

# Northern Ireland Adult Safeguarding Partnership



**1 APRIL 2016 – 31 MARCH 2017**



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## EXECUTIVE SUMMARY

This is the sixth Annual Report of the Northern Ireland Adult Safeguarding Partnership (NIASP) and covers the period 1 April 2016 to 31 March 2017.

The introduction of the new regional policy Adult Safeguarding: Prevention and Protection in Partnership (2015) necessitated a review of NIASP's membership and operating processes to ensure that the partnership can work towards full implementation of the policy.

NIASP's workplan for 2016-17 focused on the key policy themes of prevention, protection and partnership and described the initial steps required to achieve full implementation of the policy. However, the absence of dedicated funding to support implementation has meant that progress has been slower than might have been wished and the transition period has had to be extended.

NIASP continues to promote the message that "safeguarding is everyone's business" through a variety of awareness-raising activities and through integrating adult safeguarding into related strategic initiatives such as the Domestic and Sexual Violence Strategy.

Protection activity is slightly reduced compared to previous years. This is to be expected as the system moves towards the use of alternative safeguarding responses and the use of more person-centred solutions to situations of abuse, neglect or exploitation.

NIASP continues to promote a human rights based approach to adult safeguarding. This is clearly reflected in the new procedures and there is growing evidence that practitioners are using this approach to the assessment and management of risk and joint decision-making with service users.

Audit activity has again focused on the user experience of adult safeguarding and is already generating important information which is influencing changes to safeguarding practice.

The introduction of new roles and responsibilities such as the Adult Safeguarding Champion is challenging for many organisations, but is also proving to be a very effective way of supporting organisations of all sizes to develop their own internal policy and procedures.

NIASP's workplan for 2017-18 reflects the continued process of policy implementation whilst also responding to new opportunities to develop an adult safeguarding system that is responsive to the needs of the service user



## WORKPLAN 2016 - 17

The NIASP Workplan for 2016-17 was based on the three core themes of the Regional Policy, Adult Safeguarding in Northern Ireland: Prevention and Protection in Partnership (DHSSPS, 2015).

The Policy does not set out a timetable for implementation or identify specific actions that are required to ensure the Policy is embedded in practice.

In responding to the Policy, NIASP ran a series of discussions and workshops which identified the initial priorities within each of the key areas within the Policy, ie Prevention, Protection and Partnership. At the same time, NIASP reviewed its membership to ensure that the relevant and appropriate skills and experience were included in the partnership.

As a result of that review, a number of new organisations, including the Business Services Organisation, have joined and other organisations have chosen to focus their attention on a Local Adult Safeguarding Partnership rather than NIASP.

NIASP working practices and structures were also reviewed to reflect the key priorities of prevention, protection and partnership. Each partner organisation is now aligned to area where they consider they have most to contribute, whilst recognising that most organisations will be interested in all 3 areas. These workgroups are Chaired by a member of NIASP and professional support is provided through the HSC Trust Adult Safeguarding Specialist social workers. Priority tasks were identified for 2016-17, and progress towards completion of these tasks is reported on below.

THEME	Commentary	Status
<b>Theme 1 PREVENTION</b>		
<p>Develop a regional programme of awareness raising and prevention activities to complement local prevention plans.</p>	<p>Members of this workstream have identified a range of prevention and awareness-raising activities, all of which will contribute to the final regional Prevention Plan.</p> <p>Products to date include:</p> <ul style="list-style-type: none"> <li>• Revision of the ‘See Something Say Something’ leaflets and updated to include a credit-card size version;</li> <li>• Inclusion of adult safeguarding awareness material in Talking Newspapers; and</li> <li>• Partnership work with Belfast Police and Community Safety Partnership to review and amend the adult safeguarding awareness raising DVD for use on a regional basis.</li> </ul> <p>In addition, the workstream is collating and reviewing members’ current and proposed prevention plans to identify common areas and gaps that should be included in the regional plan.</p>	<p>To be completed by March 2018</p>

<p>Ensure that NIASP and all partner organisations comply with the relevant requirements set out in Adult Safeguarding: Prevention and Protection in Partnership</p>	<p>The workstream has completed a review of the contents of the Adult Safeguarding Champion Annual Position report and made the appropriate recommendations for amendments to NIASP.</p> <p>Work continues on identifying a common data set for activity that is accessible and relevant for all organisations.</p>	<p>Completed March 2017</p> <p>To be completed by June 2017</p>
<p><b>Theme 2 PROTECTION</b></p>		
<p>Ensure that NIASP and all partner organisations have separate intranet sections on adult safeguarding which include easy access to core documentation including referral forms.</p>	<p>Full implementation delayed due to timescales for introduction of new procedures being extended.</p> <p>A questionnaire designed to scope current position has been agreed and will be piloted before full application in 2017-18.</p>	<p>To be completed by December 2017</p>
<p>Ensure that practitioners have access to relevant, evidence-based interventions and approaches</p>	<p>The annual Learning Event focused on sharing approaches to issues of financial abuse and included discussion of the applicability of a tool to assess an individual's risk of being financially abused.</p>	<p>On-going.</p> <p>Next event to take place by December 2017</p>

	<p>NIASP has continued to increase awareness of the value of Social Care Institute for Excellence and the Safeguarding Adults at Risk Information Hub in sharing evidence based practice.</p>	
<p>Finalise and complete a limited consultation on a manual of Operational Policies and Procedures</p>	<p>Consultation on the Operational Policies and Procedures is complete.</p> <p>The focus will now move to ongoing review of any issues which arise post implementation. The Protection Work stream will have a lead role in reviewing any required changes to the live document.</p>	<p>Completed July 2016</p>
<p>Review the interface with Human Resources and Adult Protection</p>	<p>The complexities in adult safeguarding investigations have resulted in increased challenges in relation to the interface between adult safeguarding and HR processes.</p> <p>The new Procedures include further guidance on this but additional work is required to secure a regionally agreed pathway and process.</p>	<p>On-going. To be completed by March 2018</p>

### Theme 3 PARTNERSHIP

<p>Clarify the interface between adult safeguarding and other public safety strategies such as the Domestic and Sexual Violence Strategy and Community Safety Strategy</p>	<p>The new Domestic and Sexual Violence Strategy has been published. Adult Safeguarding is represented on the Stakeholder Assurance Group.</p> <p>A key initiative in the Domestic and Sexual Violence Strategy is the introduction of Domestic Homicide Reviews into Northern Ireland. NIASP has been identified as a key partner in the management and quality assurance processes connected with these reviews.</p>	<p>On-going.</p> <p>To be completed by March 2018</p>
<p>Develop and describe a Human Rights- based Model of Adult Safeguarding</p>	<p>Human Rights are at the centre of the new policy and associated procedures.</p> <p>Practitioners are expected to apply a Human Rights based approach to risk assessment, risk management and joint working with service users and their carers/families.</p> <p>Further guidance will be developed in 2017-18.</p>	<p>On-going.</p> <p>To be completed by March 2018</p>



	implementation phase.	
Develop and publish a suite of standards for adult safeguarding in Northern Ireland.	<p>Generic Standards for adult safeguarding were developed in 2011 as part of the work on the creation of Service Frameworks and these are monitored on a quarterly basis.</p> <p>Standards in relation to responding to modern slavery have also been developed by the UK Commissioner for Modern Slavery and apply to adult safeguarding practice in this particularly challenging and complex area of practice.</p> <p>Further work is required to develop specific Standards for practice in relation to adults at risk and adults in need of protection.</p>	On-going. To complete by March 2018

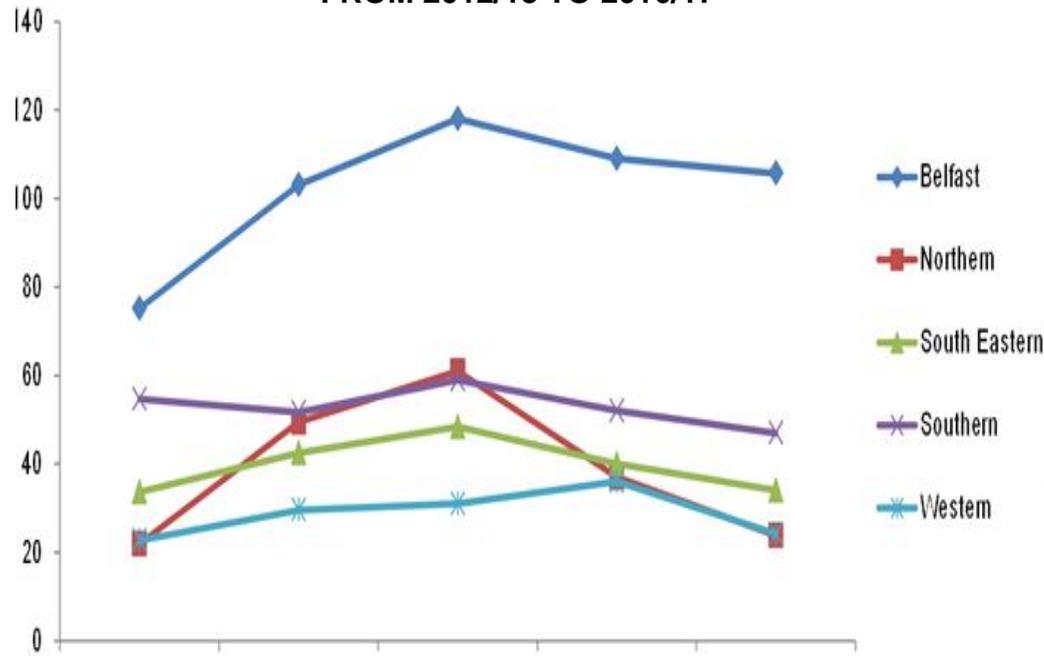
## ADULT SAFEGUARDING AT A GLANCE



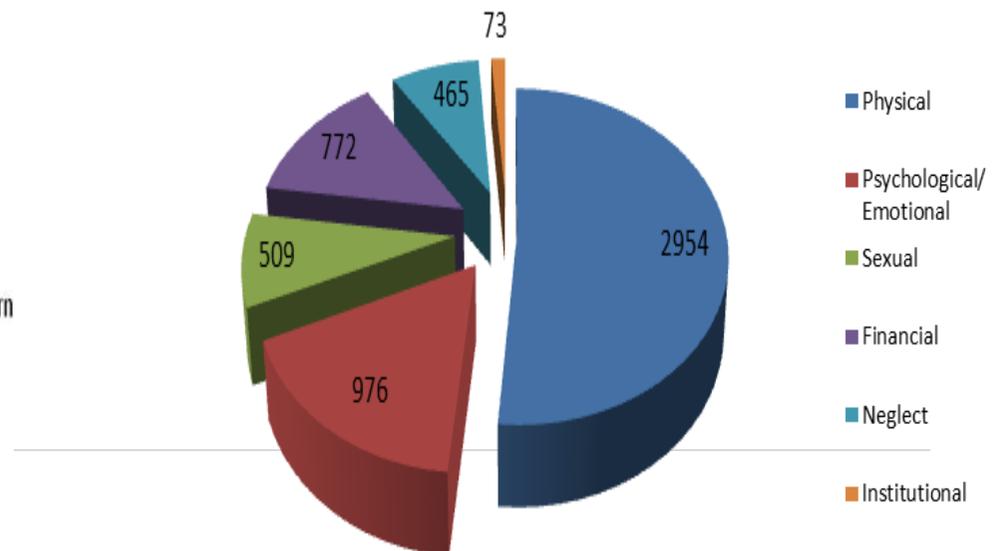
### REFERRALS BY HSC TRUST SINCE 2012/13

Trust	No of Referrals 2012/13	No of Referrals 2013/14	No of Referrals for 2014/15	No of Referrals for 2015/16	No of Referrals for 2016/17
Belfast	2054	2818	3240	3,036	2934
Northern	782	1766	2198	1,333	864
South Eastern	906	1144	1303	1,098	931
Southern	1476	1396	1615	1,459	1305
Western	506	658	705	821	545
<b>Region</b>	<b>5724</b>	<b>7782</b>	<b>9061</b>	<b>7747</b>	<b>6579</b>

### NO. OF REFERRALS PER 10,000 OF 18+ POPULATION FROM 2012/13 TO 2016/17

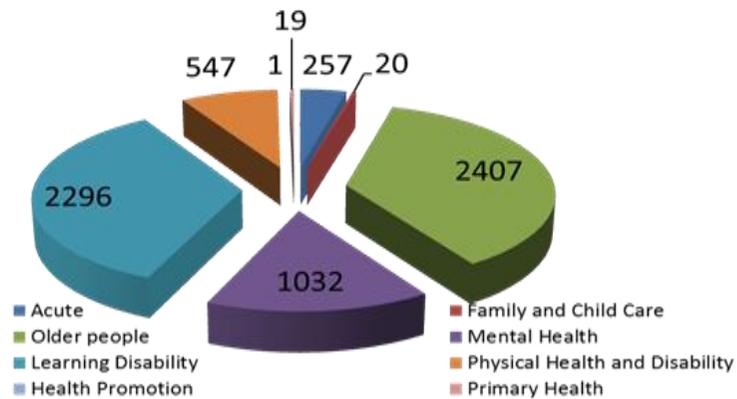


### REFERRALS BY TYPES OF ABUSE

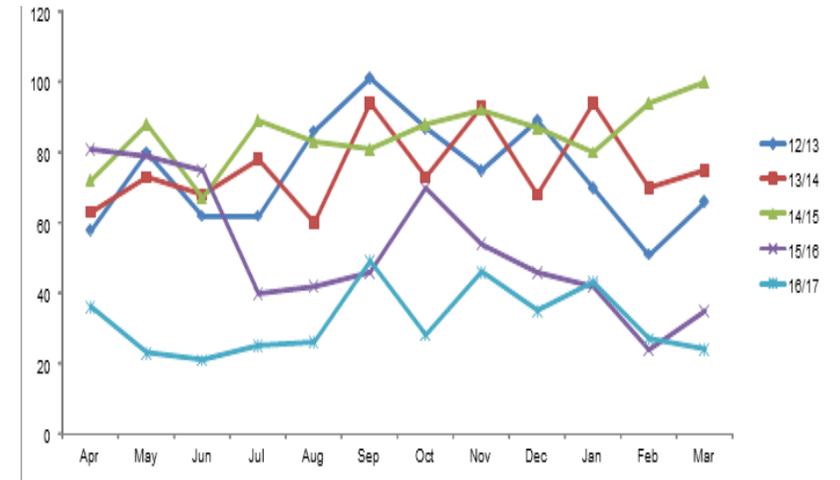


## ADULT SAFEGUARDING AT A GLANCE

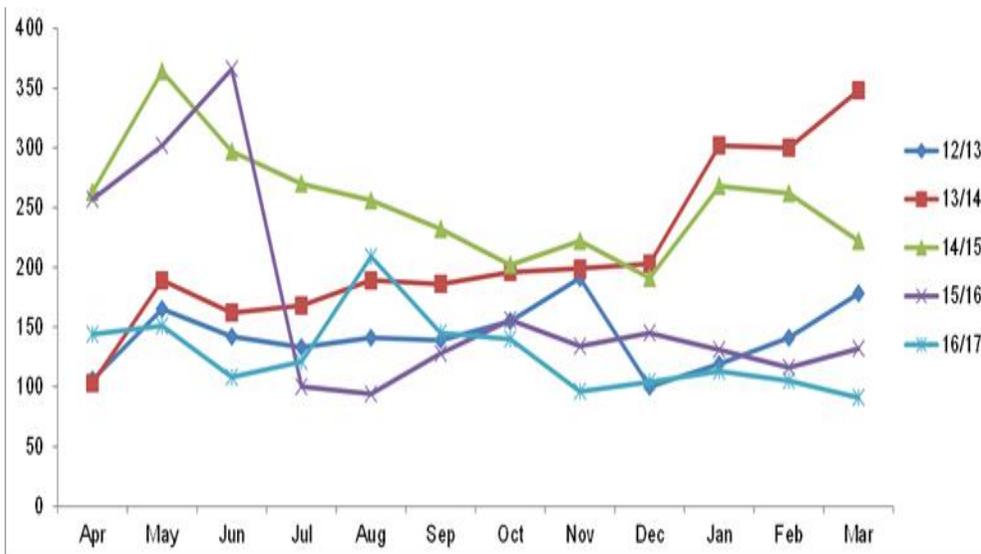
### REFERRALS BY PROGRAMME OF CARE



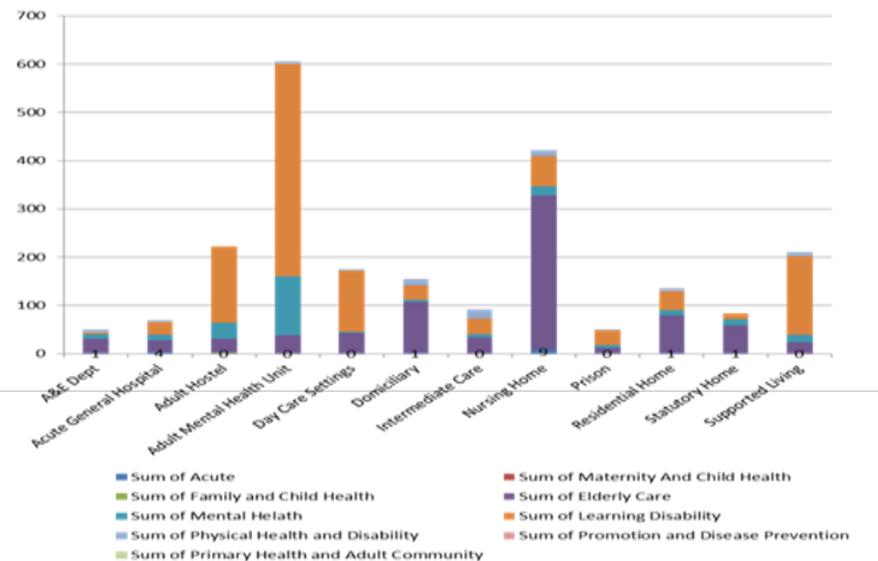
### NUMBER OF JOINT PROTOCOL INVESTIGATIONS FOR APRIL 2012 TO MARCH 2017



### NO. OF CASES CLOSED TO ADULT SAFEGUARDING FROM APRIL 2012 TO MARCH 2017



### INVESTIGATIONS COMMENCED INVOLVING REGISTERED FACILITIES/SERVICES (REGION) 2016/17





## ACTIVITY DATA ANALYSIS

This section of the Annual Report is based on activity data collected manually by the Health and Social Care (HSC) Trusts and then submitted to the Health and Social Care Board (HSCB) on a monthly basis. The data is then collated by the Information Team of the HSCB.

The HSC Trusts have agreed that manual collection of data is both inefficient and difficult to quality assure. They are currently introducing electronic data collection systems, but are at different stages of implementation.

Activity collection and analysis was influenced by a number of significant challenges in 2015-16:

- New procedures are influencing practice, but the current data return does not capture new activity eg it does not provide information on the use of alternative safeguarding interventions;
- HSCB and HSC Trusts have not yet reached agreement on the core data set under the new procedures and this is a priority for 2017-18. However, resources to develop a revised data return are very limited; and
- The transition from a manual to an electronic data collection is proving problematic as the new systems are being introduced within HSC Trusts on an incremental basis. This means that some service areas in HSC Trusts are progressing electronic recording, while other service areas in the same HSC Trust are still reliant on a manual return.

### **Referral Activity:**

In 2016/17, 6,579 referrals were received. This is a fall of approximately 1,200 referrals (15%) compared to 2015/16.

This represents 46 in every 10,000 of the 18+ population or 1 referral to every 215 people aged 18+ of the projected referrals for 2016/17.

Over the last 12 months the number of referrals has fluctuated. The highest recorded in June (641) and the lowest in February (497).

There are a number of possible reasons for this decrease in numbers, including:

- The phased implementation of the new procedures and the transition to the use of new definitions is resulting in higher numbers of concerns being “screened out” of the safeguarding system;
- The gradual move to Adult Safeguarding Gateway Teams has resulted in the concentration of expertise and experience in scrutiny of referrals, with more concerns being re-directed back to core services than in previous years;
- An increase in the number of concerns being dealt with in core services has made staff more confident in dealing with the presenting issue and developing alternative safeguarding responses; and
- Ongoing issues with recording systems.

As in previous years, the majority of referrals were received from the Older People’s Programme of Care (2407 or 37%) and adult Learning Disability services (2296 or 35%). 257 referrals or 4% were received from the acute sector, a decrease of 71 or 22% compared to 2015-16.

This year, a small number of referrals (20 or 0.3%) were received from Family and Child Care services. It is too soon and the numbers are too small to make any definitive comment on why this is occurring, but these referrals are likely to be in relation to young adults who have moved through the care system and continue to face significant levels of risk of abuse, neglect or exploitation. This group of people require the HSC Trusts to adopt a flexible approach as these individuals do not fit neatly into adult Programme of Care arrangements.

For the first time, referrals from Primary Care and Adult Community services have been noted in this activity report.

One impact of the introduction of the new policy and related awareness-raising activity has been to remind Primary Care practitioners such as dentists and

ophthalmologists, of their responsibility to recognise and respond to situations of potential abuse. Of 19 referrals from this Programme of Care, 12 were made by dentists and all were accepted by Adult Safeguarding Gateway teams.

Over the past 5 years, the number of referrals has varied within each HSC Trust. The Northern HSC Trust is showing the biggest fluctuation in activity, although all 5 HSC Trusts appear to have reached a peak in 2014-15.

As in previous years, Belfast HSC Trust had the highest number of referrals (2934 or 45%), while the Western HSC Trust reported the lowest number of referrals received at 545 or 8%.

If the referrals numbers are set against the local population of people over the age of 18 year, using the Mid-Year Population Estimates from 2015, then Belfast HSC Trust remains the highest with a rate of 106 per 10,000 of the population and the Northern and Western HSC Trusts the lowest with a rate of 24.

Given that the Northern HSC Trust has the largest population; it has the lowest referral rate of the 5 HSC Trusts.

Belfast and Southern HSC Trusts have a comparable population size; however, Belfast refers over double the number of cases per 10,000 of the population (106 to 47 respectively).

Belfast HSC Trust has consistently reported the highest number of referrals. The reasons for this variation are not clear. It may be related to the maturity of the adult safeguarding structures in Belfast, higher levels of deprivation or an increased willingness to report concerns.

### **Reason for Referral:**

It is not uncommon for individuals to experience a range of different types of abuse. For example, someone experiencing financial abuse is quite likely also to experience psychological abuse. However, HSC Trust recording systems only note the presenting or primary type of abuse to which the individual may have been subjected. As a result, this information is incomplete and only numbers can be reported with limited analysis possible.

The majority of referrals (2954) were made in relation to situations of physical abuse. Of these, 1316 were in relation to people with a Learning Disability, and 1028 were in relation to older people. Most referrals in relation to sexual abuse were made from the Mental Health Programme of Care

Referrals in relation to institutional abuse were the lowest at 73.

### **Allegations of Abuse in Regulated Facilities:**

As in previous years, only 4 of the 5 HSC Trusts record this information. However, the total number of referrals involving regulated services or facilities was 2270.

715 of these referrals involved care homes where most, but not all of the residents are older people. This may be explained by the fact that residents of such facilities are extremely frail and less able to keep themselves safe, are in receipt of high levels of care and may be more socially isolated than the general population.

766 referrals were received from adult mental health units. This includes not only mental health in-patient facilities but also specialist assessment and treatment units for adults with learning disabilities.

### **Care and Protection Plans:**

Care and Protection Plans are put in place to ensure that the alleged abuse either reduces in intensity or ceases completely. The Plans are subject to regular review not only in the course of an investigation as more detailed information becomes available, but also as part of any on-going support plan once the safeguarding investigation has concluded.

It is also possible that an adult in need of protection will not actually require a Care and Protection Plan as the abuse has been addressed through an alternative safeguarding intervention eg a paid employee is placed on precautionary suspension.

The number of Care and Protection Plans opened in-year is, obviously, related to the number of new referrals. The drop in the number of referrals is reflected in the drop in the number of Care and Protection Plans commenced from 4167 in 2015-16 to 3234 in 2016-17. There continues to be a significant variation in the number of Care and Protection Plans across HSC Trusts, ranging from 1471 in the Belfast Trust to 226 in the Western Trust, but again this is reflective of referral patterns

### **Joint Protocol Investigations:**

Allegations of abuse where a crime is suspected or alleged to have occurred and investigated in partnership with the PSNI under arrangements set out in the Protocol for Joint Investigation of Adult Safeguarding Cases (2016). These are likely to be the most complex cases as well as those where the greatest harm has occurred to the individual service users.

The overall number of Joint Investigations has decreased over the last 3 years, with 383 being commenced in 2016-17.

It is anticipated that this number will continue to decline as alternative safeguarding interventions are pursued and service users are empowered to make decisions about making complaints to the PSNI

### **Closed Cases:**

In the course of 2016-17 1527 cases were closed to adult safeguarding. This is 23% of all referrals received in-year.

For a small number of people, closing a safeguarding case will also conclude their contact with the HSC Trust. However, the majority of people will continue to receive services and support from the HSC Trust with adjustments to their personal care plans to ensure they are safeguarded from any further harm.

Overall the number of cases closed has fallen over the past 3 years. While this is not yet a matter of concern, it requires careful monitoring to ensure that actions are being progressed within appropriate timescales and that the safeguarding system has capacity to respond to new or emerging issues.



## PREVENTION ACTIVITY

Throughout 2016-17, NIASP engaged in a range of different activities focusing on the prevention of abuse, neglect or exploitation.

Work has continued with the UK Anti-Slavery Commissioner through raising awareness of modern slavery, particularly as it occurs in a Northern Ireland context. This has included awareness raising activities in the faith sector, HSC Trusts and the voluntary and community sectors, primarily through disseminating information via meetings, conferences etc.. Partnership approaches with other agencies and organisations such as UK Border Force continue to develop and are becoming increasingly effective.

NIASP continues to work with the PSNI to facilitate a number of different crime prevention initiatives. Crime prevention literature was developed for domiciliary care workers. It highlighted the importance of alerting managers to excessive “junk mail”, telephone calls, on-line shopping etc as possible indicators that someone is being scammed, as well as providing reminders of best practice in relation to home security. The information was been widely disseminated and was very well received by front-line staff.

This approach has been further developed through the design and delivery of crime prevention training for domiciliary care workers. This was provided by the PSNI and evaluation of the pilot programmes has been very positive. It is hoped that this will be further developed in 2017-18.

The current Community Safety Strategy has a strong focus on fear of crime in older people, and this has resulted in a number of positive initiatives to prevent abuse, neglect or exploitation. A significant development has been the extension of a pilot scheme on the installation of call-blocker devices, ie devices attached to telephones that screen out telephone numbers known to be associated with scam activity. Initial feedback from the pilot sites has recorded a general decrease in the number and

frequency of unwanted calls. However, it is concerning that some individuals requested that the call blocker device be removed from their telephones, as they missed speaking to callers on a regular basis.

Local Adult Safeguarding Partnerships (LASPs) have developed a range of activities focusing on prevention. "Keeping You Safe" programmes have focused on community groups, individuals, service users and residents. In addition, one LASP has developed a self-assessment tool for residential and nursing facilities to help them identify areas of risk and so take preventative action before they result in harm to residents.



## PROTECTION ACTIVITY

Adult Safeguarding: Prevention and Protection in Practice (2015) presents a number of significant challenges in responding to adults at risk or in need of protection.

In 2016-17, NIASP completed a limited consultation on new regional procedures, designed to reflect the requirements of the policy. It is NIASP's expectation that these new procedures will be fully operational by the end of March 2017.

The policy and procedures mark a significant change in how protection activity is carried out. In particular, the policy notes the importance of utilising alternative safeguarding responses to protect adults at risk. Such alternative responses require practitioners to consider the most effective safeguarding response which is also the most person-centred and least restrictive intervention. It is likely that work will continue throughout 2017-18 to develop alternative responses further.

One area where this is particularly relevant is in relation to financial abuse. It may not always, for example, be possible to move to a joint agency investigation of certain types of financial abuse, eg scams. However, working with individuals to develop alternative money management skills and options may well protect that individual from further financial harm.

The PSNI has now completed the consolidation of adult safeguarding expertise within the Central Referral Unit. This has resulted in enhanced communication between the PSNI and HSC Trusts, improved response times and strengthened decision-making.

HSC Trusts are also moving from having a single point of contact for adult safeguarding to Adult Safeguarding Gateway teams. These teams will deal with all referrals in relation to adults in need of protection where a joint HSC/PSNI response is required; all large-scale or complex investigations and other complex adult safeguarding concerns such as cases of suspected modern slavery.

While progress towards implementation of this model has been slow, significant benefits have already been identified in terms of consistency of approach, consolidation of expertise and faster decision-making.



## PARTNERSHIP ACTIVITY

The central message of Adult Safeguarding: Prevention and Protection in Partnership (2015) is that safeguarding is everyone's business. However, safeguarding activity is at its most effective when conducted in partnership with others.

NIASP has a strong partnership ethos which has, to date, been very effective in progressing all aspects of adult safeguarding activity.

As part of NIASP's response to the new policy, a fundamental review of membership was undertaken. The purpose of the review was to ensure that the skills and expertise necessary to progress the safeguarding agenda are available to NIASP.

This resulted in a small number of organisations electing to focus on more local safeguarding activity. At the same time, a number of new organisations, including the Business Services Organisation and Action on Elder Abuse (NI) have joined NIASP.

One of the strongest partnerships within NIASP is between HSC Trusts and the PSNI, probably because these organisations work together on a daily basis both in preventative and protection activities.

Other partnerships that continue to deliver effective safeguarding include provider organisations such as the Independent Health Care Providers and the Association for Real Change.

However, effective partnership working does not depend solely or exclusively on the membership of any particular network. In 2016-17 new partnerships have been established with the Northern Ireland Ambulance Trust and the Northern Ireland Fire and Rescue Service.

The introduction of new roles and responsibilities has also created opportunities for partnership working, eg providers have expressed a desire to develop a support network for Adult Safeguarding Champions. This opportunity will be developed further in 2017-18.

NIASP has continued to develop and nurture partnerships with academia, most noticeably in its relationship with the National Centre for the Protection of Older People in Dublin and links with the University of Ulster and Queen's University, Belfast.

Partnership working can be both challenging and time-consuming. It requires a common determination to achieve the best possible outcome for the adult at risk or in need of protection and an understanding of often competing priorities and processes.

Throughout 2016-17, NIASP partners have demonstrated a continuing commitment to working together and the strength of the partnership continues to grow.



# HUMAN RIGHTS

Adult Safeguarding: Prevention and Protection in Practice sets out 5 guiding principles for practice and notes that all adult safeguarding activity should be rights-based, empowering, person-centred, consent-driven and collaborative in approach.

Adult safeguarding practitioners engage on a daily basis with the sophisticated task of balancing risk assessment with the protection and promotion of an adult's rights and responsibilities.

The new procedures set out clearly the key questions in relation to consent, capacity and potential risk to others, which should be borne in mind throughout any adult safeguarding investigation.

The wishes of the adult in need of protection are of paramount importance in all cases of alleged or suspected abuse and the consent of the adult in need of protection should be sought as a first step.

The procedures also set out the limited exceptional circumstances where the Designated Adult Protection Officer may need to consider over-riding the wishes of an adult in need of protection if they do not consent to a joint agency consultation with the PSNI. These include situations where:

1. There is reasonable evidence or information to indicate that a possible relevant offence has been committed and the Trust have a legal obligation to report to the PSNI.
2. There is a significant query regarding the individual's capacity to make an informed decision and therefore their ability to give or withhold consent is in question. Actions taken must be proportionate to the level of concern and the views of substitute decision makers.
3. Information available clearly demonstrates that the individual is subject to substantial undue influence or coercion.

4. There is a significant risk to other adults at risk and/or children.
5. The likelihood of further harm is high and there is a substantial opportunity to prevent further crime.

Human Rights underpin the procedures for responding to adults at risk or in need of protection and are central to the regional training programme for Investigating and Designated Adult Protection Officers. It is hoped that this procedural guidance will assist practitioners to be more explicit about their application of a Human Rights-based approach to adult safeguarding and result in better outcomes for adults at risk.



# ADULT SAFEGUARDING CHAMPIONS

Adult Safeguarding: Prevention and Protection in Partnership (2015) introduces a number of new roles and responsibilities, including that of the Adult Safeguarding Champion (ASC)

The ASC provides strategic and operational leadership and oversight in relation to adult safeguarding for an organisation or group as well as being responsible for implementing its adult safeguarding policy statement.

Organisations have worked hard throughout 2016-17 to ensure they are ready to take on the new responsibilities inherent in the ASC role.

The ASC role was first addressed at a conference in April 2016 which provided key information and noted NIASP's expectation that each organisation would have a nominated ASC by the end of March 2017.

NIASP was able to provide specific, targeted training events for ASCs through Volunteer Now. 434 people attended information roadshows or training sessions on the role of the ASC. The training has been very positively evaluated and it is planned to continue to offer these opportunities in 2017-18.

NIASP also contributed to training on the ASC role provided by partner organisations such as the Association for Real Change and the Independent Health Care Providers.

ASCs have expressed a desire to develop a peer support network, with the goal of ensuring consistency of approach and sharing learning as the role develops. In 2017-18, NIASP will explore different options to support such a network.



## SHARING LEARNING

NIASP is committed to learning from the experience of service users, front line staff and partner organisations.

Learning can come from a variety of sources, including individual reflections on practice, formal education or training opportunities and through the review of specific cases or issues.

In 2016-17, NIASP identified significant learning arising from investigations of allegations of financial abuse and fraud, and hosted a regional event to share learning on this theme in October 2016.

The event was opened by the Commissioner for Older People and included contributions from HSC Trusts, RQIA, Action on Elder Abuse and the Centre for the Protection of Older People, Dublin. The event concluded with participants working in small groups to develop their own action plans outlining how the learning identified would be put into practice.

This was the second sharing learning event to be hosted by NIASP and the first to focus on a specific topic, ie financial abuse. The event was very positively evaluated by participants and provides a blueprint for future learning opportunities.



## AUDIT ACTIVITY

The focus for audit activity in 2016-17 has been on progressing learning from service users' experiences of adult safeguarding.

The overall aim of the audit is to identify how the adult safeguarding process can be improved to ensure that the service user experience is rights based, empowering, consent driven and as person centred as possible.

The desired outcomes from the audit are to:

- Improve understanding of the service user experience of adult safeguarding processes;
- Increase the profile of the service user experience as a key element of service commissioning and improvement;
- Increase professional awareness of the changes required in practice and/or systems in response to user experience information; and
- Incorporate findings from the audit into local and regional service model improvement plans in order to improve the overall experience of service users.

A Sensemaker® survey tool was designed in partnership with the 10,000 Voices Project Team in the Public Health Agency, Professor Jill Manthorpe from Kings College London and the Social Care Workforce Research Unit of the Department of Health and key stakeholders who attended a series of workshops.

The survey tool invites service users to recount their experience of the adult safeguarding process and to respond to a number of specific questions. They are also asked to identify what might improve their experience and to indicate whether they feel any safer as result of the safeguarding intervention.

A total of 36 responses were received in the course of the pilot phase.

Responses to the question "Do you feel you are safer now as a result of the safeguarding investigation?" were as follows:

Not completed	3
I feel that I am not at all safer now	4
I feel that I am not much safer now	4
I feel that I am quite a bit safer now	16
I feel that I am completely safe now	9

Overall, 25 or 75% of people who answered this question reported that they felt safer at the conclusion of the safeguarding investigation.

While the majority of service users felt they either had the right information at the right time or were supported to understand it, they also identified a number of themes for service improvement, including:

- Communication of the purpose of an adult safeguarding process to service users and/or carers;
- Provision of written information for reflection;
- Clarifying what the service user and/or carer understands from the information provided on the Adult Safeguarding process and the ability of the individual to process information at a given point;
- Alternative approaches to investigation that result in change or action;
- Enhance multiagency communication with the service user and/or carer throughout the process ;
- Reinforcing a respectful and non-judgemental approach to service users and/or carers experience ,wishes or decisions as to how to respond ;
- Development of protection planning and building resilience of the service user;
- Opportunity for post investigation support and therapeutic intervention for the service user and their families in closure stage of safeguarding process;
- Understanding of desired outcomes of the service user or carer and communication of actual outcomes with them in a meaningful way.

NIASP is currently considering how these areas can be incorporated into practice.

Overall, the pilot phase of this audit has proved very successful and has already provided important learning for adult safeguarding. It is anticipated that the full audit, involving up to 1,000 returns will be completed and information analysed in 2017-18.



## NATIONAL AND INTERNATIONAL LINKS

Throughout 2016-17, NIASP continued to build on links between adult safeguarding in Northern Ireland and the rest of the UK and Ireland.

The link with the National Centre for the Protection of Older People (NCPOP) in Dublin continues to provide NIASP with access to cutting-edge research on the topic of financial abuse of older people. The Centre also provided accessible and relevant research-based evidence at the annual Learning Event.

To mark the anniversary of the Care Act (2014) in England, a series of seminars were arranged to explore the impact the adult safeguarding clauses have had in practice. One of these took the form of a review of developments in legislation and policy on adult safeguarding in England, Scotland, Wales and Northern Ireland. As Northern Ireland is now the only part of the UK without specific legislation to protect adults, there was considerable interest in how local policy, procedures and practice have developed.

Following this seminar, NIASP was asked to contribute a paper to a special edition of the Journal of Adult Protection devoted to the legislative and policy context to adult safeguarding across the UK.

The seminar was also an opportunity to create more formal links with the Welsh Safeguarding Board. The Joint Chairs of the Board visited Northern Ireland in the spring of 2017 where the potential for collaborative working was discussed. It is hoped that this connection will develop further in 2017-18, for example through joint learning events.



## RISKS AND OPPORTUNITIES

Looking forward to 2017-18, there are a number of risks as well as opportunities for adult safeguarding in general and NIASP in particular.

NIASP will continue to work with partner organisations and HSC Trusts to implement Adult Safeguarding: Prevention and Protection in Partnership (2015) and the associated procedures. However, the continued lack of dedicated funding means that implementation of some aspects of the policy and procedures may be delayed. For example, lack of resources to provide enhanced training opportunities has meant that available funding has been targeted at existing Investigating and Designated Adult Protection Officers and it has not been possible to train practitioners new to these roles.

Similarly, the opportunity to identify and share learning becomes more constrained as conferences and workshops are curtailed. The opportunity to build a community of practitioners in adult safeguarding is also reduced.

The existing data return is not reflective of the new roles, responsibilities and activity contained in the policy and associated procedures. Adult safeguarding is one priority among many in terms of the development of an electronic recording system.

However, other aspects of the policy do not require new or additional investment. For example, practitioners have responded very positively to the concept of alternative safeguarding responses and it will be important to capture new and innovative interventions and share them on a regional basis.

The new Domestic and Sexual Violence Strategy also offers NIASP a number of new and exciting opportunities to address the abuse of adults at risk or in need of protection. The current draft proposal that NIASP will play a key role in the introduction of Domestic Homicide reviews is just one example of NIASP's role in co-ordination and quality assurance of safeguarding responses.



## WORKPLAN 2017 - 18

### Theme 1 PREVENTION

Objective	Rationale	Target for Completion
Continue to develop a regional programme of awareness raising and prevention activities to complement local prevention plans.	<p>The regional programme will continue to evolve in partnership with local initiatives.</p> <p>Particular attention will be paid in 2017-18 to working in partnership with PSNI and Trading Standards to ensure that crime prevention material and training is rolled out to as many front-line staff as possible, whether in specific training sessions or through access to e-learning opportunities such as Friends Against Scams.</p>	March 2018
Ensure that NIASP and all partner organisations comply with the relevant requirements set out in	The final template for the Adult Safeguarding Champion Annual Position report and associated common data return will be available for use by ASCs for their annual report on adult safeguarding activity in 2017-18.	June 2017

<u>Adult Safeguarding:</u> <u>Prevention and Protection</u> <u>in Partnership</u>		
<b>Theme 2 PROTECTION</b>		
<p>Ensure that NIASP and all partner organisations have separate internet /intranet sections as appropriate on adult safeguarding which include easy access to core documentation including referral forms.</p>	<p>Information on new roles and responsibilities and core documentation associated with the new policy and procedures are now available. It is vital that this information is accessible to staff at all levels in an organisation.</p> <p>As a first step, NIASP will pilot a brief questionnaire to ascertain how partner organisations currently ensure this information is widely available and publicised.</p> <p>Develop NISP web presence to include core information and access to relevant learning and practice development initiatives.</p>	<p>Pilot to be completed by September 2017.</p> <p>Audit to be completed by December 2017.</p> <p>March 2018</p>
<p>Ensure that practitioners have access to relevant, evidence-based interventions and</p>	<p>NIASP will continue to ensure that practitioners are provided with access to relevant interventions through sharing learning and best practice through the annual Learning Event, SAARIH and the NIASP website.</p>	<p>March 2018</p>

approaches	<p>In 2017-18 NIASP will publish a minimum of 1 article in a relevant peer-reviewed journal on the topic of adult safeguarding in Northern Ireland. NIASP will continue to promote the use of the Social Care Institute for Excellence and the Safeguarding Adults at Risk Information Hub as effective ways of accessing the most up-to-date developments in practice and research.</p>	<p>September 2018</p> <p>March 2018</p>
Review the interface with Human Resources and Adult Protection	<p>The complexities in adult safeguarding investigations have resulted in increased challenges in relation to the interface between adult safeguarding and HR processes.</p> <p>The new Procedures include further guidance on this but more work is required to secure a regionally agreed pathway and process, including identification and dissemination of best practice examples across NIASP.</p>	<p>March 2018</p>
Develop initial guidance for staff in responding to issues of financial abuse	<p>NIASP will work with relevant partner organisations such as Business Services Organisation, Trading Standards etc to develop introductory guidance for staff in responding to issues of financial abuse or exploitation.</p>	<p>December 2017</p>
Keep regional procedures under regular review to ensure they continue to support practice.	<p>NIASP will review current adult safeguarding procedures (including the Joint Protocol) to ensure they remain fit for purpose, and bring any recommendations for changes to NIASP for consideration.</p>	<p>March 2017</p>

### Theme 3 PARTNERSHIP

<p>Clarify the interface between adult safeguarding and other public safety strategies such as the Domestic and Sexual Violence Strategy</p>	<p>NIASP will work with the Department of Justice to confirm the arrangements to be put in place to introduce Domestic Homicide reviews into Northern Ireland and clarify the role and contribution of NIASP in this process. This will include consideration of any associated costs.</p>	<p>March 2018</p>
<p>NIASP will review current adult safeguarding structures and ensure they are fit for purpose</p>	<p>NIASP will continue to keep its structures and operational procedures under review.</p> <p>NIASP will strengthen its internal governance arrangements through the production of a Handbook of Operational Procedures.</p> <p>NIASP will work with partner organisations to develop a peer support network for ASCs.</p>	<p>To be reviewed annually</p> <p>September 2017</p> <p>June 2017</p>
<p>NIASP will ensure that the experience of service users is sought at all stages of</p>	<p>NIASP will complete the full audit of user experience through the 10,000 Voices methodology.</p>	<p>Full audit to be completed by December 2017</p>

<p>the safeguarding process</p>	<p>The findings of the audit will be presented to NIASP and a regional action plan developed to address any relevant findings.</p>	<p>Action Plan to be presented to NIASP by March 2018</p>
<p>Review general and specialist training courses to ensure they meet the needs of practitioners and partner organisations and are responsive to developing policy, standards and practice</p>	<p>There is a need to ensure that education and training opportunities are fully reflective of the policy, procedures and emerging best practice.</p> <p>The NIASP Training sub-group will continue to keep this under review.</p>	<p>December 2017</p>
<p>Develop and publish a suite of standards for adult safeguarding in Northern Ireland.</p>	<p>NIASP will consider the development of a small number of Standards for practice in relation to the Protocol for Joint Investigation of Adult Safeguarding Cases.</p> <p>On completion, these Standards will be added to the existing suite.</p>	<p>March 2018</p>





# APPENDICES

## MEMBER ORGANISATIONS

Action for Elder Abuse  
Action Mental Health  
Age NI  
Association for Real Change  
Belfast Health & Social Care Trust  
Business Services Organisation  
Carers NI  
Faith Sector - Presbyterian Church in Ireland  
HSCB (Integrated Care)  
HSCB (Social Care and Children)  
Independent Healthcare providers  
Northern Health & Social Care Trust  
Northern Ireland Association of Social Workers  
Northern Ireland Housing Executive  
Probation Board for Northern Ireland  
PSNI  
Public Health Agency (Allied Health Professionals)  
Public Health Agency (Nursing)  
Red Cross  
Regulation and Quality Improvement Authority  
Royal College of Nursing  
Social Security Agency  
SOLACE  
South Eastern Health & Social Care Trust  
Southern Health & Social Care Trust  
Volunteer Now  
Western Health & Social Care Trust  
Women's Aid