack of staff.

“Three people needed to support the service user rather than one.”

“Yes, they could have done something. People could have kept an eye on him more - more staff are needed.”

Prevention

Another two respondents highlighted failings in prevention of the situation.

“Different trained staff would have prevented this situation.”

“Had wrong call button which would have prevented incident.”

Implementation of recommendations

One respondent commented that the recommendations of the Safeguarding Team had not been implemented by the care home that their charge resided at.

“Lots of issues where service user lived but home did not want them there and would not implement recommendations. Service user now lives in another location.”

Concerns taken seriously

One respondent felt aggrieved that their concerns about a loved one had not been taken seriously by their Community Learning Disability Team.

“The Ashfield CLDT nurse (Community Learning Disability Team) did not take on board our concerns about our relative’s behaviour i.e. the swearing, the tearful behaviour which was indicative of the relative potentially being abused. They were dismissive of our concerns.”

Overall Summary

Four out of the eighteen respondents who provided an answer felt the person in the case is either not much or not at all safer now which is concerning given they are vulnerable adults at risk of abuse.

Generally, compared to IMCAs, 'Relatives/Friends/carers' had more uneven satisfaction ratings to the questions asked specifically 'feeling listened to' and 'the amount of information received'.

In total, three respondents felt that they had not been listened to very much or at all. In addition, seven respondents felt that they did not get very much or any information at all.

Five respondents were not happy at all with the end result of trying to keep their relative safe.

One respondent indicated that they would have found it easier if they had been given the number of the Safeguarding Officer.

One possible reason for this is that relatives/friends/carers were potentially more emotionally involved with the process and may have expectations as to how the service can help them.

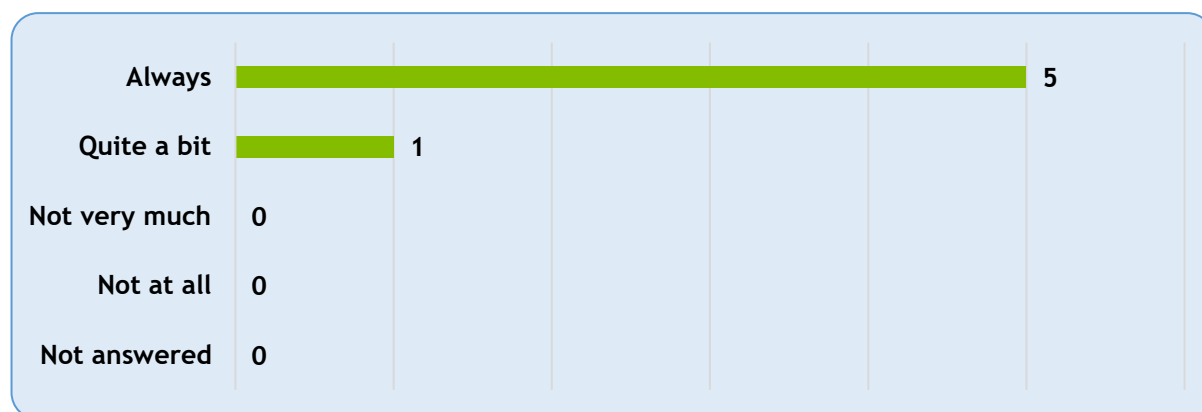
One respondent queried what powers there were for recommendations to be implemented.

Another respondent felt that the intervention of NCC had been diluted by them contacting the service user's relative directly rather than the service.

Additionally, they may have more 'professional' knowledge of social care services and processes and therefore interact differently and have different expectations.

Independent Mental Capacity Advocates (IMCAs)

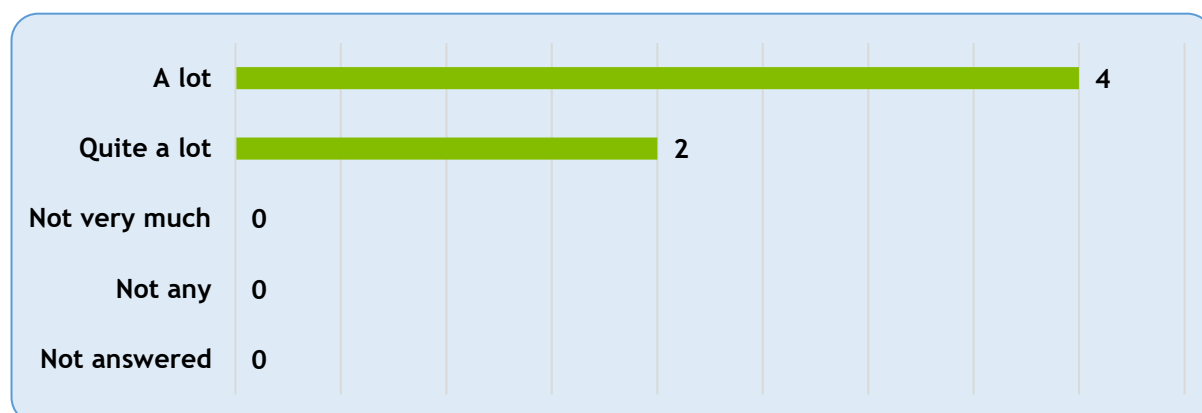
1. Did you feel listened to during conversations and meetings with people about helping [the person you were supporting/your client] feel safe?



All 6 respondents to this question indicated that they had either felt listened to or listened to quite a bit during meetings and conversations.

No areas of larger concern were indicated.

2. Did you get information during the concern? This could be spoken or written?

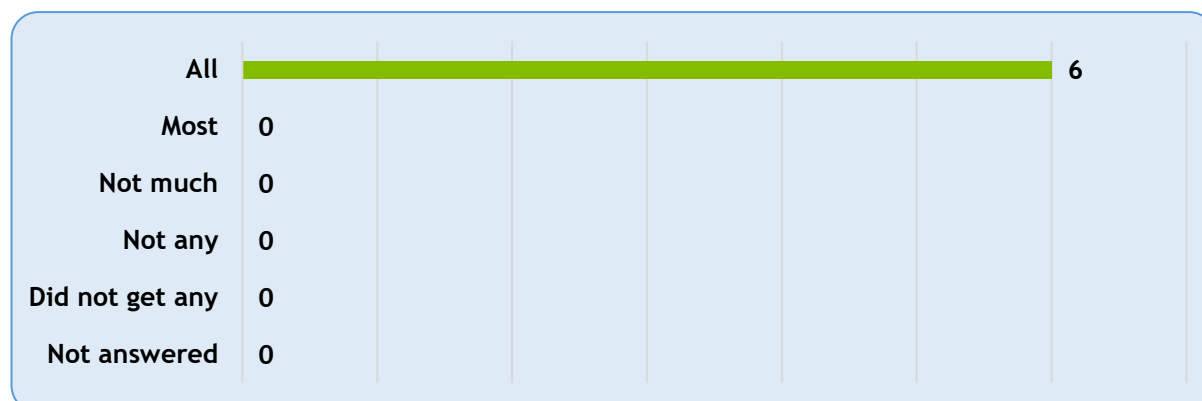


All 6 respondents to this question indicated that they had been given either a lot or quite a lot of information during their concern.

No areas of larger concern were indicated.

“Acted on very promptly. A lot of information from the start.”

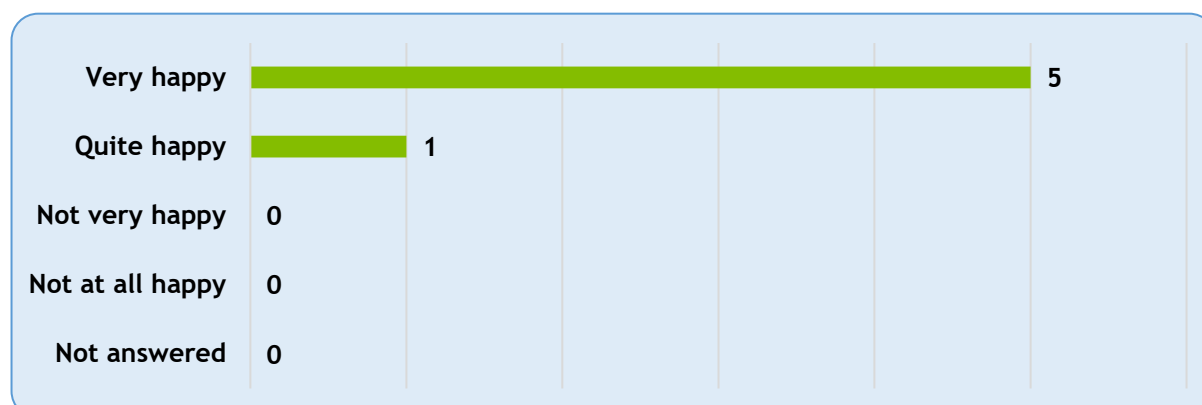
3. Were you able to understand the information given to you during the concern?



All 6 respondents to this question indicated that they had been able to understand all or most of the information given to them during their concern.

No areas of larger concern were indicated.

4. How happy are you with the end result of what people did to try and keep [the person you support/your client] safe?

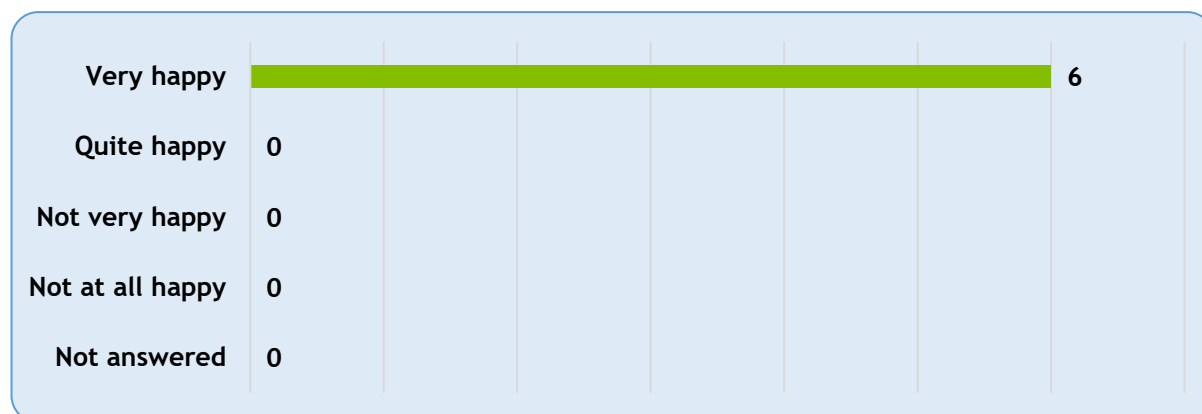


All 6 respondents to this question indicated that they had been very or quite happy with the end result of what people did to try keep their relative/friend/client safe.

No areas of larger concern were indicated.

“Things put in place to keep them safe very quickly.”

5. How happy are you with how people dealt with the concern throughout the process?

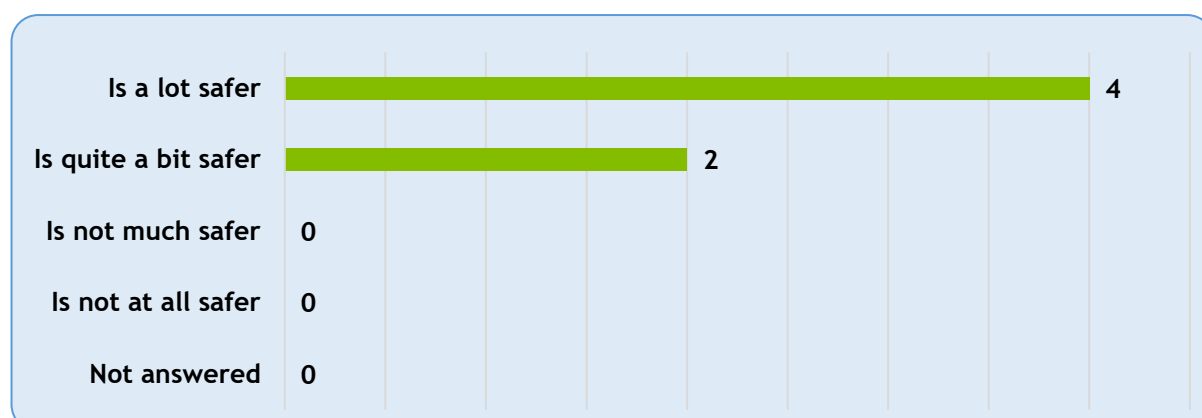


All 6 respondents to this question indicated that they were very happy with how people dealt with their concerns throughout the process.

No areas of larger concern were indicated.

“Process worked very well. A couple of issues still outstanding from the provider perspective.”

6a. Do you feel that the person in this case is safer now as a result of the help from people dealing with the concern?



All 6 respondents to this question indicated that they felt that the person in this case is either a lot or quite a lot safer now.

No areas of larger concern were indicated.

7a. Is there anything else you think the council (or other organisations) could have done better during the time of this concern?

“Usual issue - gap in funding.”

Formal referral

One respondent felt that they would have been better served by a formal referral under the Care Act rather than by an IMCA.

“Would have been beneficial to have a care act referral for safeguarding rather than an IMCA. Could have supported them through the whole process.”

Follow up procedures

One respondent commented that they felt that the Safeguarding Team should monitor homes where multiple issues have been identified. However, the remit for this would fall under the CQC (Care Quality Commission).

“There were quite a few safeguarding concerns for the same home so monitoring homes run by this company might prevent further issues.”

Overall Summary

Generally, IMCAs had the highest satisfaction ratings with no negative answers indicating dissatisfaction in any of the categories.

One possible reason for this is that as advocates, the IMCAs may be more objective and understand the roles and limitations of the safeguarding process. They may also have more professional knowledge of Social Care services and processes and therefore interact differently and have different expectations.

Conclusions

For 'Adults at Risk' and 'Friends/relatives/carers' there appears to be a spread of dissatisfaction with communication between the Safeguarding teams and participants/friends/relatives/carers which was also reflected in slightly worse levels of understanding within these two groups.

In the 'Relatives/Friends/Carers' group, there was a level of unhappiness associated with efforts made to keep their relative/friend/client safe.

Both groups exhibited examples of lack of awareness of boundaries/responsibilities between the Safeguarding team, themselves and third parties.

There were several references to safeguarding issues at Care homes.

More generally, there is still work to do helping Adults at Risk and or their relatives/friends/carers to understand the scope and limits of the Adult Safeguarding Team.

Recommendations

Based on the findings in this report Healthwatch Nottingham and Nottinghamshire recommends the following:

1. Ensure that regular/timely updates are shared with participants and family/friends even if that nothing has changed based on their level of preferences and level of desired engagement from the initial contact.
2. Ensure that they have understood the information that they have been provided with to make informed judgements.
3. Manage participants and family/friends expectations, specify what aspects of help and support are covered by the Making Safeguarding Personal process and those that are not

Appendix 1 - Breakdown of Answers

All Categories

1. Did you feel listened to during conversations and meetings with people about helping you feel safe?

Answer	Number
I was always listened to	15
I was listened to quite a bit	12
I was not listened to very much	3
I was not listened to at all	1
Not answered	0
Total	31

Table 1 – source all respondents (n=32)

2. Did you get information during the concern? This could be spoken or written?

Answer	Number
I got a lot of information	12
I got quite a lot of information	9
I did not get very much information	5
I did not get any information	4
Not answered	1
Total	31

Table 2 – source all respondents (n=32)

3. Were you able to understand the information given to you during the concern?

Answer	Number
I was able to understand all of the information	23
I was able to understand most of the information	4
I was not able to understand much of the information	0
I was not able to understand any of the information	0
I did not get any information	3
Not answered	1
Total	31

Table 3 – source all respondents (n=32)

4. How happy are you with the end result of what people did to try and keep [the person you support/your client] safe?

Answer	Number
I am very happy with the end result	13
I am quite happy with the end result	11
I am not very happy with the end result	0
I am not at all happy with the end result	6
Not answered	1
Total	31

Table 4 – source all respondents (n=32)

5. How happy are you with how people dealt with the concern throughout the process?

Answer	Number
I am very happy with how people dealt with the concern	17
I am quite happy with how people dealt with the concern	9
I am not very happy with how people dealt with the concern	1
I am not at all happy with how people dealt with the concern	2
Not answered	2
Total	31

Table 5 – source all respondents (n=32)

Alive/Deceased	Number
Alive	29
Deceased	2
Total	31

Table 6 – source all respondents (n=32)

Where the service user is alive.

6a. Do you feel that the person in this case is safer now as a result of the help from people dealing with the concern?

Answer	Number
I feel that I/the person in this case am/is a lot safer now	14
I feel that I/the person in this case am/is quite a bit safer now	9
I feel that I/the person in this case is/am not much safer now	1
I feel that I/the person in this case is/am not at all safer now	5
Not answered	0
Total	29

Table 7– source all respondents (n=32)

Where the service user is deceased

6b. Do you feel that the person in this case was made safer as a result of the help from people dealing with the concern?

Answer	Number
I feel that the person in this case was a lot safer	0
I feel that the person in this case was quite a bit safer	1
I feel that the person in this case was not much safer	0
I feel that the person in this case was not at all safer	1
Not answered	0
Total	2

Table 8 – source all respondents (n=32)

7b. Would you like me to pass on your details so the council can contact you further about this?

Answer	Number
Yes	12
No, remain anonymous	18
Not answered	1
Total	31

Table 9 – source all respondents (n=32)

Adult at Risk

1. Did you feel listened to during conversations and meetings with people about helping you feel safe?

Answer	Number
I was always listened to	2
I was listened to quite a bit	3
I was not listened to very much	1
I was not listened to at all	0
Not answered	0
Total	6

Table 10 – source all respondents (n=6)

2. Did you get information during the concern? (This could be spoken or written?)

Answer	Number
I got a lot of information	2
I got quite a lot of information	1
I did not get very much information	1
I did not get any information	1
Not answered	1
Total	6

Table 11 – source all respondents (n=6)

3. Were you able to understand the information given to you when people were trying to help you stay safe?

Answer	Number
I was able to understand all of the information	3
I was able to understand most of the information	2
I was not able to understand much of the information	0
I was not able to understand any of the information	0
I did not get any information	0
Not answered	1
Total	6

Table 12 – source all respondents (n=6)

4. How happy are you with the end result of what people did to try and keep you safe?

Answer	Number
I am very happy with the end result	2
I am quite happy with the end result	3
I am not very happy with the end result	0
I am not at all happy with the end result	1
Not answered	0
Total	6

Table 13 – source all respondents (n=6)

5. How happy are you with how people dealt with the concern throughout the process?

Answer	Number
I am very happy with how people dealt with the concern	3
I am quite happy with how people dealt with the concern	2
I am not very happy with how people dealt with the concern	0
I am not at all happy with how people dealt with the concern	0
Not answered	1
Total	6

Table 14 – source all respondents (n=6)

6a. Do you feel that you are safer now because of the help from people dealing with your concern?

Answer	Number
I feel that I am a lot safer now	3
I feel that I am quite a bit safer now	1
I feel that I am not much safer now	0
I feel that I am not at all safer now	2
Not answered	0
Total	6

Table 15 – source all respondents (n=6)

Relative, Friend or Carer

1. Did you feel listened to during conversations and meetings with people about helping your relative feel safe?

Answer	Number
I was always listened to	8
I was listened to quite a bit	8
I was not listened to very much	2
I was not listened to at all	1
Not answered	0
Total	19

Table 16 – source all respondents (n=20)

2. Did you get information during the concern? (This could be spoken or written?)

Answer	Number
I got a lot of information	6
I got quite a lot of information	6
I did not get very much information	4
I did not get any information	3
Not answered	0
Total	19

Table 17 – source all respondents (n=20)

3. Were you able to understand the information given to you during the concern?

Answer	Number
I was able to understand all of the information	14
I was able to understand most of the information	2
I was not able to understand much of the information	0
I was not able to understand any of the information	0
I did not get any information	0
Not answered	3
Total	19

Table 18 – source all respondents (n=20)

4. How happy are you with the end result of what people did to try and keep your relative safe?

Answer	Number
I am very happy with the end result	6
I am quite happy with the end result	7
I am not very happy with the end result	0
I am not at all happy with the end result	5
Not answered	1
Total	19

Table 19 – source all respondents (n=20)

5. How happy are you with how people dealt with the concern throughout the process?

Answer	Number
I am very happy with how people dealt with the concern	8
I am quite happy with how people dealt with the concern	7
I am not very happy with how people dealt with the concern	1
I am not at all happy with how people dealt with the concern	2
Not answered	1
Total	19

Table 20 – source all respondents (n=20)

Alive/Deceased	Number
Alive	17
Deceased	2
Total	19

Table 21 – source all respondents (n=20)

Responses where the service user is alive.

6a. Do you feel that your relative is safer now as a result of the help from people dealing with the concern?

Answer	Number
I feel that the person in this case is a lot safer now	7
I feel that the person in this case is quite a bit safer now	6
I feel that the person in this case is not much safer now	1
I feel that the person in this case is not at all safer now	3
Not answered	0
Total	17

Table 22 – source all respondents (n=20)

Responses where the service user is deceased

6b. Do you feel that your relative was made safer as a result of the help from people dealing with the concern?

Answer	Number
I feel that the person in this case was a lot safer	0
I feel that the person in this case was quite a bit safer	1
I feel that the person in this case was not much safer	0
I feel that the person in this case was not at all safer	1
Not answered	0
Total	2

Table 23 – source all respondents (n=20)

Independent Mental Capacity Advocates (IMCAs)

1. Did you feel listened to during conversations and meetings with people about helping [the person you were supporting/your client] feel safe?

Answer	Number
I was always listened to	5
I was listened to quite a bit	1
I was not listened to very much	0
I was not listened to at all	0
Not answered	0
Total	6

Table 24 – source all respondents (n=6)

2. Did you get information during the concern? This could be spoken or written?

Answer	Number
I got a lot of information	4
I got quite a lot of information	2
I did not get very much information	0
I did not get any information	0
Not answered	0
Total	6

Table 25 – source all respondents (n=6)

3. Were you able to understand the information given to you during the concern?

Answer	Number
I was able to understand all of the information	6
I was able to understand most of the information	0
I was not able to understand much of the information	0
I was not able to understand any of the information	0
I did not get any information	0
Not answered	0
Total	6

Table 26 – source all respondents (n=6)

4. How happy are you with the end result of what people did to try and keep [the person you support/your client] safe?

Answer	Number
I am very happy with the end result	5
I am quite happy with the end result	1
I am not very happy with the end result	0
I am not at all happy with the end result	0
Not answered	0
Total	6

Table 27– source all respondents (n=6)

5. How happy are you with how people dealt with the concern throughout the process?

Answer	Number
I am very happy with how people dealt with the concern	6
I am quite happy with how people dealt with the concern	0
I am not very happy with how people dealt with the concern	0
I am not at all happy with how people dealt with the concern	0
Not answered	0
Total	6

Table 28 – source all respondents (n=6)

6a. Do you feel that the person in this case is safer now as a result of the help from people dealing with the concern?

Answer	Number
I feel that the person in this case is a lot safer now	4
I feel that the person in this case is quite a bit safer now	2
I feel that the person in this case is not much safer now	0
I feel that the person in this case is not at all safer now	0
Not answered	0
Total	6

Table 29 – source all respondents (n=6)

Appendix 2 - Demographics

All Categories

Adult at Risk Deceased?	No.
Yes	2
No	29
Total	31

Table 30 – source all respondents (n=32)

Gender	No.
Female	18
Male	13
Total	31

Table 31 – source all respondents (n=32)

Age Groups	No.
18 - 64	18
65 - 74	2
75 - 84	4
85 - 94	7
Total	31

Table 32 – source all respondents (n=32)

Ethnicity	No.
White - British/English/ Northern Irish/ Scottish/Welsh	31
Total	31

Table 33 – source all respondents (n=32)

District of residence	No.
Ashfield	7
Bassetlaw	8
Broxtowe	1
Mansfield	10
Newark and Sherwood	3
Nottingham City	2
Total	31

Table 34 – source all respondents (n=32)

Demographics - Adult at Risk

Gender	No.
Female	5
Male	1
Total	6

Table 35– source all respondents (n=6)

Age Groups	No.
18 - 64	5
65 - 74	0
75 - 84	1
Total	6

Table 36– source all respondents (n6)

Ethnicity	No.
White - British/English/ Northern Irish/ Scottish/Welsh	6
Total	6

Table 37– source all respondents (n=6)

District of residence	No.
Ashfield	2
Bassetlaw	0
Broxtowe	1
Gedling	0
Mansfield	2
Newark and Sherwood	1
Nottingham City	0
Rushcliffe	0
Total	6

Table 38– source all respondents (n=6)

Demographics - Relative, Friend or Carer

Relative, Friend or Carer	No.
Alive	17
Deceased	2
Total	19

Table 39 – source all respondents (n=20)

Gender	No.
Female	9
Male	10
Total	19

Table 40 – source all respondents (n=20)

Age Groups	No.
18 - 64	9
65 - 74	1
75 - 84	2
85 - 94	7
Total	19

Table 41 – source all respondents (n=20)

Ethnicity	No.
White - British/English/ Northern Irish/ Scottish/Welsh	20
Total	19

Table 42 – source all respondents (n=20)

District of residence	No.
Ashfield	3
Bassetlaw	8
Mansfield	5
Newark and Sherwood	1
Nottingham City	2
Total	19

Table 43 – source all respondents (n=20)

Demographics - Independent Mental Capacity Advocates (IMCAs)

Gender	No.
Female	4
Male	2
Total	6

Table 44– source all respondents (n=6)

Age Groups	No.
18 - 64	4
65 - 74	1
75 - 84	1
Total	6

Table 45 – source all respondents (n=6)

Ethnicity	No.
White - British/English/ Northern Irish/ Scottish/Welsh	6
Total	6

Table 46 – source all respondents (n=6)

District of residence	No.
Ashfield	2
Mansfield	3
Newark and Sherwood	1
Total	6

Table 47– source all respondents (n=6)

Acknowledgements

We would like to take the opportunity to thank everyone involved in this project.

To all patients and carers, thank you for giving up your time to talk to us.

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