



Meeting of the People Services Scrutiny Committee

**Thursday 28th January, 2016 at 6.00pm
In Committee Room 2 at the Council House, Priory Road, Dudley**

Agenda - Public Session (Meeting open to the public and press)

1. Apologies for absence.
2. To report the appointment of any substitute members serving for this meeting of the Committee.
3. To receive any declarations of interest under the Members' Code of Conduct.
4. To confirm and sign the minutes of the People Services Scrutiny Committee meeting held on 18th November, 2015, as a correct record.
5. Public Forum
6. Medium Term Financial Strategy (Pages 1 - 22)
7. Dudley Safeguarding Adult Board Annual Report 2014-2015 (Pages 23 - 58)
8. Deprivation of Liberty Safeguards (DoLS) (Pages 59 - 62)
9. Dudley New Model of Care (Vanguard) Programme Update (Pages 63 - 67)
10. To consider any questions from Members to the Chair where two clear days notice has been given to the Strategic Director Resources and Transformation (Council Procedure Rule 11.8).

A handwritten signature in black ink, appearing to be "P. Z.", is written over a horizontal line.

**Strategic Director Resources & Transformation
Dated: 20th January, 2016**

Distribution:**Members of the People Services Scrutiny Committee:**

Councillor M Mottram (Chair)

Councillor M Attwood (Vice Chair)

Councillors N Barlow, C Baugh, R Body, P Bradley, D Hemingsley, C Perks, G Simms, S Tyler and D Vickers; Mrs M Ward and Reverend A Wickens; Mr A Qadus and Mr D Tinsley.

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- You can contact Democratic Services by Telephone 01384 815238 or E-mail Democratic.Services@dudley.gov.uk

Minutes of the People Services Scrutiny Committee

Wednesday 18th November, 2015 at 6.00 pm
in Committee Room 2 at the Council House, Dudley

Present:

Councillor M Attwood (Vice-Chair in the Chair)
Councillors C Baugh, R Body, P Bradley, A Goddard, J Martin, S Phipps, C Perks, D Russell, D Vickers and Mr A Qadus.

Officers:

M Williams - Chief Officer Environmental Services (Lead Officer) (Place Directorate); T Oakman - Strategic Director People, M Bowsher - Chief Officer Adult Social Care, D Harkins - Chief Officer Health and Well Being, M Joseph – Interim Chief Officer Children's Services (People Directorate), I Newman - Chief Officer Finance and Legal Services, P Bengé – Finance Manager, K Cocker – Finance Manager (Children's Services), R Cooper – Head of Financial Services and H Shepherd - Democratic Services Officer (Resources and Transformation Directorate).

17 Apologies for absence

Apologies for absence from the meeting were submitted on behalf of Councillors N Barlow, D Hemingsley, M Mottram, G Simms, S Tyler; Mrs M Ward and Reverend A Wickens.

18 Appointment of Substitute Members

It was noted that Councillors S Phipps, A Goddard, J Martin and D Russell had been appointed as substitute members for Councillors N Barlow, S Tyler, M Mottram and D Hemingsley, respectively.

19 Declarations of Interest

No member made a declaration of interest in accordance with the Members' Code of Conduct.

20 Minutes

Resolved

That the minutes of the People Services Scrutiny Committee meeting held on 22nd September, 2015, be approved as a correct record and signed.

21 **Public Forum**

No issues were raised under this agenda item.

22 **Appointment of a Scrutiny Development Group – Children’s Services**

A report of the Lead Officer was submitted on the appointment of a Scrutiny Development Group – Children’s Services, comprising of all Members of the People Services Scrutiny Committee with a terms of reference to focus on the scrutiny of issues concerning Children’s Services.

Resolved

That a Scrutiny Development Group – Children’s Services, be established, comprising of all Members of the People Services Scrutiny Committee with a terms of reference to focus on the scrutiny of issues concerning Children’s Services.

23 **Medium Term Financial Strategy**

A joint report of the Chief Executive, Chief Officer Finance and Legal Services and the Strategic Director People was submitted to consult the Scrutiny Committee on the Medium Term Financial Strategy (MTFS) to 2018/19, with emphasis on those proposals relating to the People Services Scrutiny Committee terms of reference. Items directly related to the People Services Scrutiny Committee were those concerning the People Directorate, as set out in paragraph 29 of the report and appendices A and B of the report submitted.

In presenting the report, the Chief Officer Finance and Legal Services referred to paragraphs of particular importance and stated that the proposals had provisionally been set on the forecast based on the Chancellor’s Summer Budget and the implied reduction in funding to unprotected areas. Definitive Revenue Support Grant (RSG) and other government funding allocations would not be confirmed until December, 2015.

Specific attention was directed to the table in paragraph 34 of the report submitted summarising the base budget forecast, spending pressures, saving proposals and redundancy costs. It was stated that there would not be sufficient funds available to balance the accounts for 2016/17 and all Directorates had been requested to provide additional saving proposals. A special meeting of the Cabinet had been arranged for January, 2016, to consider further budget proposals and to set a lawful budget with a further budget report being presented to Scrutiny Committees as necessary in the January/February cycle of meetings.

Arising from the presentation of the report and appendices to the report submitted, Members asked questions, raised issues and made comments on the budget proposals as follows:-

(At this juncture, Councillor R Body declared a non-pecuniary interest in relation to all matters relating to allowances paid to foster carers and homeless young adults, as he was a carer for homeless teenagers.)

- It was confirmed that the £50.6m deficit funded from balances referred to in paragraph 34 of the report was in addition to £19.6m proposed savings identified in paragraph 29.
- The cuts were considered to be “astronomical” and life changing and Officers were questioned as to what services would not be provided or reduced to achieve the necessary savings and the impact this would have on the community.
- Could the allowance paid to Dudley’s foster carers be increased to compete with agency foster carers to avoid additional agency costs?
- How would the savings referred to in Appendix B, in relation to the following, be achieved?
 1. Restructure the integrated youth support service.
 2. Develop a more integrated approach for children and young people in the area of safeguarding and early help to include Children Centres.
 3. Redesign the early help offer for Dudley to prevent children escalating to become looked after.
 4. Alignment of contract prices at New Bradley Hall with market conditions.
 5. Re-provision of long term residential care and reablement at Russell Court.
 6. Review the scope, capacity and efficiency of the Dementia Gateway service.
 7. Review efficiency, effectiveness and investment in supporting people and voluntary sector commissioned services.
 8. Creation of a Library, Archives and Adult Learning mutual.
 9. Restructure of Public Health management and staffing posts.
 10. Review investment efficiencies in Public Health commissioning arrangements.
- What percentage of children were cared for by agency foster carers and what percentage cared for by Dudley’s foster carers, and what was the cost difference between the two provisions?
- Are frontline officers safe in their working environment?
- The public’s perception and expectations of the Council needed to change, as services could not continue to function and operate in the way that they had previously.
- Collective and partnership working with voluntary and community services, the NHS and the Clinical Commissioning Group needed to be developed to help support services that were at risk.

- Written responses to the following questions were requested:-
 1. Over £10m of pressures relating to non delivery of Better Care, Assessment and Independence and complex and inclusion and mental health, how are these figures broken down?
 2. Details on £2m of savings in the redesign of the early help offer for Dudley to prevent children escalating to becoming looked after?
 3. A saving of £0.5m to maintain reablement service capacity and delivery via alternative business mode, what is this new alternative?
 4. A saving of £3m over three years to review efficiency, effectiveness and investment in supporting people and voluntary sector commissioned services, details as to where these savings would be achieved.
 5. Details about the Library, Archives and Adult Learning saving over three years of £1.5m.
 6. Over £2.5m from Public Health Grant, details were requested?
 7. How many full-time equivalent posts will be lost with the proposals put forward within this directorate?
- Members disagreed with MP's pay rises when essential services were at risk which would have a huge impact on ordinary people's daily life.

Arising from the comments made and questions raised, the Strategic Director People and relevant Chief Officers responded, where appropriate, as follows:-

- The Council faced difficult decisions and challenging times ahead, as the same level of service that was currently provided could not be sustained. Alternative ways of operating, including working with the voluntary sector to deliver services that had previously been provided by the Council would be explored.
- The amalgamation of Children's Services, Adult and Community Services and Public Health had identified internal silo working and duplicated roles. Efficiency working and the redesign of the services would alleviate duplication.
- The Directorate would continue to work hard to prevent a breach in statutory functions occurring and to ensure the right level of service was provided to the relevant people. Statutory functions would not be compromised but alternative and more efficient ways of providing those functions would need to be implemented.
- It was agreed at the meeting of the Cabinet in June, 2015, to increase the allowance paid to Dudley foster carers and to undertake a recruitment drive to encourage an uptake in internal foster carers. Dudley foster carer numbers were low and therefore private agency foster carers were used, however an increase in internal foster carers would alleviate agency costs.

- The new People Directorate had inherited a range of problems in relation to spending and performance pressures. Work had been undertaken to reduce the high number of looked after children and to review all children's care history. A panel had been implemented to scrutinise all placements and to ensure value for money was achieved. It was considered to be more cost effective for placements to be brought back into the borough but that the welfare of the children was paramount. Work was also being undertaken to develop a robust and effective early intervention package to prevent children and young people from entering into the care system which would result in a reduction in the need for high cost provisions.
- As a result of the exceptional work and the re-organisation of the Children's Services Division, the number of looked after children in Dudley had started to decline and budgetary savings were being made for the first time in a number of years.
- An integrated approach of services provided at Children Centres would be developed, incorporating health visitors and midwife services to eliminate duplicated services and to develop a family hub to cater for 0-18 year olds to meet efficiency targets.
- A positive response had been received from Schools in regards to the possibility of transferring assets, in particular the 'time for twos' initiative into Schools, which would enable the School to develop an understanding of a child's needs prior to them commencing school.
- The savings indicated in relation to New Bradley Hall had already been met via the transfer of the service to Black Country Housing Group.
- The effectiveness and capacity of the provision and facilities provided at Russell Court would be reviewed. No decision with regards to the future of the service had been made.
- There were currently three dementia gateway provisions within the borough, all of which were not currently full to capacity. The Chief Officer Adult Social Care confirmed that at present there was a 66% utilisation rate and therefore a full review of the service would be undertaken to look at better use of capacity and to explore how the service could be maintained to continue to meet statutory requirements.
- Partnership working with the Clinical Commissioning Group and other service providers was essential and would provide the Council with the opportunity to redesign and improve services.
- It was stated that a Library, Archives and Adult Learning mutual was a 'not for profit' organisation but would be able to bid for funding that the Council could not access. It was envisaged that no libraries or archives would close but changes would be made to how the facilities operated. A public consultation would be undertaken to establish users views on proposed changes which included a change in opening hours.

- Public Health had previously been excluded from the Corporate Restructure but following the merger of the service with the Council, it had emerged that there was duplication within the existing structure and some responsibilities should be undertaken by partner organisations. A restructure of Public Health would now take place and it was anticipated that the streamlined structure would result in a loss of 19 full time equivalent posts.
- The integration of contracts, services and joint working would mitigate the impact in Public Health commissioning arrangements and help to deliver efficiency savings.
- Details with regards to the percentage figures in relation to the number of children being cared for by the different foster carers and the difference in costs between the private agency and internal carers would be provided following the meeting, however the cost was not a straight forward issue as each individual would be dealt with on a case by case basis.
- Regular risk assessments were undertaken and health and safety protocols were in place to protect frontline staff. It was incumbent on staff to ensure they remained safe and reported any concerns. Staff welfare would continue to be paramount.

Members praised Officers for their responses, reflecting a change in the approach of the service and Directorate.

Resolved

- (1) That the Cabinet's proposals for the Medium Term Financial Strategy to 2018/19, taking into account the considerations set out in paragraph 44 of the report and appendices to the report submitted, be noted.
- (2) That the Strategic Director People provide written responses to the questions raised, as indicated above, to all Members of the Scrutiny Committee.

The meeting ended at 7.50pm.

CHAIR

Meeting of the People's Services Scrutiny Committee – 28th January 2016

Joint Report of the Chief Executive, Chief Officer, (Finance and Legal Services) and Strategic Director (People)

Medium Term Financial Strategy

Purpose of Report

1. To consult the Scrutiny Committee on the updated Medium Term Financial Strategy (MTFS) to 2018/19, approved by Cabinet on 18th January as a basis for further consultation, with emphasis on those proposals relating to the committee's terms of reference.
2. For this committee the relevant items are those relating to the People Directorate in paragraphs 32 and 34.

Background

3. At its meeting on 28th October, Cabinet considered the forecast General Fund revenue position for 2015/16 and MTFS to 2018/19 and agreed a preliminary strategy as the basis for consultation. It noted in particular that based on the resource forecasts, pressures and savings proposals set out, balances would be insufficient to fund the deficit even until the end of 2016/17. In view of that position, it was agreed that a further report would be brought to Cabinet in January and that, following the meeting of Cabinet, there would be further consideration by Scrutiny Committees.
4. At its meeting on 18th January, Cabinet will therefore be considering the impact of the Provisional Local Government Finance Settlement 2016/17 (received in December) and revised proposals for actions by the Council to work towards addressing the financial challenge. The impact of changes compared with the October report is analysed in Appendix A.

Forecast 2015/16 Position

5. At its meeting on 28th October Cabinet agreed the amendment of the 2015/16 General Fund budget in respect of a number of variances set out in detail. Since then, the following further variances have arisen.

6. The current approved budget for 2015/16 includes provision of £5.6m for redundancy costs required to achieve proposed savings, including those relating to pension strain. These costs are highly dependent on the age and length of service of the individuals being made redundant, and at this stage cannot be precisely calculated. However, taking into account the latest monitoring of the redundancy process including additional savings now being proposed, it would be prudent to increase the provision in the current year to £7.6m. (The MTFS includes provision for further redundancy costs of £5.1m during 2016/17 and £1.1m during 2017/18. We will continue to review these provisions, but there are no proposals to make any changes at this time.)
7. At 31st March 2015, the Council held unringfenced¹ earmarked reserves of £22.3m. These reserves have been reviewed to identify any no longer required for their original purpose. It is proposed to take the following amounts to General Balances.
- The Paragon (PFI) reserve was originally established to balance the timing of funding and resources relating to the project, and was subsequently topped-up with contributions from the General Fund at a time when it was considered that resources would be insufficient to cover costs. Our latest forecast is that the £2.8m so contributed can be returned without affecting future affordability.
 - The Working Balances reserve of £2m was originally established as a reserve of last resort in the event of unforeseen costs or income shortfalls that could not be managed within budget or from General Balances. It is now considered that these risks should be covered by retaining appropriate levels of General Balances rather than via a specific earmarked reserve.

Earmarked reserves will be further reviewed at year end and any further opportunities to make transfers into the General Fund will be reported to Cabinet in June.

8. It is proposed that Council be recommended to amend 2015/16 budgets to reflect the above variances.

General Fund Balances

9. The latest forecast General Fund Balances position, compared to the current Approved Budget for 2015/16 is therefore as follows.

	Current Budget £m	Latest Position £m
Balance at 31 st March 2015	25.0	25.0
Planned use approved by Council in March	-6.5	-6.5
Variations approved by Cabinet in October	+1.3	+1.3
	19.8	19.8
Redundancy costs (para 6)	-	-2.0
Review of earmarked reserves (para 7)	-	+4.8
Forecast balance at 31st March 2016	19.8	22.6

¹ This definition excludes reserves that are subject to specific laws and regulations governing their use - the Public Health Grant, the Housing Revenue Account, schools' balances and the central Dedicated Schools Grant reserve.

Medium Term Financial Strategy to 2019/2020

10. In updating the Council's Medium Term Financial Strategy, Members will need to consider carefully:
 - (a) the levels of Government support allocated to the Council;
 - (b) spending pressures, opportunities to free up resources (including savings), and Council Plan priorities;
 - (c) the implications of spending levels in later years as part of the Council's medium term financial plan;
 - (d) the views of consultees;
 - (e) the external factors and risks inherent in the Strategy;
 - (f) the impact on Council Tax payers.
 - (g) the potential impacts on people with protected characteristics as defined in the Equality Act 2010. Members will need to have due regard to the public sector equality duty under the Equality Act 2010. (Further details are set out in the Equality Impact section below.)

Government Funding

11. The Provisional Local Government Finance Settlement 2016/17 was announced on 17th December. This settlement includes indicative figures up to 2019/20.
12. The methodology for allocating reductions in Revenue Support Grant (RSG) has been amended to reflect authorities' differential capacity to generate income from Council Tax. Other things being equal, this is favourable to Dudley. However, taking into account the overall change in RSG nationally, compared with our forecasts in October, RSG will be lower in 2017/18 but higher in 2018/19. These updated figures are reflected in the revised forecasts in this report. The current Care Act Grant and the ongoing Council Tax Freeze Grant in respect of the 2015/16 freeze have been merged into RSG from 2016/17. Anticipated costs that were previously funded from the Care Act Grant have been included in Spending Pressures below.
13. Provisional New Homes Bonus (NHB) allocations have been announced for 2016/17. Dudley's allocation is in line with the amount previously anticipated. The Government is proposing to amend the methodology for allocating NHB from 2017/18 onwards, including in particular that NHB funding will be for a maximum of 4 years rather than the current 6. Forecasts below have been amended in line with Government projections, although final figures will depend on the final methodology chosen and actual new home completions locally. Generally any reduction in NHB nationally (which is currently mostly top-sliced from the amount available for RSG) will favour Dudley given that the number of new homes locally has increased, and is forecast to continue to increase, more slowly than the national average.
14. From 2017/18, extra Better Care Fund (BCF) is being allocated to Councils with Adult Social Care responsibilities – rising to £1.5bn nationally by 2019/20. This is partly funded by the proposed reduction in NHB set out above. Details are not yet clear, but we are currently assuming that this grant will be paid directly to councils.

15. The Government has announced that the basic maximum Council Tax increase for 2016/17, above which a referendum would need to be held, will be 2%, with some extra flexibility for Police and Crime Commissioners and District Councils with relatively low existing Council Tax levels.
16. All Councils responsible for Adult Social Care will have the capacity to increase Council Tax by an additional 2% each year up to 2019/20 without the need for a referendum – the “Social Care Precept”. The Section 151 Officer will be required to certify that the resources generated have been allocated to Adult Social Care. Information in respect of the Precept will also need to be included on Council Tax Bills. The Secretary of State will monitor this via relevant statistical returns at budget and outturn stage, and may take the results into account when setting future referendum thresholds for individual authorities.
17. The Council receives Education Support Grant (ESG) to cover a number of services provided centrally in respect of schools – mainly those services which Academy schools must procure for themselves and for which they receive ESG directly. The Government has announced that the Council’s ESG will reduce by £0.3m in 2016/17 (separately from any changes as a result of further Academy transfers). Savings are being identified in the People Directorate to match the funding reduction, and details will be reported to Cabinet in February.
18. The Chancellor confirmed in the Autumn Statement that large employers will have to pay an Apprenticeship Levy at a rate of 0.5% of payroll from 2017/18 onwards to fund apprentice training. On the assumption that the HRA and Dedicated Schools Grant funded services will bear their proportion of such costs, the impact on the General Fund will be around £0.5m per year. This has been built into forecasts below.
19. From 2016/17, Councils will have the flexibility to utilise Capital Receipts (other than those from Right to Buy disposals) to fund transformation costs. We will consider opportunities to use this flexibility and report back to Cabinet in due course.
20. The Government intends to devolve 100% of Business Rates to councils by 2020. This does not affect the budget for 2016/17, and at this stage there is no indication that it will have any impact in the subsequent 3 years. The implications for the Council will be reported to Cabinet when detailed proposals are issued. The Government has confirmed that the reforms will be fiscally neutral at the national level.
21. As stated above, the settlement now includes *indicative* figures up to 2019/20. The Government has indicated that it is prepared to go further and enter into agreements with individual councils to give a guaranteed minimum level of funding up to 2019/20 subject to the development of efficiency plans. We await further details of the terms and conditions attached to any such agreement and will report back with recommendations to a future meeting of Cabinet. For the time being, the indicative figures in the settlement are considered to be a reasonable basis for forecasting.
22. The impact of the changes above compared with the October report position are shown at Appendix A. The net effect is worse than we previously forecast for 2016/17 and 2017/18, but becomes significantly more favourable from 2018/19.

Council Tax and Business Rates

23. The Council Tax forecasts in the October report to Cabinet anticipated that the cuts to tax credits from April 2016 could increase Dudley's Council Tax Reduction (CTR) scheme costs by up to £0.5m per year. As the cuts to tax credits are no longer proceeding, our forecasts have been updated accordingly, together with changes resulting from revisions to future tax base growth assumptions. Latest forecasts indicate a further increase in the one-off Collection Fund (Council Tax element) surplus at 31st March 2016, available for use in 2016/17.
24. The October forecasts assumed that Council Tax increases by just under 2% for each year of the MTFS. Latest forecasts assume that the Council will take advantage of the ability to increase Council Tax by a further 2% in respect of the Social Care Precept, such that increases will be just under 4% for each year of the MTFS.
25. The Government has indicated that the doubling of Small Business Rate Relief (SBRR) will continue for another year until 31st March 2017. The loss of income will be funded by a specific grant. Figures have also been updated to reflect the Office of Budget Responsibility's latest RPI forecasts, given that Business Rate increases are linked to RPI.
26. The impact of the changes above compared with the October report position are shown at Appendix A.
27. The underlying buoyancy of these income streams will continue to be reviewed and final forecasts will be reported to Cabinet in February.

Integrated Transport Authority Levy

28. We have assumed, based on indications from the Integrated Transport Authority (ITA) that the Levy will reduce by 7.4% over the next three years. This will be reviewed in line with further announcements from the ITA.

Base Budget Forecasts

29. To reflect the announcement of indicative funding levels for 4 years and aid robust financial planning, our forecasts have now been extended to include 2019/20.

30. The Base Budget reflects the impact on spending of anticipated changes, before directorate spending pressures or savings proposals are taken into account. Details are as follows.

	2016/17	2017/18	2018/19	2019/20
	£m	£m	£m	£m
2015/16 base	229.4	229.4	229.4	229.4
Pay (<i>note 1</i>)	1.5	3.0	4.7	6.9
ITA Levy (<i>see paragraph 28</i>)	-0.6	-0.9	-1.1	-1.1
Income uplift (<i>note 2</i>)	-1.2	-2.4	-3.3	-4.3
Change in MRP Policy (<i>as reported to Cabinet in October</i>)	-14.4	-15.0	-0.7	-0.3
Pensions (<i>note 3</i>)	1.2	3.4	3.8	4.0
National Insurance (<i>note 4</i>)	2.1	2.1	2.1	2.1
Apprenticeship Levy (<i>see paragraph 18</i>)		0.5	0.5	0.5
Other adjustments (<i>note 5</i>)	0.2	-0.3	-0.6	-1.1
Base Budget Forecast	218.2	219.8	234.8	236.1

Notes:

- (1) We are expecting underlying pay awards for local government to continue to be settled at very low levels in the next few years. The national employers' organisation which covers the majority of staff has made a 2 year pay offer (for 2016/17 and 2017/18) based on a 1% underlying increase and the anticipated impact of the National Living Wage (including the maintenance of appropriate differentials as a consequence of the latter). We have allowed for increases on a similar basis in subsequent years.
- (2) This assumes an increase of 2% per year on fees and charges.
- (3) Ongoing stepping up of employer contributions following revision of the Local Government pension scheme from April 2014.
- (4) Ending of "contracting out" on introduction of Single Tier State Pension from April 2016.
- (5) Impact of Capital Programme and treasury management changes, and other minor adjustments.

31. The impact of changes compared with the October report position is shown at Appendix A. The most significant change is that there is now no provision for general price increases on non-pay budgets. With the exception of specific directorate pressures identified in paragraph 32 below, all non-pay budgets will be cash limited and any inflationary pressures will need to be managed within directorate budgets and through efficient procurement. This represents a significant financial challenge. To ensure that the challenge is met, we are reviewing authorisation levels and use of purchase cards, developing guidance and promoting an "every penny counts" approach with and for all budget managers.

Spending Pressures

32. Spending pressures provided for are as follows. These are detailed in Appendix B.

	2016/17	2017/18	2018/19	2019/20
	£m	£m	£m	£m
People	14.7	16.4	18.7	23.6
Place	0.9	1.2	1.3	1.5
Resources and Transformation	0.4	0.4	0.4	0.5
Total	16.0	18.0	20.4	25.6

33. The impact of changes compared with the October report position are shown at Appendix A. The most significant change relates to the impact of the National Living Wage (NLW) on adult social care. In October, we made prudent provision for this pressure on the basis of the expected trajectory of NLW increases and assumptions about direct wage costs as a proportion of total costs. Following a survey of costs, comparisons with charges paid by neighbouring councils and negotiations with providers, we propose to contain cost increases within a provision of £3.4m by 2018/19 and £5m by 2019/20. This will be challenging and will require the retendering of home care in 2017/18. It may also impact on a number of smaller providers of residential and nursing care. The position will be monitored to ensure that sufficient capacity is maintained to meet care needs.

Savings

34. Cabinet on 28th October considered a package of Directorate savings proposals as the basis for scrutiny and consultation. These have now been updated in pursuance of Cabinet's instruction that directorates would further review budgets to identify additional savings that can be implemented from 2016/17. Details are set out in Appendix C.

	2016/17	2017/18	2018/19	2019/20
	£m	£m	£m	£m
People	4.3	12.1	12.5	12.5
Place	1.3	2.3	4.0	4.0
Resources and Transformation	2.4	3.4	3.5	3.5
Total Directorate Savings	8.0	17.8	20.0	20.0

35. In addition to the Directorate savings, it is proposed to enter into negotiations with a view to reducing Car Mileage Allowance costs by £0.2m annually from 2017/18 onwards.

36. The impact of changes compared with the October report position are shown at Appendix A.

Public Health

37. The Council's original Public Health Grant allocation in the current year was £21.4m, which was subsequently reduced by £1.3m following the reduction in national allocations by £200m in-year. We are expecting the 2016/17 grant allocation to be announced in late January, and details will be reported to Cabinet in February.

38. Savings proposals in respect of grant funded activities are set out in Appendix C. Proposals for the overall deployment of the 2016/17 funding will be brought back to Cabinet for consideration in due course. Subject to the funding available, opportunities will be sought to use the Public Health Grant to support the wider health improvement priorities of the Council.

Medium Term Financial Strategy

39. The MTFS reflecting the revised spending proposals set out above, and forecasts of likely resource availability can be summarised as follows.

	2016/17 £m	2017/18 £m	2018/19 £m	2019/20 £m
Base Budget Forecast	218.2	219.8	234.8	236.1
- see para 30				
Pressures	16.0	18.0	20.4	25.6
- see para 32				
Directorate Savings	-8.0	-17.8	-20.0	-20.0
- see para 34				
Car Mileage Savings	-	-0.2	-0.2	-0.2
- see para 35				
Redundancy costs	5.1	1.1	-	-
- see para 6				
Total Service Spend	231.3	220.9	235.0	241.5
Revenue Support Grant (RSG)	44.9	33.2	25.4	17.5
Retained Business Rates	45.0	46.9	47.9	48.5
Top-Up Grant	15.3	15.6	16.1	16.6
Business Rate Grant	2.7	1.0	0.9	1.0
New Homes Bonus, inc. Adjustment Grant	5.6	5.6	3.5	3.4
New Better Care Fund	-	1.2	7.2	12.4
Collection Fund Surplus – Council Tax	2.0	-	-	-
Collection Fund Deficit – Business Rates	-1.8	-0.7	-	-
Council Tax - Basic	101.1	104.0	106.9	110.0
Council Tax - Social Care Precept	2.0	4.1	6.5	9.1
Total Resources	216.8	210.9	214.4	218.5
Deficit funded from Balances	14.5	10.0	20.6	23.0
Balances brought forward	22.6	8.1	n/a	n/a
Balances carried forward	8.1	n/a	n/a	n/a

40. The table above assumes that Council Tax, including the Social Care Precept, increases by just under 4% for each year of the MTFS. This would not require a referendum in accordance with Chapter 4ZA of Part 1 of the Local Government Finance Act 1992.
41. This represents an improvement compared with the position reported in October. However, members should note:
- The improved forecasts involve significant new challenges to control expenditure (in particular the cash-limiting of non-pay budgets and the management of National Living Wage pressures in Adult Social Care).

- Based on the resource forecasts, pressures and savings proposals set out above, there will still be a significant deficit in each year of the MTFS.
- While reserves will be sufficient to cover this and set a legal budget for 2016/17, the position beyond that point is unsustainable.
- If further action is not taken to address the forecast deficit for 2017/18, this will be a matter of concern for the External Auditors in their audit of the current year's accounts (a separate report to this meeting covers this issue in more detail).
- Levels of reserves are very low compared with the national average².
- There is a continuing challenge for the Council to radically transform service delivery. Measures to achieve this transformation were the subject of a separate report to Cabinet on 3rd December.

Estimates, Assumptions & Risk Analysis

42. The proposals in this report are based on a number of estimates, assumptions and professional judgements, which are subject to continuous review. These may lead to further increases in expenditure and, therefore, the need to identify alternative funding sources, and include:

- (a) Revenue Support Grant for 2016/17 – 2019/20 is in line with Government indications.
- (b) income from Business Rates (net of appeals etc.) will be in line with current forecasts;
- (c) the cost of Council Tax Reduction awarded will not substantially exceed forecasts, and the tax base will continue to grow as anticipated;
- (d) New Homes Bonus funding is in line with Government indications.
- (e) Unequal Pay Back Pay costs are no more than estimated;
- (f) pay inflation and interest rates do not vary materially from current forecasts;
- (g) cash limited non-pay budgets will be managed so as to absorb any price inflation not specifically provided for, as set out in paragraph 31;
- (h) income and expenditure relating to treasury management activity, including airport dividend income, are in line with forecasts;
- (i) there will be no other unplanned expenditure (including any resulting from demographic pressures) or shortfalls in income, which cannot be met from reserves;
- (j) there will be no changes to government policy on maximum underlying Council Tax increases without the need for a referendum;
- (k) New Better Care Funding is unfettered and received directly by the Council as anticipated;

² As at 31st March 2015 (the last date for which comparisons are available) Dudley's unringfenced reserves represented 20% of net budget. For the average council, these reserves represented 40% of net budget. Unringfenced reserves are the sum of General Balances and earmarked reserves excluding Public Health, the Housing Revenue Account, schools and the central Dedicated Schools Grant reserve.

- (l) the Adult Social Care market is able to absorb National Living Wage pressures within the proposed provision;
- (m) any initial and subsequent monitoring requirements in respect of use of the Social Care Precept are satisfied.

Consultation

- 43. This year's public consultation has mainly utilised the successful online channels of the e-bulletin, internet and social media, with hard copy, printed versions available in borough libraries and Dudley Council Plus through a consultation which will continue to run until the end of January. The results will be reported to Cabinet in February.
- 44. Detailed consultation is also being undertaken with groups identified as being potentially affected by the specific savings proposals, with a particular emphasis on equalities issues. Further information is set out in the Equality Impact section below. Unions are being consulted in the context of the redundancy process.
- 45. A consultation document was distributed to representatives of Non-Domestic Ratepayers setting out the provisional budget proposals agreed in October. Further detailed information (as required in pursuance of the statutory duty to consult) will be distributed in February for comment before the Council Tax setting meeting.
- 46. In accordance with the Council's Constitution, the Scrutiny Committees were asked to consider the issues set out in the October report and any related specific issues relevant to their Council Plan and service responsibilities in the November cycle. In framing their responses, the Scrutiny Committees were asked to consider both the spending and funding implications (including the impact on Council Tax) of any observations they may wish to make.
- 47. Scrutiny Committees are now being asked to consider the issues and revised proposals set out in this report and any related specific issues relevant to their Council Plan and service responsibilities. For this committee the relevant items are those relating to the People Directorate in paragraphs 32 and 34. The Strategic Director (People) will be available at the meeting to address any queries. In framing their responses, the Scrutiny Committees are asked to consider both the spending and funding implications (including the impact on Council Tax) of any observations they may wish to make.

Finance

- 48. This report is financial in nature and relevant information is contained within the body of the report.

Law

- 49. The Council's budget setting process is governed by the Local Government Finance Acts 1988 and 1992, and 2012 and the Local Government Act 2003.

50. The Local Government Act 2003 requires the Chief Financial Officer to report on the robustness of estimates made for the purpose of final budget calculations, and the adequacy of the proposed financial reserves and this will be included in the final budget report.
51. The Localism Act 2011 introduced a new chapter into the Local Government Finance Act 1992 making provision for council tax referendums to be held if an authority increases its council tax by an amount exceeding principles determined by the Secretary of State and agreed by the House of Commons.

Equality Impact

52. Section 149 of the Equality Act 2010 - the general public sector equality duty - requires public authorities, including the Council, to have due regard to the need to:
 - eliminate discrimination, harassment and victimisation and other conduct that is prohibited by the Act;
 - advance equality of opportunity between people who share a protected characteristic and those who don't;
 - foster good relations between people who share a protected characteristic and those who don't.
53. Having due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to:
 - remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic
 - take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it
 - encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
54. The legislation states that "the steps involved in meeting the needs of disabled persons that are different from the needs of persons who are not disabled include, in particular, steps to take account of disabled persons' disabilities." In practice, this means that reasonable adjustments should be made for disabled people so that they can access a service or fulfil employment duties, or perhaps a choice of an additional service for disabled people is offered as an alternative to a mainstream service.
55. Having due regard to the need to foster good relations between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to:
 - tackle prejudice, and
 - promote understanding.

56. Compliance with the duties in this section may involve treating some persons more favourably than others; but that is not to be taken as permitting conduct that would otherwise be prohibited by or under this Act.

The duty covers the protected characteristics of age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

57. An initial assessment of the budget proposals has been made. Where proposals are likely to have a significant equality impact, they will undergo an equality impact assessment informed by consultation with the protected groups who may be adversely affected, during the autumn. The results of this process and any steps which emerge that might help to mitigate any potential impact of the budget proposals on the protected groups will be reported to Members so that they can pay due regard to the Public Sector Equality Duty in making decisions on the budget. In making decisions on budget proposals, Members will need to weigh the Public Sector Equality Duty against the forecast financial position, risks and uncertainties set out in this report.
58. With regard to Children and Young People, a substantial element of the proposed budget for the People Directorate will be spent on maintaining and improving services for children and young people. The expenditure of other Directorates' budgets will also have a significant impact on this group.

Recommendations

59. That the Committee considers the Cabinet's proposals for the Medium Term Financial Strategy to 2018/19, taking into account the considerations set out in paragraph 47.



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Chief Executive



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Iain Newman
Chief Officer, Finance and Legal Services



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List of Background Papers

Medium Term Financial Strategy report to Cabinet 28th October 2015
Provisional Local Government Financial Settlement 2016/17

Changes compared with October report

	2016/17 £m	2017/18 £m	2018/19 £m
Previous forecast deficit	21.4	22.8	50.6
Spending Review and Provisional Settlement:			
Revenue Support Grant (para 12)	-	0.6	-7.0
Council Tax Freeze Grant 2015/16 included in RSG from 2016/17 (para 12)	1.1	1.1	1.1
Spending pressure currently funded by Care Act Grant (included in RSG from 2016/17) (para 12)	0.7	0.7	0.7
New Better Care Fund (para 14)	-	-1.2	-7.2
New Homes Bonus (proposed to be revised to free up resources for Better Care Fund) (para 13)	-	0.4	2.9
Apprenticeship Levy (para 18)	-	0.5	0.5
	1.8	2.1	-9.0
Changes to Spending Proposals:			
Adjustment to pay inflation provision (para 30)	0.1	-	-
Manage general price inflation within cash limited budgets (para 31)	-2.8	-6.0	-9.1
Specific price inflation provided for (para 31)	0.2	0.5	0.7
Manage care contracts to reduce impact of National Living Wage (para 32)	-3.1	-4.5	-5.3
Other changes to spending proposals (see detail below)	-	-0.7	-0.7
	-5.6	-10.7	-14.4
Changes to Local Resources:			
Council Tax Base and Collection Fund surplus (para 23)	-1.1	-0.4	-0.3
Update Business Rate income in line with latest RPI forecasts (para 25)	-	0.4	0.2
Social Care Precept (para 16)	-2.0	-4.2	-6.5
	-3.1	-4.2	-6.6
Latest forecast deficit	14.5	10.0	20.6

Other changes to spending proposals	2016/17	2017/18	2018/19
	£'000	£'000	£'000
Defer savings from review of efficiency, effectiveness and investment in supporting people and voluntary sector commissioned services	568	-	-
Develop Transformation team structure within existing budget	-158	-158	-158
Further restructuring of Corporate Landlord Services	-25	-25	-25
Acceleration of savings from Financial Services	-75	-	-
Further Senior Management restructure	-359	-359	-359
Review of Car Mileage allowances	-	-200	-200
Total	-49	-742	-742

Spending Pressures

People	2016/17	2017/18	2018/19	2019/20
	£'000	£'000	£'000	£'000
Outcomes from Safeguarding Children Services Audit	900	1005	1113	1,221
Spend to Save Initiative: District Social Worker peripatetic pool to cover maternity and turnover thus avoiding the engagement of Agency Staff Social Workers.	225	225	225	225
Invest in Children's Services to support the development of the Dudley Safeguarding and Early Help model.	250	250	250	250
Non-delivery of the Better Care Fund performance element	1,620	1,620	1,620	1,620
Existing Service Pressures - Assessment and Independence	5,000	5,000	5,000	5,000
Existing Service Pressures - Complex and Inclusion and Mental Health	3,400	3,400	3,400	3,400
Pressures around increased Safeguarding and Deprivation of Liberty standards (DOLS) activity	160	160	160	160
Increased costs of care for Older people as a result of demographic pressures of people living longer. (dementia)	539	1,078	1,617	2,156
Learning disability transition cases	1,005	1,005	1,005	1,005
National Living Wage residential care providers	451	1,363	2,293	3,242
National Living Wage care at home providers	-	-	550	1,112
National Living Wage direct payments	155	206	218	230
National Living Wage – Sleep Ins	300	338	375	413
Inflationary Pressure - Education Outcomes, Existing Premature Retirement costs	39	78	118	158
Transfer of Care Act Grant to RSG – ongoing commitments, plus new costs in 2019/20	708	708	708	3,444
Total	14,752	16,436	18,652	23,636

Place	2016/17	2017/18	2018/19	2019/20
	£'000	£'000	£'000	£'000
Shortfall of Pay & Display income due to reduction in parking spaces without commensurate reduction in income target	250	250	250	250
Increase in free spaces & reduction in season permit holders.	100	100	100	100
Not converting free car parks to Pay & Display per agreed policy	150	150	150	150
Dudley Market Place cleansing (growth)	50	50	50	50
Leisure Centres income shortfall	100	100	100	100
Waste disposal - higher costs at recycling site and landfill tax, from 2017 when current contract is due for renewal, plus inflationary pressures	204	502	683	895
Total	854	1,152	1,333	1,545

Resources and Transformation	2016/17	2017/18	2018/19	2019/20
	£'000	£'000	£'000	£'000
Legal Services additional support for Looked After Children	100	100	100	100
Assumed maximum reduction in DWP Benefits Admin Grant based on previous trends.	175	175	175	175
Impact of National Living Wage on outsourced Cleaning Contract for Admin Buildings	49	80	120	160
Subscription to Black Country Consortium	50	50	50	50
Total	374	405	445	485

Proposed Savings

People	2016/17	2017/18	2018/19	2019/20
	£'000	£'000	£'000	£'000
Generate additional surplus traded service income.	39	100	100	100
Service efficiencies in respect of the Educational Psychology service.	0	24	24	24
Restructure the integrated youth support service.	130	330	330	330
Realign the voluntary and community sector commissioning budget.	40	80	80	80
Options will be explored for Dudley Performing Arts (DPA) service to become 100% financially sustainable by 2016/17, through traded service income, grants, partner contributions and trust status.	170	170	170	170
Establish savings through an integrated service approach to the Whole Life Disability service to be achieved as part of the People Services Directorate revised structure from 2015.	5	75	75	75
Smarten the commissioning arrangements in the People Services Directorate.	133	223	223	223
Redesign the Education Services division to achieve efficiencies and improve outcomes.	110	156	156	156
Integrate service arrangements for the Teenage Pregnancy programme with Social Care and Public Health.	0	134	134	134
Develop a more integrated approach for children and young people in the area of safeguarding and early help to include Children Centres.	137	1,401	1,401	1,401
Redesign the early help offer for Dudley to prevent children escalating to becoming looked after.	0	2,000	2,000	2,000
Alignment of contract prices at New Bradley Hall with market conditions.	0	0	354	354
Maintain reablement service capacity and delivery via alternative business model.	500	500	500	500
Commission alternative model to current Employment plus arrangements.	239	239	239	239

People	2016/17	2017/18	2018/19	2019/20
	£'000	£'000	£'000	£'000
Reprovision of long term residential care and reablement at Russell Court	500	1,000	1,000	1,000
Review the scope, capacity and efficiency of the Dementia Gateway service.	443	886	886	886
Review efficiency, effectiveness and investment in supporting people and voluntary sector commissioned services.	932	3,000	3,000	3,000
Removal of grant funding for Centre for Equality and Diversity (CFED)	20	40	40	40
Redesign and integrate the service delivery model for Environmental Health and Trading Services.	0	137	137	137
Recommissioning of the Substance Misuse service in light of tendering process.	115	115	115	115
Creation of a Library Archives and Adult Learning mutual	811	1,526	1,526	1,526
Total	4,324	12,136	12,490	12,490

People - Savings from Public Health Grant	2016/17	2017/18	2018/19	2019/20
	£'000	£'000	£'000	£'000
Restructure of Public Health management and staffing posts	632	650	650	650
Review investment efficiencies in Public Health commissioning arrangements.	1,045	1,950	1,964	1,964
Total	1,677	2,600	2,614	2,614

Place	2016/17 £000	2017/18 £000	2018/19 £000	2019/20 £'000
Directorate efficiencies - Reviewing staffing requirements and income generation targets subsequent to service review	20	222	222	222
Deliver value for money services by ensuring that high priority green areas are effectively maintained while reducing / stopping maintenance of low priority areas and reducing maintenance of ornamental lawns. Encouraging greater participation by communities in maintenance of green areas as a means of achieving civic pride and community commitment. Seek sponsorship in order to carry out planting programmes. Withdrawing support for 'Green Flag' and 'in bloom' submissions with community / voluntary sector taking the lead in future.	166	265	265	265
Reviewing street cleansing operations in order to maximise the efficiency and effectiveness of the service by focussing activity in areas affected by litter	55	55	55	55
Closure of public conveniences based upon use and condition	0	25	25	25
Ensure that HRA contribution to General Fund services is appropriate by reviewing contribution towards development of cross tenure housing strategy policy and team and rationalise grant assistance to CAB while maintaining cross tenure housing advice service	39	64	64	64
Review of events programme and associated land and building assets in order to deliver self financing service by 2019	70	125	423	423
Review use of halls borough wide in order to achieve self financing status. Closure of Dudley Museum with collection transferred to alternative premises for permanent display. Review opening hours at Red House . Engage with Hotel provider regarding the potential for provision at Ward House in order to support events at Himley Hall	20	190	764	764
Review current operation of street lighting in order to maximise efficiency of repairs service and utilising dimming technology / turning off street lights in identified low risk areas in order to reduce energy costs	150	250	250	250

Place	2016/17 £000	2017/18 £000	2018/19 £000	2018/19 £000
Ensuring efficient highway maintenance service by streamlining pothole repair process and focussing carriageway re-surfacing on strategic highway network	135	155	445	445
Undertake review of current winter service provision in order to ensure key strategic routes are treated as required while ensuring best value is delivered in provision of the service. Number of gritting vehicles and provision of grit bins to be rationalised	20	75	125	125
Commence review of policies related to parking charges and exemptions culminating in a strategic review of parking services in order to ensure that parking provision and enforcement facilitates and encourages access to key retail / economic centres across the borough	35	45	295	295
Review criteria for provision of dog / litter bins and signage	20	20	20	20
Private Sector Housing - Home Improvement staffing efficiencies	280	280	280	280
Introduction of Road Safety Traded Service to charge for Road Safety and Cycling Proficiency schemes	0	30	30	30
Charging Academy Schools for School Crossing Patrols & review of deployment criteria.	0	20	40	40
Maximising efficiency in Bereavement Service. Review charging policy and implement a package of measures in order to maximise take up of the service while providing high quality bereavement services across the borough	256	466	712	712
Total	1,266	2,287	4,015	4,015

Resources and Transformation	2016/17	2017/18	2018/19	2019/20
	£'000	£'000	£'000	£,000
Financial Services – Savings will be delivered following a review of processes so the service focuses on strategic financial management and reduces non-core and transactional activity. Efficiencies will be delivered following the formation of Financial Services which now includes Revenues Exchequer Services and Procurement, Creditor Services and Contract Management.	130	190	190	190
Elections - reduction in running expenses	30	30	30	30
Democratic Services and Legal Admin - staff savings from process and service redesign.	101	101	101	101
Audit Services - staff savings through rationalisation of audit work in line with key risks.	0	32	32	32
ICT – reductions in staffing, software and hardware costs made possible by increased automation and self-service, stream-lining of processes, server virtualisation, use of open source software, reduced maintenance following investment in infrastructure and further consolidation including pursuit of shared service opportunities.	357	582	590	590
Reorganisation of the Health and Safety function.	123	123	123	123
Corporate & Customer Services - review of senior management structure and other staff roles/responsibilities within the Division	404	404	404	404
HR Services - Staffing savings together with some reduction in general service overheads following service review, to focus on strategic HR business partnering, and further reductions in non-core and transactional activities. Efficiencies will be delivered following implementation of a new HR/Payroll system alongside an increase in employee/manager self service.	69	274	379	379
HR Services - Increased scope for income from traded services across HR operation.	30	50	50	50
Corporate Landlord Services - New income will be generated from new design work arising from identifying and realising opportunities from the creation of a new estate strategy. £100,000 additional income will be generated from 17/18 by increasing traded service to schools.	75	175	175	175

Resources and Transformation	2016/17	2017/18	2018/19	2018/19
	£'000	£'000	£'000	£'000
Further to ongoing restructuring of Corporate Landlord Services it is possible to offer up an additional post from the Catering, Client and Caretaking team from Saltwells earlier than expected.	25	25	25	25
Savings will come from redefining and reducing the number of existing property roles in the new Corporate Landlord Service. Review caretakers roles including Priory Hall. Saltwells Education Development Centre to achieve 5% efficiency savings	363	375	375	375
Reduce opening times at Dudley Council Plus	40	40	40	40
Higher than anticipated recovery costs income, and proposed increase in Council Tax court summons costs by £5 per summons	75	75	75	75
Local Welfare Assistance - explore alternative delivery models, predominantly via Voluntary Sector	100	200	200	200
Communications and Public Affairs restructure of service	163	227	227	227
Review of events programme to deliver self financing service by 2019 – Communications and Public Affairs element	0	0	38	38
Reduce grant to Dudley Zoo	0	100	100	100
Restructure to remove the post of Strategic Director of Resources and Transformation and further rationalise and reduce the costs of management of central support services. Property Services will transfer to the Place Directorate and other central support services will report to the Chief Executive.	359	359	359	359
Total	2,444	3,362	3,513	3,513

People Services Scrutiny Committee 28th January 2016

Report of the Strategic Director People

Dudley Safeguard Adult Board Annual Report 2014 - 2015

Purpose of Report

1. To present to People Services Scrutiny Committee the Executive Summary of the Annual Report of the Dudley Safeguarding Adult Board for 2014-2015

Background

2. In 2000 the Department of Health issued the “No Secrets” guidance which gave local authorities the lead role in setting up multi-agency committees and to establish policy, procedures and guidance for work with vulnerable adults.
3. The Dudley Adult Protection Committee was established in 2004 and became the Vulnerable Adults Board in 2009. The Board includes senior representation of all key agencies – DMBC, the CCG, Dudley Group NHS FT, the Police, the Mental Health Trust, Probation and the Independent Sector.
4. The Board had three sub-groups Policy, Audit and training. The Board collects statistical information on the number of safeguard incidents reported in the borough of Dudley. In 2014-2015 the Board developed a further sub-group, a Safeguard Adult Review group, in preparation for the Care Act 2015 to hear any safeguard reviews required.
5. The Care Act 2014 was to be introduced in April 2015 so much work went on in the year to ensure the Board was Care Act compliant. The Care Act provided clarity on the responsibilities of a Safeguarding Board as well as making it a statutory responsibility for local authorities to have a Board and to prepare an Annual Report and a Business Plan.
6. The Care Act provides clarity in that it defines who the duty to safeguard applies to. This is defined as an adult who:
 - Has needs for care and support (irrespective of whether the council is meeting these needs) and;
 - Is experiencing, or is at risk of abuse or neglect and;
 - As a result of their care and support needs is not able to protect themselves from either the risk of, or the experience of abuse or neglect.

7. Throughout 2014/2015 the Board worked hard to implement their 2014/2015 Business Plan which focused around six key principles – empowerment, prevention, proportionality, protection, partnership and accountability. The Annual Report and the executive summary demonstrates the progress achieved in these priorities in 2014/2015.
8. In 2012 the West Midlands Safeguard procedures were implemented providing consistency across the region for the safeguard process during this year.

Finance

9. In accordance with our statutory responsibility the Council funds a Head of Service post and an administrator to support the work of the Board. Additionally funding has been sought and obtained from partner agencies during 2014/2015 to fund the work of the Board.

Law

10. In 2014-2015 the draft Care & Support Bill set out new statutory responsibilities for Adult Safeguarding. However, the main legislation governing adult safeguarding is contained in sections 21, 26 and 29 of the National Assistance Act 1948, the Community Care Act 1991 and the Mental Health Act 2005.

Equality Impact

11. The Safeguard and Protect Policy and Procedures are consistent with the Equal Opportunities Policy of the Council.

Recommendation

12. The People Services Scrutiny Committee is asked to consider and comment on the Adult Safeguard Board 2014/2015 prior to it being placed on the Safeguard website and distributed to partner agencies.



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Strategic Director People

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List of Background Papers

Executive summary of the Board 2014 – 2015

Dudley Safeguarding Adults Board **Annual Report 2014/15**



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Executive Summary

Each year the Dudley Safeguarding Adults Board publishes an Annual Report which reports and reflects upon the board's activities over the past year. This is the executive summary of the Annual Report for 2014/15

Dudley Safeguarding Adults Board works to protect adults aged eighteen and over from neglect, harm or abuse. The board is made up of representatives from Dudley Council's adult social care team, West Midlands Police, Dudley Clinical Commissioning Group (CCG), Dudley Acute Hospital Trust, Dudley Fire Service, Healthwatch Dudley, Dudley & Walsall Mental Health Trust, as well as voluntary sector organisations.

These partners work together in a joined up way to ensure that they are protecting adults from across Dudley borough, as effectively as possible.

Dudley Council is the lead agency on the board and is responsible for investigating and decision making in all safeguarding cases, where there are concerns about any abuse, neglect or harm of adults. It is a complex and sensitive area of work, requiring close partnership working to ensure that no one slips through the net and that all people are protected from harm - particularly vulnerable adults.

The board ensures that all agencies work together to protect adults from abuse and indeed from the risk of abuse. It monitors the number of safeguarding referrals and information about the safeguarding assessments.

The board also provides information to organisations and agencies on national safeguarding situations and experiences - to improve local practice. As well as working to promote awareness of adult safeguarding and abuse, to prevent it from happening and to ensure that people know how to report issues or concerns.

The Care Act 2015

Over the year 2014/15 an important piece of new legislation was about to be introduced which has made safeguarding a far more visible and high profile issue. The Care Act 2014 was introduced by the government in April 2015 and much work went on in the year prior to this by the Dudley Safeguarding Adults Board to ensure that the board and its partners were fully Care Act compliant.

The Care Act provides clarity on the responsibilities of a Safeguarding Board, as well as making it a statutory requirement. It also defines exactly who the duty to safeguard applies to. This is defined in the Act as an adult who:

- Has needs for care and support (irrespective of whether the council is meeting these needs) and,
- Is experiencing, or is at risk of abuse or neglect and,
- As a result of their care and support needs is not able to protect themselves from either the risk of, or the experience of abuse or neglect.

Abuse as defined in The Care Act can include:

- Physical abuse
- Emotional/psychological abuse
- Domestic violence
- Sexual abuse
- Financial abuse
- Modern slavery
- Discriminatory abuse
- Organisational abuse
- Neglect and acts of omission
- Self neglect

The Safeguard 'threshold'

- In 2014 a new pathway for safeguard referrals was introduced which incorporated a 'safeguard threshold'. This means that there is now a formal agreed criteria for whether or not a reported issue or concern needs to be investigated any further. This decision is made by a senior social worker. If an issue does meet the new threshold then it follows a new 'pathway' which fully involves the victim and/or their carer - if they have one.
- The council's adult social care team also during 2014, developed a team specifically to support people who are 'at risk.' This is in recognition that not everyone meets the safeguard threshold but still requires support to live a life free from abuse and neglect.

Key focuses 2014/15

Throughout the year the board worked hard to implement their 2014/15 business plan which focused around six key principles - empowerment, prevention, proportionality, protection, partnership, accountability. Each of these six areas has been the key areas which have been focused upon.

Empowerment

The board have worked hard to ensure that victims of abuse and carers are providing information on what they want to achieve from their own safeguarding investigations. They are providing information on their own experiences and this is being taken on board. The board signed up to the 'Making Safeguard Personal' project which aims to ensure that views of victims are captured throughout safeguarding episodes.

The role of advocates is also being promoted to make sure that people are being supported throughout the safeguarding process. Advocacy services are now asked to help at a much earlier stage in the safeguard process and are now fully involved in the decision making process.

Work has also gone on to promote the issue of adult safeguarding and to ensure that people are clear as to what abuse is and how to report it. A new safeguarding website was launched in April 2014. This contains lots of information on both adults and children's safeguarding, along with a 'Report it' button. Throughout 2014 1050 alerts were received via the website.

Protection

The board has worked hard to make sure that Mental Capacity, Best interest and the Deprivation of Liberty are central to the safeguarding process.

A Supreme Court Judgement in March 2014 had a big impact on the number of people in hospitals and care homes who may be deprived of their liberty in their best interests and need a 'Deprivation of Liberty' order. The board has held meetings with care homes who have reviewed their care plans of residents to make sure they are using the least restrictive practices and have requested Deprivation of Liberty Safeguard orders for people who they felt met the new criteria.

Mental Capacity Act training has been delivered to two hundred members of staff and an action plan to raise the awareness of 'Best Interest' has been formulated.

The board has been identifying repeat safeguarding concerns and emergency themes from safeguarding issues in line with the Winterbourne View recommendations (Winterbourne View was a private hospital where people with learning disabilities were widely physically and psychologically abused by staff up to 2011. A serious case review took place as a result and was published by the Department of Health which cited many recommendations to avoid any repeats of this type of abuse in any organisation).

Prevention

The focus here through 2014/15 has been on the promotion of safeguard training to a much broader audience, to raise awareness on how abuse can be prevented. Along with these efforts has been work to promote safer recruitment of people in 'positions of trust'. The board has been keen to learn lessons from case studies and nationwide serious case reviews.

A whole range of tailored safeguarding awareness training courses have been provided over the past year to all sorts of groups and organisations across Dudley borough. The board was even asked to provide training to a local building society and to the Diocese of Worcester.

Three multi-agency practice learning events were held in 2014 where serious case reviews were considered and assessed. These were learned from and communicated through each agency.

Proportionality

Threshold training was provided to operational staff to make sure that there is an understanding of what actually constitutes a safeguarding issue. This will mean that people will be confident about reporting a safeguard issue and will eliminate unnecessary reporting.

It was also agreed that all of the board partners will immediately contribute staff and information to assist a safeguarding investigation. This will then be able to be conducted in a timely and proportionate manner.

Methods of restraint have also been identified and recorded to protect adults at risk and shared with local services and organisations. A Department of Health report called 'Positive and safe' was produced in response to the Winterbourne review where the incorrect use of restrictive practices was identified. Research showed that organisations are often unsure about the correct use of restrictive practices, with some services relying too heavily on the use of restraint. Guidelines have been produced for services which were shared with all borough wide organisations.

Partnerships

To meet the now statutory requirements of The Care Act the board consolidated its footing amongst partners.

The board also extended its wider partnership working with children's services, community safety, health and wellbeing services, health workers and councillors.

Board members were also asked over the period to commit additional financial and manpower resources to the board itself. This is to support the increased efforts in training, promotion and prevention work that the board has committed to deliver.

It is recognised that the financial pressures facing Dudley Council will impact considerably on the availability of resources and manpower and the board members have been regularly advised about this throughout the year especially when it has impacted upon the ability to deal with safeguard concerns within the borough.

Accountability

The board has asked for real assurances from all organisations across Dudley borough to recognise their responsibilities for safeguarding - as now laid down in the new Care Act. This has meant sometimes scrutinising incidents which have occurred in partner's settings.

The board also established a serious adult review panel which has begun to collect information and performance data to analyse information relating to specific serious incidents. Learning is shared and lessons are learned to ensure that people subject to abuse receive timely support from organisations.

Further training has been identified to meet competence levels required to properly and fully address safeguard concerns.

Performance Data

A full breakdown of safeguarding incidents can be found in the complete annual report.

- In summary, 1,713 adult safeguarding incidents were reported between 1 April 2014 and 31 March 2015. Of these 726 (42.4%) were carried forward through the safeguarding process as referrals.
- The majority of these were for females (59.8%), the majority being in the 85 plus age group (35.7%).
- The majority of these incidents took place in the victims own home (46.1%).
- The abuse category neglect and acts of omission was recorded as the highest proportion of all incidents at 29.5%. If all neglect categories are combined this increases to 43.7%.
- The number of completed referrals (where all investigations have been completed and an outcome agreed) was 567. The majority of these were either fully or partially substantiated.

Message from our independent Chair

Welcome to Dudley Safeguarding Adult Board's annual report for 2014/15.

A major piece of legislation, The Care Act 2014, now provides clarity on the responsibilities of a safeguarding board and determines precisely how we undertake our safeguarding duties. It is important that anyone reading this report is aware of how The Care Act has now defined what we must achieve and how we must achieve it.

The duty to safeguard applies to an adult who:

- has needs for care and support (whether or not the local authority is meeting any of those needs) and
- is experiencing, or at risk of, abuse or neglect and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse or neglect

Abuse can include

- Physical Abuse
- Emotional /Psychological Abuse
- Domestic Violence
- Sexual Abuse
- Financial Abuse
- Modern Slavery
- Discriminatory Abuse
- Organisational Abuse
- Neglects and Acts of Omission
- Self-Neglect

How we deliver safeguarding services is of the utmost importance. Here across Dudley Borough we strive to ensure that all agencies engage with the person in need of safeguarding in a way that he or she is able to be involved and they can then exercise choice and control. By making safeguarding personal we actually listen to what people want and actually do what they ask. This way of working is the right thing to do but it must be recognised that it can also give rise to challenges when unwise decisions, particularly with regard to self-neglect can leave people vulnerable.

The Care Act also gives Safeguarding Boards a legislative footing for the first time, a most welcome development. There are requirements in respect of membership and role. It pleases me to report that Dudley's Safeguarding Board meets the requirements of the Act and has done so for several years.



The attendance and contribution of constituent agencies has improved even more during the past year. Partners both support each other and hold each other to account in respect of safeguarding practice. One such example of holding to account was when the board sought assurance from Russell's Hall Hospital about allegations of unlawful restraint made in the national media. The resultant report, which in the event found no evidence of such practice, was published in September 2014 and can be found on our website.

The Care Act sets out three core duties for a Safeguarding Board. The first two relate to the publishing of a strategic plan and annual report. The third states that we must conduct a Safeguarding Adult Review (SAR) when

- An adult dies as a result of abuse or neglect, whether known or suspected and there is concern that partner agencies could have worked more effectively to protect the adult.
- An adult has not died but serious abuse or neglect is known or suspected.

The purpose of such reviews is to promote effective learning and improvement activity to prevent future deaths or serious harm occurring again. To ensure that Dudley would be in the best position to discharge its responsibilities to undertake SARs when necessary, we developed a SAR sub group of the board.

Dudley Safeguarding Adults Board is not alone in working to keep adults safe and well. The Health and Wellbeing Board and Safe and Sound, Dudley's Community Safety Partnership both play vitally important roles in promoting health and reducing the risk of harm. Likewise the Safeguarding Children Board has a mutual agenda particularly in respect of issues affecting those making the transition from childhood to adulthood. Domestic abuse, substance misuse, mental health, sexual exploitation and radicalisation all need to be managed in a cohesive and integrated way. It is important that each board works closely and constructively with each other to achieve the best for those people in Dudley who require our support.

During the year, Andrea Pope Smith retired from her post as Director of Adult, Community and Housing Services in Dudley. Her contribution to safeguarding and the safeguarding board in Dudley were first class. Likewise Beryl Nock, who represented Age UK on the board, stood down during the year. She too was a valuable contributor. I wish them both all the best for the future.

Dudley Council has made a number of key appointments over the last year and now has a new Chief Executive, a new Director of People and a new Chief Officer Adult Social Care. Sarah Norman, Tony Oakman and Matt Bowsher will collectively and individually be a huge influence on safeguarding in Dudley. I wish them every success.

Looking to the future, there are undoubtedly going to be unprecedented challenges in delivering safeguarding services. Ever increased demand at a time of public sector funding cuts and resource reductions will necessitate new and innovative ways of working. It will be the responsibility of Dudley Safeguarding Adults Board to both promote more effective partnership working and challenge individual agencies when necessary. My role as Chair of the Board is to independently ensure this is robustly undertaken.



Roger Clayton Independent Chair Dudley Safeguarding Adults Board October 2014

About Dudley Safeguarding Adults Board

The board

The Safeguarding Board works to protect adults who may be being neglected, harmed or abused, or are at risk from these things.

The board is well established with wide senior representation from Dudley Council, West Midlands Police, Dudley Clinical Commissioning Group, Dudley Acute Hospital Trust, Dudley Fire Service, Dudley Probation Service, Healthwatch Dudley, Dudley & Walsall Mental Health Trust, the Black Country Partnership Trust, voluntary sector agencies and providers.

Safeguarding needs to operate on a number of levels across a range of organisations to be effective - it is recognised that safeguarding has to be everyone's business.

Who is an adult at risk?

The Care Act 2014 describes an adult at risk as someone who:

- Has needs for care and support (whether or not the local authority is meeting any of those needs)
- Is experiencing or is at risk of abuse or neglect and;
- As a result of those needs is unable to protect him or herself against the abuse or neglect or the risk of it. This definition is now adopted by partners of Dudley Adult Safeguard Board.

The board works to protect people in a variety of ways

- It develops policies and procedures so that organisations work together to protect adults at risk and prevent abuse.
- It monitors how abuse is dealt with and works to improve how this is achieved.
- It provides information to agencies on national situations to improve local practice
- It seeks to promote awareness of abuse to prevent it from occurring.

How to report a concern that someone is or may be being abused

We continue to work hard to make sure that everyone within Dudley borough is aware of our reporting procedure.

The Department of Health "No Secrets" document states "there can be no secrets and no hiding place when it comes to exposing the abuse of adults at risk".

We continue to have a central contact number where anyone (member of the public or professional agency) can report any concerns they may have. This number is the councils Access Team (0300 555 0055). Alternatively there is a safeguarding website: www.safeguarding.dudley.gov.uk which provides information on how we work to protect adults, along with an online reporting tool.



The safeguarding process

When a call is made to the Access Team regarding a safeguarding concern, the information is collated and a senior social worker and manager agree whether it meets the 'safeguard threshold'.

In 2014 a new pathway for safeguard referrals was introduced with the aim that the most appropriate team dealt with the issues. The referrals that meet the threshold are passed to the appropriate teams.

A strategy meeting or discussion takes place and a qualified social worker or other professional best placed 'to deal with the issue' will investigate and produce a report for a case conference.

This ensures that any abuse is reported to all agencies involved in the situation.

A plan to protect the person concerned will then be developed with all actions planned to assist with this being documented. The victim and/or their carers are always invited to the case conferences to receive this information.

In 2014 the Council's adult social care division developed a team specifically to support people who are "at risk" recognising that not everyone meets the criteria for specific service thresholds but requires support to live a life free from abuse and neglect.

The safeguarding team within the council is made up of one team manager, two assistant team managers, minute takers and a board administrator. The managers receive the cases which meet the safeguard threshold and ensure that the appropriate teams then receive them. They subsequently chair some of the safeguarding meetings, provide support to staff and work with colleagues to ensure that protection plans are established and actioned. They contribute significantly to the operational partnerships that are reflected strategically within the board, alongside other team managers and administrative staff within other adult care teams who also carry out this safeguarding process.

The safeguard board has been advised when the pressure of the numbers of people referred has meant there has been a delay in dealing with the issues presented.



The National Context

The Department of Health published a "statement of government policy" on Adult Safeguarding in May 2013.

This document set out six safeguard adult principles for boards to consider:

- **Empowerment**
- **Prevention**
- **Proportionality**
- **Protection**
- **Partnership**
- **Accountability**

Dudley decided to use these principles as the focus for their 2014/15 business plan.

The Care Act 2014

In 2014 the board focused on ensuring that it was ready for The Care Act implementation which came into effect in April 2015.

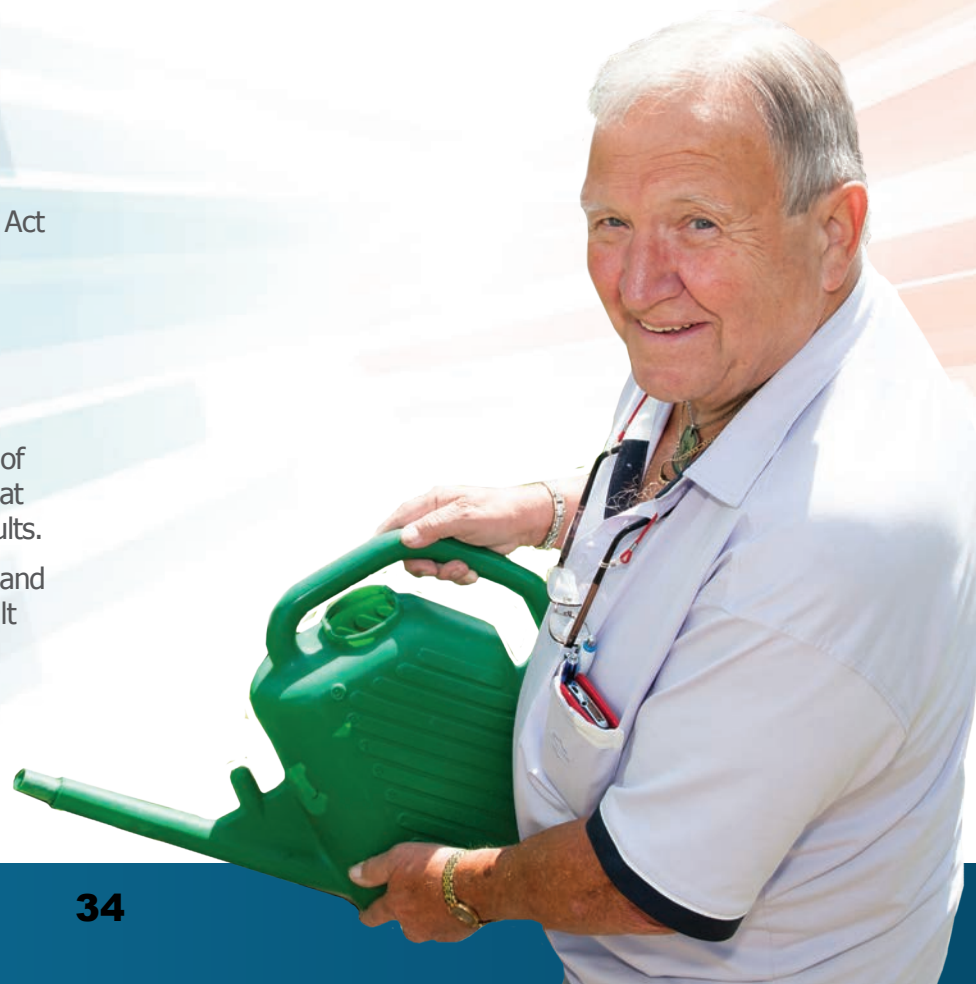
The main changes included:

- Adult Safeguard Board becoming statutory
- The development of a Safeguarding Adult Review (SAR) panel to hear cases where an adult with care and support needs had died in its area of abuse or neglect, whether known or suspected and there is concern that partner agencies could have worked more effectively to protect the adults.
- Adults Safeguard Boards will be expected to produce an annual report and a business plan. Within Dudley all these elements were part of the Adult Safeguard Board but the Care Act consolidated the practices in place.

Deprivation of Liberty Safeguarding (DoLs)

In 2014 two events significantly affected the Deprivation of Liberty process. The House of Lords Post Legislative Scrutiny Committee on the Mental Capacity Act 2005 published a report which concluded that the DoLs were not "fit for purpose". A few days later a Supreme Court judgement (known as Cheshire West) overturned the definition of the meaning of what it is to be deprived of ones liberty, by broadening the scope. This has led to a sharp increase in DoLs cases and in 2014 local authorities struggled to cope with the numbers required. This has led to a review of the Deprivation of Liberties in 2015.

Each local authority safeguard board had oversight of these issues and local authorities had to provide additional resources to this statutory process.



How we make a difference

Our business plan for 2014, as indicated earlier focuses its work plan around government policy on safeguarding which is based around six principles.

1. Empowerment

What did we say we would do?

- Ask victims of abuse or their carers to provide information on the outcomes they want from safeguarding and feed back their experiences.
- Promote the role of advocates to ensure people are supported throughout the safeguard process.
- Ensure that vulnerable adults are clear about exactly what abuse is and how to report it.

What did we do?

- In June 2014 Dudley & Walsall Mental Health Trust, Healthwatch Dudley, Black Country Partnership and Dudley Clinical Commissioning Group collectively, on behalf of the board, committed to participate in a national survey to interview victims of abuse. This project demonstrated issues about the mental capacity of victims to participate and the importance of the timeliness of asking victims about the process. This information has contributed to the 'Making Safeguard Personal' project. This aims to ensure that wherever possible the views and desired outcomes of the victim of abuse are captured and recorded throughout the safeguard episode to ensure a more personalised approach. Dudley signed up to this project in September 2014 and started work under the policy and implementation sub group of the board to capture this information electronically at various stages of the safeguard process to ensure that it is fully person centred



- The community safety team extended its annual consultation event to include organisations that support vulnerable adults and identified priorities that were important to those groups such as hate crime.
- Partnerships with children services continue to identify processes within domestic abuse to identify and support vulnerable adults and provide training for practitioners to ensure that victim's outcomes are considered within the support process.
- The board received a report from Dudley Advocacy Services concerning the referrals received in relation to adult safeguarding. One hundred and ten cases were referred in advocacy of which fifty-one represented either safeguarding or deprivation of liberty issues from March 14 to April 15. Advocacy services indicated that they are asked to contribute at a much earlier stage in the safeguard process in comparison to previous years and are involved more fully in the decision making process.
- Advocacy services worked closely with Dudley Group NHS Foundation Trust to ensure that patients receive appropriate support in expressing safeguard concerns and other issues within the hospital setting. The benefits of this are huge, people feel empowered throughout the safeguarding process and become involved at a much earlier stage.
- April 2014 saw a new safeguarding website launched. This was a fully integrated website covering both adults and childrens' safeguarding. This followed a three month consultation with children, adults and a number of agencies. The consultation asked these groups what information they would find useful on the website. The request for simple explanations including links on abuse, physical, emotional, sexual and neglect were provided with links to other websites and resources.

The consultation asked groups how they prefer to access the information and report a concern, 85% of those who completed a survey said they would use the 'Report It' option which continued to be used from the previous website. The number of "Report It" alerts made is monitored monthly and changes have been made in the year to enable people to save their documents. This was requested in the comments made via the website. Each month comments are recorded and noted to ensure the service remains efficient. From April - December 2014, 1050 alerts were received via the website.

Case Study

Advocacy services became involved in a case in which a lady with a learning disability still received financial support for care and support services from the local authority where she had previously lived. This local authority wished to move her back to receiving their care and support services. The lady was not happy with this. Advocacy Independent Mental Capacity Act advocacy service fully supported her and a capacity assessment was undertaken where it was clearly agreed that the lady had capacity to make the decision. Her care and support service provision remained in Dudley borough, as she wished.



Challenges for 2015-16

- To monitor 'Making Safeguard Personal' outcomes introduced in April 2015 to ensure that we are listening to the victims voice and developing support which is relevant to the desired needs
- To ensure that transition arrangements between children and adult services and other partners is well evidenced and empowers the young person and their carer by hearing and listening to what they have to say.

2. Protection

What did we say we would do?

- Demonstrate that Mental Capacity, Best Interest and the Deprivation of Liberty are central to the safeguarding process.
- Ensure agencies are applying the safeguarding procedures within their workforce.
- Identify repeat safeguarding concerns and emergency themes from safeguarding issues in line with the Winterbourne recommendations.

What did we do?

- The Supreme Court Judgement in March 2014 had a significant impact on the number of people in hospitals, residential and nursing homes who may be deprived of their liberty in their best interests and require a Deprivation of Liberty order. The board was advised of these changes so that agencies were made aware of this, and several meetings were held with residential and nursing home managers in 2014 organised by West Midlands Care Association. These homes responded by reviewing the care plans of residents, ensuring that the least restrictive care was put in place, and requesting Deprivation of Liberty Safeguard orders for those who they felt met the new criteria.
- In October and November 2014 Dudley Council's adult social care staff delivered threshold training to operational staff and their managers, which reiterated the issues about mental capacity and how it impacted upon safeguard decision making.
- Black Country Partnership Foundation Trust delivered Mental Capacity Act training for two hundred staff between September 2014 and January 2015. The Trust also developed an action plan for its organisation to raise awareness of 'best interest decision making' to ensure their documentation reflected mental capacity assessments.
- Dudley Group Foundation Trust appointed a lead nurse for learning disability to support patients, and to ensure mental capacity and best interest decisions were reflected in their practice.

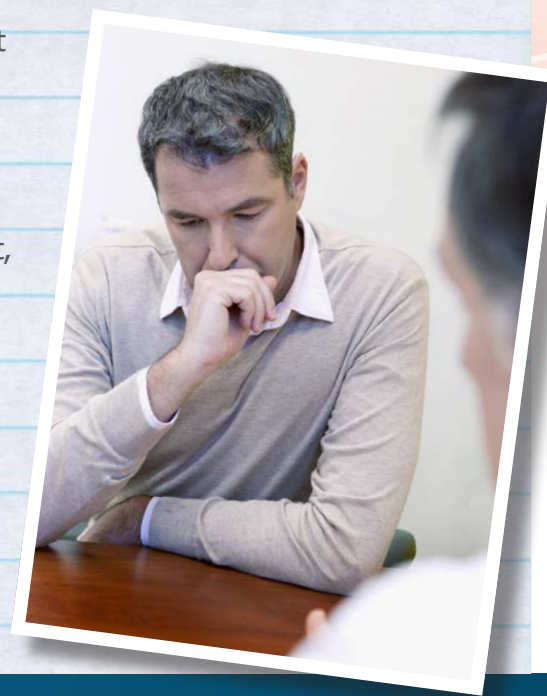
- Dudley & Walsall Mental Health Trust undertook internal audits to ensure their documentation recorded that staff had carried out Mental Capacity Act assessments and Best Interest assessments, both within the community and in hospital settings. Hospital settings also record a Deprivation of Liberty Safeguards (DOLS) checklist as part of inpatient documentation within the Trust.
- The police vulnerable adults website gives frontline staff access to a knowledge base involving the safeguarding of adults particularly where the person lacks capacity.

Case Study

A 57 year old gentleman with known severe learning disabilities had repeated admissions into hospital due to a long-standing bowel condition.

He became very distressed at each admission. The learning disability nurse liaised with surgeons and co-ordinated a best interest meeting as the man lacked capacity to make decisions about his treatment, but clearly indicated his distress about his health and his frequent hospital stays.

The meeting agreed that a good alternative was community based treatment and the gentleman returned home with support and an ongoing treatment plan



- In 2014 the Department of Health published guidelines alongside the six principles, upon which the business plan was based to help them to develop and assess the effectiveness of their own safeguard arrangements.

The Independent Chair of the Board felt that Dudley Safeguarding Adults Board should prepare for The Care Act 2014 implementation and use a toolkit to offer assurance to the board based on these guidelines. Eight board agencies were asked to complete this process:

West Midlands Police

Dudley Council childrens services

Dudley Council adult social care

Dudley Clinical Commissioning Group

Dudley Group of Hospitals Foundation Trust

Black Country Partnership Foundation Trust

Dudley Council community safety

Dudley & Walsall Mental Health Trust

All agencies completed this task and a programme of peer audit was arranged for June 2015.

- To monitor repeat safeguard concerns Dudley Council produced monthly records of commissioned services where safeguard cases had occurred and collated that information with previous months. Dudley Clinical Commissioning Group also developed a similar approach within their healthcare forum.
- This information was shared at bi-monthly multi-agency meetings alongside any other concerns from other agencies. In 2014 several domiciliary and residential care providers were subject to ongoing complex multi-agency safeguard meetings, where the service as a whole was scrutinised. Improvement plans were developed around issues such as supervision of staff; improvements in care plan recording; and training programmes. These plans were monitored over several months until evidence of consistent improvement was noted.
- 2014 saw a task and finish multi-agency group work on the principle of restraint, identifying good practice developing nationally since Winterbourne view recommendations. This document will be reported to the board in 2015.



Challenges for 2015-2016

- The partner agency assurance process shared in 2015 will promote the development of multi agency audits to confirm the assurances given to the Safeguarding Board.
- Repeat concerns will continue to be monitored and information shared robustly with the Care Quality Commission and partner agencies in 2015
- Sharing of practice which recognises issues of mental capacity that protects and empowers vulnerable adults to live the life they choose, or would have chosen, will be monitored. The role of advocacy services consolidated within this process will also be monitored as indicated in the business plan for 2014-2015.
- The financial pressures upon the Council and impact of the number of referrals received means that the biggest challenge is to ensure that services adapt to this and look for support to protect the vulnerable adult



3. Prevention

What did we say we would do?

- Promote broader uptake of safeguard training to raise awareness of how abuse can be prevented.
- Promote safe recruitment in the workforce and procedures that deal with people in positions of trust.
- Learn lessons from case studies and national serious case reviews

What did we do?

- A raft of training courses and sessions has been delivered over the past year, to raise the broad awareness of adult abuse and of the role that safeguarding plays. These have included:
Dudley Council's adult social care teams delivering bespoke training packages to Healthwatch Dudley, tenants and residents associations, Glasshouse College staff, Pocklington Trust volunteers and Woodside Day Centre.
Bespoke 'Keepsafe' sessions presented to Dudley Asian Elders Group and Parkinson's societies.
'Who is after your money' training delivered by trading standards to tenants and residents associations, as well as a local building society
Safeguard training given to Diocese of Worcester Church of England establishments across Dudley borough
Further promotion of E-learning safeguarding training. Take up has been pleasing particularly across the council's access and prevention teams.
The level of training delivered illustrates our borough wide commitment to safeguarding. It was greatly encouraging that a local building society and the Diocese of Worcester approached us for support in safeguarding awareness and developed further the prevention agenda complimented upon by the peer reviewers in 2014.
The support and learning sub-group of the board met throughout the year and managed the training strategy for the board ensuring that partner agencies were able to work together to achieve the desired outcomes.

The Safeguard Consultant has contributed hugely to the consistent and professional multi-agency training provided, alongside dedicated colleagues from Black Country Partnership Foundation Trust and Trading Standards.

Sound bite:

"This was one of the best courses I have attended. It was extremely well delivered and the facts and figures about financial abuse really made me think. I will be much more aware from now on and will cascade the information to my clients and colleagues."
Regarding "who's after your money" course

- Dudley Council updated its safeguarding leaflet to ensure it is Care Act compliant and continued to promote the need to prevent abuse by defining who is an adult at risk, what is safeguarding and types of abuse.
- Dudley & Walsall Mental Health Trust implemented a competency framework that clearly outlines roles and responsibilities and expected knowledge. Other agencies were issued with this document in 2014 to develop their training model for safeguarding.
- Dudley Clinical Commissioning Group (CCG) continued to develop its training programme for G.P. practices throughout the borough to raise awareness of the wider safeguard issues. Monthly safeguarding news and practice have been developed by the CCG in 2014 to disseminate safeguard issues, information and publications to practitioners to keep them updated about recent safeguard developments.
- The Children's Safeguard Board continued to develop multi-agency training. Domestic abuse awareness, child sexual exploitations, forced marriage and honour based violence courses providing updates for staff and helping staff recognise signs of abuse and support for victims.
- In 2014 Dudley Group NHS Foundation Trust revisited its training protocol after board scrutiny of particular cases and monitored its staff training throughout the year. It delivered an E-learning programme for its staff, a safeguarding adult's forum and joined the council in its practice learning events. It concentrated on Mental Capacity Act training to ensure staff were reminded of their responsibilities and became a "champion" in delivering appropriate support to people who have a learning disability and are admitted to hospital.

Safer Recruitment

- The board received an update to refresh its safe recruitment practice amongst its partners in 2014. This included information about volunteers which agencies considered in their assurance work, a more rigorous relevancy test for disclosure of information by the Police and information about the Disclosure and Barring (DBS) update service.
- West Midlands Care Association improved the DBS service to commissioned services in 2014 by receiving approval from the Home Office to receive DBS checks electronically. This improved both the standard of information on referrals and the timescales services had to wait for clearance regarding staff appointments.
- Board partners had to review their agencies safe recruitment practice as part of their responsibility for the assurance work required in 2015. This work extended to checks on volunteers and contractors used by services.
- Position of Trust concerns were also monitored in this assurance framework process. The council's adult social care division took lead responsibility to co-ordinate multi-agency meetings regarding people who were alleged to have abused their position of trust and monitored that the appropriate action was taken and referrals to DBS scheme made as required. They also met with regional leads to consider a position of trust document for the West Midlands which was to be produced after the Care Act implementation in 2015

Learned lessons from National Serious Case Reviews

- The Council's adult social care division held three multi-agency practice learning events in 2014. Eighty-nine staff from various agencies represented on the board attended the training. Three serious case reviews were considered which included:

A young woman from Warwickshire who was killed in August 2010. The five people charged with murder/manslaughter she had considered as her "friends". The event looked at transition arrangements within Dudley when people reach eighteen looked at the recording of mental capacity and risk assessments and the resources we have across Dudley borough to address 'mate crime'.

A 40 year old woman from Nottinghamshire with physical disabilities who had mental capacity to make decisions regarding her treatment and care but sadly died from a massive sepsis leading to multiple organ failure. This case explored how as professionals we need to question a 'climate of optimism' and how capacity for specific decisions is considered and recorded.

The board received copies of the serious case reviews to share within their agencies.



Challenges for 2015 -2016

- 2014 has seen the start of engagement with wider groups. The Care Act brought new definitions of what constitutes safeguarding into the public arena, such as self neglect and domestic violence. 2015 sees the challenge to continue to provide safeguard information to hard to reach groups.
- To ensure that communication of new elements of The Care Act, such as self neglect; domestic violence, advocacy and mental capacity are embedded in training and within partner agency responses to safeguard matters.
- A challenge for 2015 remains the increase in the number of alerts made to the safeguarding teams which has clear implications for people's safety and wellbeing. As public awareness of safeguarding increases so does the number of referrals and alerts. Waiting lists, response times and the application of the safeguard threshold are key challenges and the board must work hard to manage demand effectively and provide an efficient and responsive service at all times.

4. Proportionality

What did we say we would do?

- Provide threshold training for operational staff and decision makers to ensure a consistent response to dealing with safeguard alerts; so that individuals will be confident that professionals will work for their best interests and will only get involved as much as is needed. This challenge arose out of the Peer Review Action Plan in 2013 -14 where it was queried whether too many cases were being considered under safeguarding resulting in no evidence to proceed. The training has improved the proportion of cases that don't progress through the safeguarding process. Between October and December 2014 51.6% of cases weren't progressed and between January and March 2015 this has risen to 56.5%.
- Partners will contribute personnel and information to assist a safeguard investigation which will be conducted in a timely, proportionate manner.
- Local services to identify and record methods of restraint used to protect adults at risk.

What did we do?

- To understand the issues around applying the threshold training a task and finish group met in 2014 to consider threshold application and plan training. The information from this group was then considered by the policy and implementation sub group and the training planned.
- Training was delivered to council managers and senior social workers who have responsibility, as the lead agency in safeguarding, to make threshold decisions. These courses were organised in October and November 2014 and fifty staff were trained. The outcomes for this training will be reflected in 2015 where it will be considered whether more situations are signposted elsewhere outside of safeguarding to ensure a proportionate response to issues as appropriate.

- In preparation for The Care Act, multi agency training was given at the board to consider the requirements; one being the need for other agencies to lead on safeguard investigations. Already evidence suggests that this is strong within the partnership in Dudley and ensures that the response is proportionate and the agency best placed to investigate does so. Examples include:

Dudley Group Foundation Trust regularly investigate incidents that have allegedly occurred within its wards and report back to safeguard managers.

Dudley Clinical Commissioning Group reports back to safeguard managers about pressure sore care, medicine management

Dudley & Walsall Mental Health Trust undertake all their investigations and report back any concerns to the Head of Adult Safeguarding or Care Quality Commission liaison meeting as appropriate.



- Dudley Council's commissioning service, contributes regularly to the monitoring of commissioned services, monitor staffing levels, training opportunities and safer recruitment to contribute to safeguard investigations.
- It is recognised that The Care Act places this partnership on a legal footing and it is anticipated that the partnerships will be strengthened through this legislation; despite the financial and staff resource implications this will bring.

Case Study

A lady was admitted to a hospital emergency department; from there a safeguarding alert was made to the police and the council. The lady was then admitted to a mental health hospital.

A strategy discussion subsequently took place between the manager of the hospital ward, the police and the council adult and childrens services head. All agreed that the police would complete the criminal investigation enquiries; a referral to advocacy was made, a referral to mental health services to allocate domestic abuse worker and the police agreed to jointly interview the lady, taking into account her mental health and capacity.

A domestic abuse risk assessment was also completed. In addition a refuge placement was found for the lady, at her request and her GP informed. Subsequently a police prosecution made.



- As indicated earlier the safeguard board commissioned a task and finish group in 2014 which looked at the Department of Health guidance on a two year initiative entitled "Positive and Safe". This was in response to the Winterbourne review where the misuse of restrictive practices was identified. A subsequent Care Quality Commission inspection of nearly 150 learning disability in-patient services found providers were often uncertain about the use of restrictive interventions with some services have an over-reliance on the use of restraint.

The paper developed provides guidelines for services to promote positive behaviour support and puts in place a process to inform service commissioning about any restrictive interventions used. This work will be completed in 2015 and presented to the board and commissioned services will be informed about its implementation. This will continue to strengthen the learning from Winterbourne and demonstrate proportionality in response to safeguard concerns within the workforce.



Challenges for 2015/2016

- Each agency is to adopt 'making safeguard personal' to ensure that when leading on an investigation it is person centred and considers the outcomes the victim has expressed and is a proportionate response.
- Staff resources across all agencies will continue to pose a risk to the multi-agency partnership and the ability to investigate safeguard concerns.

5. Partnerships

What did we said we would do?

- Meet the statutory requirements outlined in The Care Act. The board will consolidate its constitution, memorandum of understanding and information sharing protocol with its partners.
- Board members to ensure that the wider partnership with children services, community safety, health and wellbeing, health workers and councillors remains priority for its members.
- Agencies will consider their financial contributions to support the work of the board in its training, promotion and preventative work.

What did we do?

- The board considered a constitution, memorandum of understanding and information sharing protocol which was developed in 2014 in preparation for The Care Act.
- These documents will be considered in 2015 and a register kept for board partners.
- Partnership with children services was extended in 2014 with a joint protocol developed with community safety for the Health and Well-being Board.
- Work with Multi-Agency Risk Assessment Conference (MARAC) was extended and adult safeguarding team managers attended fortnightly meetings to ensure victims of domestic abuse were protected in a multi-agency setting together with children and mental health services and other partners from the West Midlands Probation Service and the police.
- The children and adult safeguarding trainers met to ensure that both sets of safeguard procedures are highlighted at training by both adults and childrens services training officers.
- Work with adult social care, children services, community safety police and probation services continued throughout 2014 in relation to substance misuse safeguarding; domestic abuse strategy and the Police Crime Commission Board. All meetings sought to inform partner agencies about development within the borough to protect vulnerable adults and progress within services provided to achieve this.

- West Midlands Fire Service has engaged with board partners to identify risks of fires and how to refer to the fire service for safety checks. In 2014/15 over 2200 home safety checks were undertaken and the vulnerable persons officers within the fire service have worked with people who hoard and people who have physical disabilities to minimize the risk of fires within their homes. They have also supported people with dementia to live safely within their homes.
- In 2014 Dudley Clinical Commissioning Group established a health safeguarding forum which had a responsibility to ensure that the voice of the adult at risk is considered by all health organisations in Dudley and to provide a mechanism for the dissemination of best practice across the health economy.
- The police continued to work with partners in cases which involved people in positions of trust and led two safeguard adult review investigations in 2014 updating partners to their progress throughout.
- Black Country Partnership Foundation Trust and the council's adult social care training team revised a multi-agency training course regarding safeguard practice to ensure it was Care Act compliant. This course was delivered throughout the year to staff working within the borough in commissioned services.



- The policy and implementation sub-group of the safeguard board - a partnership made up of trading standards, housing services, community safety, Black Country Housing, Dudley & Walsall Mental Health Trust and Dudley Clinical Commissioning Group met throughout the year to look at the policies being developed in the West Midlands in preparation for The Care Act. It agreed action for the threshold training; Care Act procedures; Making Safeguard Personal and the need to review information to the board about self-neglect and safeguarding. This partnership provides direction and support to the board and undertakes operational planning for the wider workforces.
- The quality and performance sub-group is another effective board partnership with representation from adult social care, Dudley Clinical Commissioning Group, Dudley Group Foundation Trust and Dudley & Walsall Mental Health Trust. The group monitored and revised the alert form making adjustments as a result of the on-line survey and comments from partners. It was also made aware of the cases to be presented at the Practice Learning Event and the lessons to be explored. In addition it considered the impact of the Supreme Court Judgement in DOLS and what advice residential homes, nursing homes and hospitals were given about restrictive practice. The group also considered the need for a safeguard audit which was multi-agency and started to plan its delivery after the assurance framework had been completed in 2015.
- Housing services extended their safeguard network to include many of the housing associations which have housing stock across Dudley borough. This covered an additional four to five thousand homes across the borough. They now receive updates from the board and other training/awareness-raising activities.
The Social Care Institute for excellence referenced Dudley Council's housing services in a national publication complimenting the service on their safeguarding work
- Dudley Group of Hospitals Foundation Trust consolidates the work of the "unborn network" with Children Safeguarding and Dudley & Walsall Mental Health Trust ensuring that both the adult and child are considered in any actions planned.

- Healthwatch Dudley, as an active member of the safeguard board, contributed to the planning of a safeguarding survey held in June 2014 to listen to the victim's voice. Healthwatch also supported the implementation of 'making safeguard personal' and encouraged the members to listen to the voice of Dudley residents in shaping the work of the board. They also contributed in moving to the current person centred approach.
- 2014 saw the partnership support local councillors with safeguarding awareness training.
- It is helpful to have a local perspective on the partnership and the help and support provided by Age UK in 2014 is recognised. Age UK's contribution to planning for our victims survey was greatly appreciated and added depth and understanding to the process.
- In 2014 the Independent Chair of the Board bought the members attention to the need for agency contribution to the work of the board both financially and with human resource. It was recognised that the partnership was generous in its personnel assets and this was appreciated. West Midlands Police, Dudley Clinical commission Group and Dudley Council also provided a financial contribution to the cost of the board in 2014.
- At a board meeting partners agreed to adopt an annual assurance document developed within the West Midlands. Throughout the later stages of 2014 they considered the requirements and started to work on producing a framework ready for scrutiny in 2015.
It is a credit to the partnership that all agencies asked agreed to complete this piece of work in preparation for board scrutiny.



Challenges for 2015

- To examine the assurance frameworks and to develop peer review and audit.
- To ensure that the duties within The Care Act are upheld and that partners continue to undertake safeguard investigations within the new framework.
- To monitor the board expenditure, to ensure that the board can continue to support and fund its activities as each partner faces financial and personnel constraints.

6. Accountability

What did we say we would do?

- The board is to have assurance that agencies across Dudley Borough recognise their collective responsibility for safeguard arrangements as indicated in The Care Act.
- Performance data will be looked at to ensure that individuals subject to abuse receive timely support from agencies.
- Training within board agencies will meet the levels of specialism and competence required to address safeguard concerns.
- All peer challenge recommendations will be delivered.



What did we do?

- In 2014 both council children services and adult social care services board members sought assurance from Russell's Hall Hospital about allegations of unlawful restraint made in the national media.
This assurance involved a series of meetings with a group of board partners; scrutiny of individual cases and of practices and procedures within the hospital. The subsequent restraint report found no evidence of such practice. The whole process was transparent and clearly showed how partners can hold each other to account whilst working together to improve practice. One of the results of this was the appointment of a learning disability nurse within the hospital who has, within a year, been put forward for a national award as a result of the improvements made within the service.
- Board members also agreed that a serious adult review panel should be established, in line with The Care Act and the peer review recommendations of 2013/2014. This group was established, terms of reference agreed and in 2014/2015 they have started to collect information to analyse three separate deaths which occurred in 2014 which meet The Care Act requirement for this process.
- Board partners such as Dudley & Walsall Mental Health Trust and West Midlands Fire Service have also been involved in enquiries regarding services where colleagues involved are invited to discuss lessons learned. Learning is shared with the board when processes are completed if appropriate.
- The council's adult social care team in 2014 also completed a section 11 audit to demonstrate its partnership working with childrens services. This audit will be challenged by childrens services in 2015/2016.
Board members indicated in 2014 that they considered the safeguarding data needed to be more general and not adult social care focused; to ensure accountability by all safeguarding board partners.
This led to several meetings within the quality and performance sub-group and a revised data set is planned for 2015/2016. The data within the report therefore reflects a more generalised approach to safeguarding for the year 2014/2015 which will be populated with partner agency information for 2015/2016.

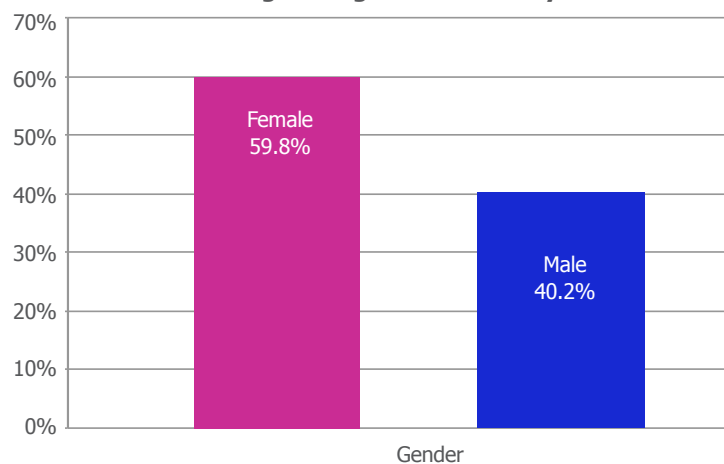
Incidence 2014/15

A breakdown of significant incidents

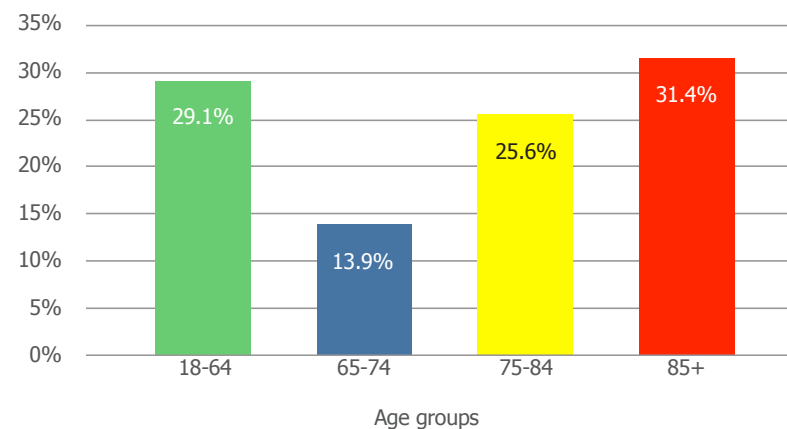
Provided below is an analysis of safeguarding incidents reported to the council during the 2014/15 period.

- The number of adult safeguarding incidents reported between 1st April 2014 and 31st March 2015 was 1,713, of which 726 (42.4%) were carried forward through the safeguarding process as referrals. This compares to 2013/14 data which showed 1,230 incidents, of which 770 (63%) were carried forward. The following graphs illustrate the 2014/15 referral data.
- Overall, the majority of these were for females (59.8%), with the majority of females being in the 85 plus age group, at 35.7% of all female referrals
- The majority of all referrals were also recorded in the 85 plus age group at 31.4%, however, the majority of referrals for males were in the 18-64 age group at 37%

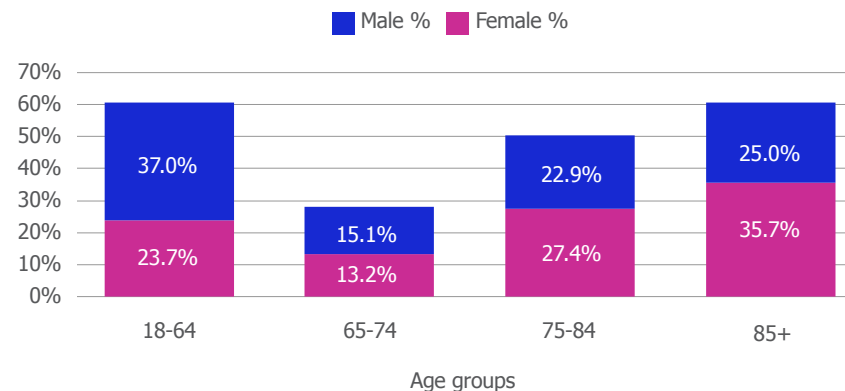
Safeguarding Incidents % By Gender



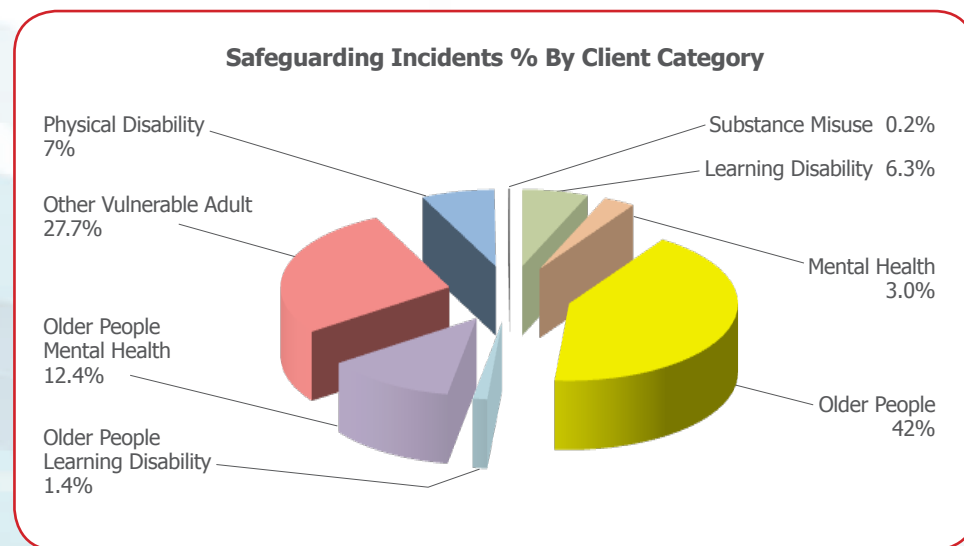
Safeguarding Incidents % By Age Group



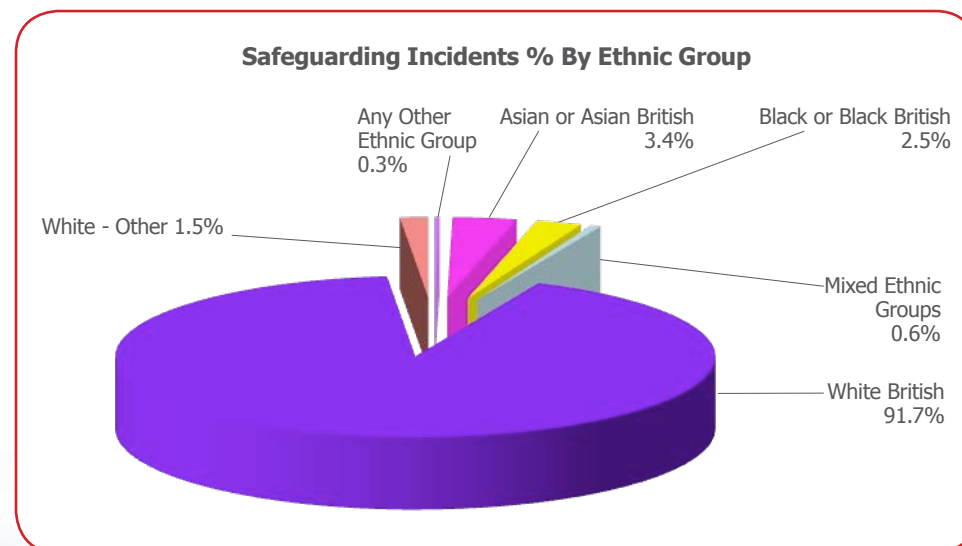
Safeguarding Incidents % By Gender and Age Group



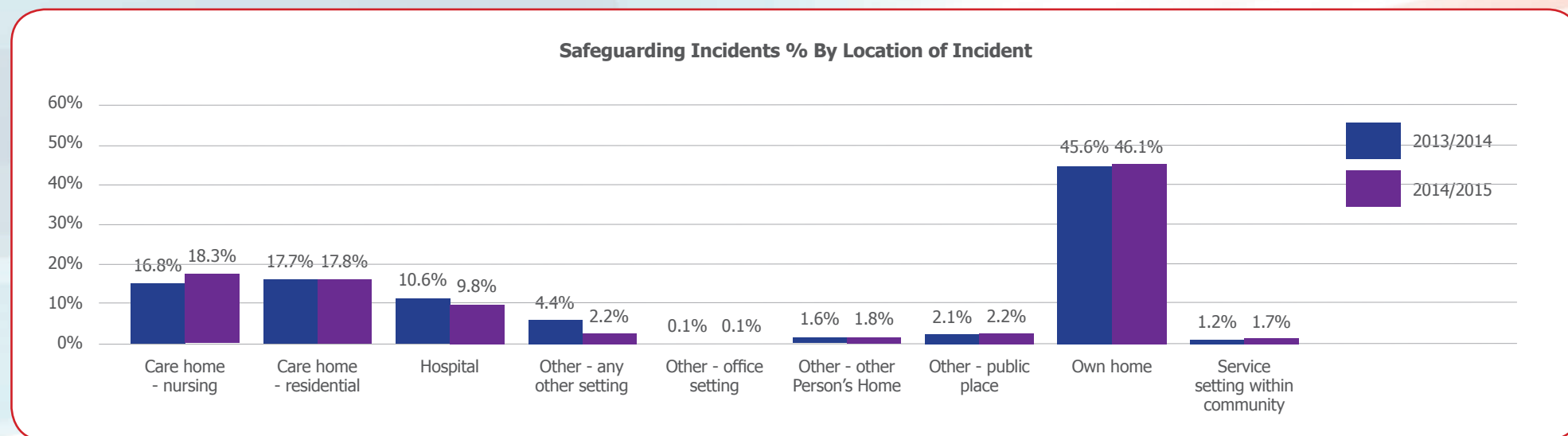
The majority of referrals were recorded for people in the older people client group at 42%, this is also the biggest group in 2013/14, at 58.4%.



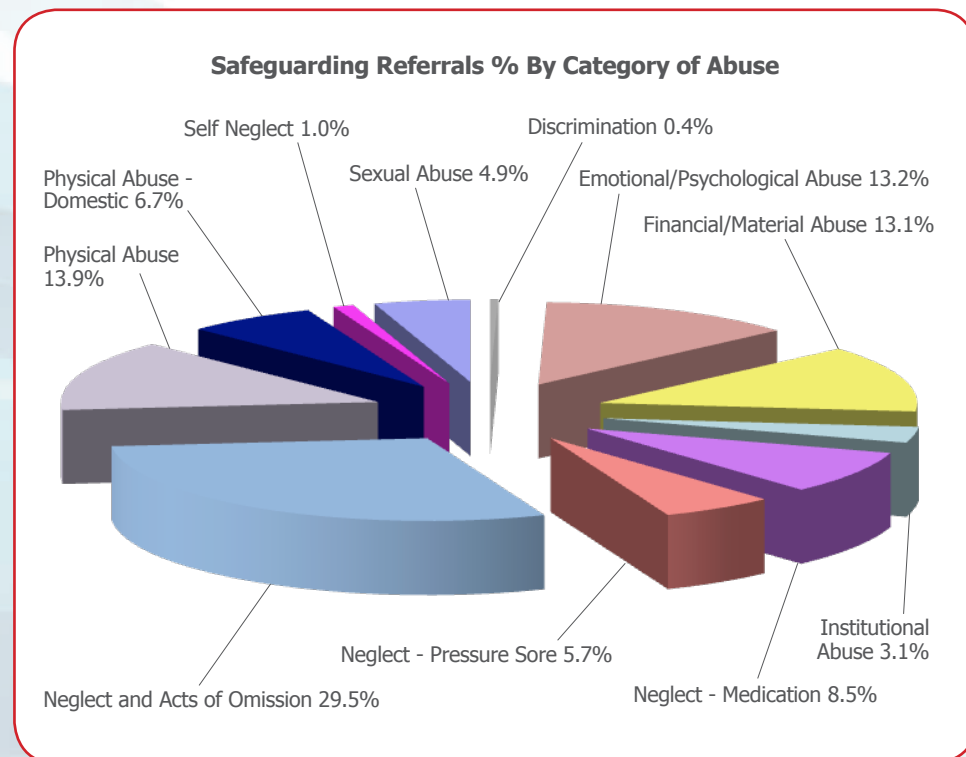
Also the majority of referrals were recorded for people in the White British ethnic origin group at 91.7%, compared with 94% during 2013/14.



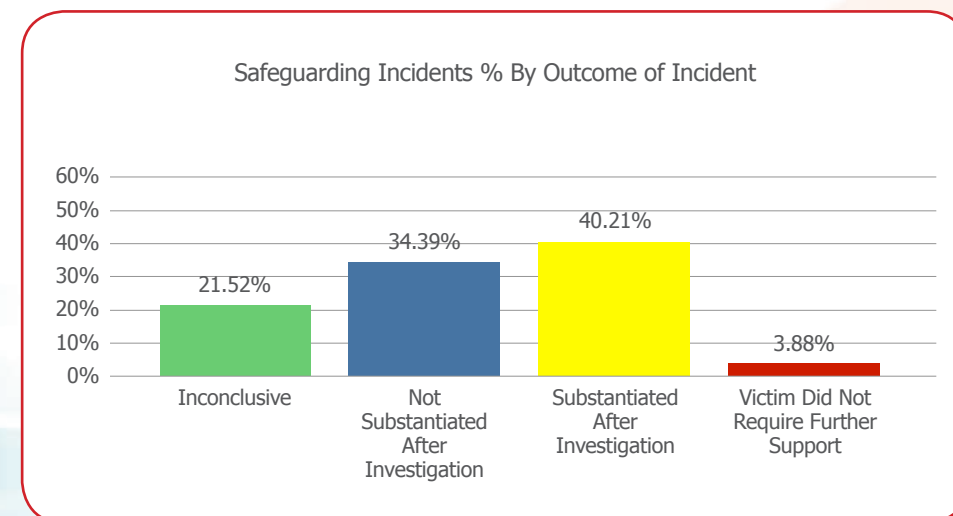
The majority of referrals were recorded as taking place within the victims own home at 46.1%, which is a similar figure to 2013/14 at 45.6%. Of these 335 referrals taking place in their own home 57.6% were for females.



The abuse category of neglect and acts of omission was recorded as the highest proportion of all incidents at 29.5%, a similar proportion to 2013/14 at 26.3%. However, if all neglect categories are combined this figure increases to 43.7% and clearly forms the majority of abuse categories overall



The number of completed referrals during the same period, (where all investigations have been completed and an outcome agreed), was 567. The majority of referrals investigated resulted in the abuse being either fully or partially substantiated at 40.21%, compared with 34.08% during 2013/14. This demonstrates an improvement in those substantiated and suggests that threshold training already started to take effect within the year.



Data is closely analysed by the board against the data set for the previous 2013/14 year. The board closely monitors cases of neglect in commissioned services and have held complex meetings to discuss specific organisations practices throughout the year, along with meeting with them and partner agencies to develop clear action plans.

Multi-agency working

A multi-agency liaison meeting is now held every two months, made up of partners from the safeguarding board and Care Quality Commission. These meetings look at services where there were concerns about safeguarding practice and joint action or single agency response is disseminated to the partner agency group attendees.

In 2014/2015 this data was also regularly shared with the council's adult social care management team and resulted in improvements to the allocation process for safeguard cases and data collection.

Improvements resulting from better multi-agency working have included:

- As indicated earlier in this report the Supreme Court Judgement regarding the Deprivation of Liberties led to a significant increase in the number of referrals received across the borough. The adult safeguard board received reports on this and the council's adult social care team responded by sending six members of staff to undertake training at local universities to support this process. The increase in advocacy services was also reported to the board to ensure that board members were aware of pressures and how they were being dealt with by the appropriate agencies – demonstrating accountability within the legal frameworks.

The Group Foundation Trust met with the council's adult social care team to ensure that the procedures within their setting addressed the Supreme Court Judgements.

- Commissioned services, which continued to refer people to the council for a DoL assessment, were given instructions about their accountability within the process. This was with the support of the West Midlands Care Association who arranged meetings within the borough to facilitate this.
- In 2014 the training courses for 2014/2015 had training outcomes directly

related to the competencies agreed by the board in 2013 – thus providing support for partners in ensuring the right people from organisations attended the specific courses advertised.

- Peer Review recommendations from 2013/2014 were addressed during 2014. Actions taken included:
 - A councillor representative was identified to attend the safeguarding board and has been a regular contributor since.
 - The work with Dudley Group Foundation Trust consolidated the partnership at both an operational and strategic level.
 - The Peer Audit recommended the safeguard threshold training to ensure staff were applying appropriate thresholds in their decision making to provide a proportionate response to safeguarding. This was organised and delivered within the year.
- Throughout 2014 partner agencies disseminated information about The Care Act within their agencies following board briefings.
- Board members also indicated that they shared case studies and serious case reviews within their organisations.
- Black Country Partnership Foundation Trust briefed staff groups about the Deprivation of Liberty Supreme Court Judgement and explored the impact it had on services provided.

- Dudley Group Foundation Trust improved its safeguarding site on the Trusts intranet. Its internal safeguarding board also looked at incident reporting within the Trust and developed its own annual safeguarding report which identified future developments based on incident trends and learning from root cause analysis trends.
- The Police ensured Local Command Teams were aware of board expectations required from The Care Act.
- Dudley Walsall Mental Health Trust continue to use risk assessments as an integral part of the ongoing assessment within safeguarding and share confidentially the outcomes of safeguarding episodes with the relevant teams for the purpose of practice improvement within its organisations.
- Dudley Clinical Commissioning Group designated safeguarding staff report quarterly to the quality and safety committee and the CCG health forum.
- The council's adult social care operational and management teams were briefed by the safeguard lead on 'making safeguard personal' and also about data quality reports within safeguarding. The practice learning events organised by the council's adult social care division sought to deliver lessons learnt from serious case reviews to its operational staff and managers as well as to partner agency audiences to promote good practice, professional curiosity and accountable decision making.



Challenges for 2015/2016

- The assurance framework will lead to peer audit process and then a multi-agency audit, both are planned for 2015.
- The larger organisations within the board have contributed to the assurance framework and learning from that process to be extended to the smaller organisations represented at the board.
- Partner agencies to provide data to the safeguarding board as agreed in a timely and consistent manner to improve partners' contribution to board information and demonstrate breadth of practice.



Dudley Safeguarding Adult Board

Business Plan 2015 - 2016

Prepared by:
Anne Harris
Head of Adult Safeguarding
On behalf of Dudley Safeguard Adult Board

PRIORITY ONE - To keep adults safe and hear their voice

	What are we going to do	Lead person	By when	How are we going to do it	What will the outcomes be	Progress
1.	Partner agencies who investigate safeguard concerns to contribute to the system by reporting outcomes for people involved in the safeguard process.	Head of Adult Safeguarding	Dec 15	When agencies are requested to undertake investigations information will be collated and the outcomes achieved will be reported to the Board.	Practice will be informed to ensure victims' voices are heard. The data will be analysed monthly and the Board will receive assurances that partner agencies are making safeguard personal.	
2.	Transition arrangements are evidenced within agency case records to ensure there are appropriate linkages between Adult & Children's services. 2015 will also see the development of the MASH (Multi-Agency Safeguard Hub) which will support information sharing and partnership.	Head of Adult Safeguarding/ Interim Head of Complex & Inclusion.	March 16	Transition arrangements will be reviewed by a multi-agency Working Group in November 15 who will map transition cases across the safeguard process. The outcomes will be reported to the Board	Learning from the Working Group will be disseminated to partners to ensure that agencies support children in transition through the safeguard process.	
3.	Share practice amongst agencies which recognises issues of mental capacity and empowers people to live the life they choose.	All partner agencies	March 16	Information to be collated on a person's capacity to make decisions related to the safeguard enquiry Information collated on how many cases where support was provided by an advocate. This information will be reported to the Board.	MCA assessments will be reviewed by the Board to ensure that issues related to capacity are understood within agencies and that people are supported in decision making.	
4.	The Board will consider financial and personnel pressures within the local authority and their own agencies and will look at how alternative resources can be used to support the safeguard process.	All partner agencies	March 16	The Board will be advised about the number of safeguard referrals, the pressures this places upon the local authority and partners and how collaborative work can support these pressures.	The Board members to be advised of the risks within the safeguard service delivery to inform agency colleagues and deliver services collaboratively.	

PRIORITY TWO - To Ensure that Adult Safeguarding is made personal by the appropriate support at the right place and time.

	What are we going to do	Lead person	By when	How are we going to do it	What will the outcomes be	Progress
1.	Ongoing engagement with victims to ensure outcomes empower the person and are proportionate to their need though the provision of appropriate support.	Head of Adult Safeguarding	Dec 15	Audit of multi-agency cases to demonstrate a personalised approach which is proportionate to need. The number of safeguard cases where outcomes demonstrate satisfaction will be collated monthly and reported to the Board every six months.	The Board to gain knowledge and assurance that the outcomes are empowering the victim and are proportionate to their need.	
2.	The Safeguard Board will ensure that communication of new elements of the Care Act i.e. self neglect, domestic violence, modern slavery, advocacy, prevent, mental capacity are embedded in all partner agencies.	Head of Adult Safeguarding through work of sub groups.	March 16	Review Board communication and pathways to ensure Care Act compliance strategy to ensure Care Act compliance and that policy and training opportunities have been facilitated through the work of Board partners. A series of workshops on Domestic Abuse, Prevent, Self-Neglect and modern slavery will be organised for operational staff throughout 2015/2016. Number of cases of Domestic Abuse and Self Neglect will be collated in 2015/2016. An audit of Care Act compliance will take place in November 2015.	The numbers of people using Advocacy services will be monitored to ensure Care Act compliance. The number of Domestic Violence, Self Neglect cases collated and audited throughout the year will demonstrate Care Act compliance and further learning required.	
3.	A multi-agency audit to consider proportional decision making at the initial stages of a Safeguarding enquiry to learn lessons and to share practice.	Head of Adult Safeguarding	Dec 15	Partners to take part in an audit of self neglect cases and cases within commissioned services. This will evaluate the 2014 threshold training outcomes.	To continue to inform and develop practice to ensure Safeguarding is person centred and proportional to their needs. To assure the Board about safeguard performance and identify gaps and an Action Plan to address issues identified.	

PRIORITY THREE - To improve safeguard outcome for adults, families and carers by ensuring effective partnership working and accountability.

	What are we going to do	Lead person	By when	How are we going to do it	What will the outcomes be	Progress
1.	To ensure senior representation and lay representation at the Safeguard Board to facilitate the development of assurance structures within its framework	All Board members	Dec 15	Lay Membership sort by April 2015 with the plan to appoint two lay members to the Board.	Decision making and contribution to the Board will be enhanced by the human resources able to support the person centred approach to safeguards.	
2.	Partnership arrangements continue to work with the community to develop awareness and support for hard to reach groups	All Board members	Feb 16	To invite groups to make presentations to the Board outlining their work and the support the Board agencies can provide/ receive from these groups. The Board to set up a Task and Finish group to review how it communicates in November 2015 to review the website and leaflet communication. The Board will review its use of the reporting mechanism for safeguard referrals in November 2015.	Evidence from the Task & Finish Group will improve the Board's communications across the Borough by April 2016.	
3.	To facilitate improved partnerships working by ensuring effective resolution of professional differences through the development of an escalation policy.	All Board members	Nov 15	Adaptation of Children's escalation policy for the Adult Board.	Improved timescales and decision making amongst partners informed by staff feedback and audit.	

Dudley Safeguarding Adults Board **Annual Report 2014/15**

Executive Summary



Executive Summary

Each year the Dudley Safeguarding Adults Board publishes an Annual Report which reports and reflects upon the board's activities over the past year. This is the executive summary of the Annual Report for 2014/15

Dudley Safeguarding Adults Board works to protect adults aged eighteen and over from neglect, harm or abuse. The board is made up of representatives from Dudley Council's adult social care team, West Midlands Police, Dudley Clinical Commissioning Group (CCG), Dudley Acute Hospital Trust, Dudley Fire Service, Healthwatch Dudley, Dudley & Walsall Mental Health Trust, as well as voluntary sector organisations.

These partners work together in a joined up way to ensure that they are protecting adults from across Dudley borough, as effectively as possible.

Dudley Council is the lead agency on the board and is responsible for investigating and decision making in all safeguarding cases, where there are concerns about any abuse, neglect or harm of adults. It is a complex and sensitive area of work, requiring close partnership working to ensure that no one slips through the net and that all people are protected from harm - particularly vulnerable adults.

The board ensures that all agencies work together to protect adults from abuse and indeed from the risk of abuse. It monitors the number of safeguarding referrals and information about the safeguarding assessments.

The board also provides information to organisations and agencies on national safeguarding situations and experiences - to improve local practice. As well as working to promote awareness of adult safeguarding and abuse, to prevent it from happening and to ensure that people know how to report issues or concerns.

The Care Act 2015

Over the year 2014/15 an important piece of new legislation was about to be introduced which has made safeguarding a far more visible and high profile issue. The Care Act 2014 was introduced by the government in April 2015 and much work went on in the year prior to this by the Dudley Safeguarding Adults Board to ensure that the board and its partners were fully Care Act compliant.

The Care Act provides clarity on the responsibilities of a Safeguarding Board, as well as making it a statutory requirement. It also defines exactly who the duty to safeguard applies to. This is defined in the Act as an adult who:

- Has needs for care and support (irrespective of whether the council is meeting these needs) and,
- Is experiencing, or is at risk of abuse or neglect and,
- As a result of their care and support needs is not able to protect themselves from either the risk of, or the experience of abuse or neglect.

Abuse as defined in The Care Act can include:

- Physical abuse
- Emotional/psychological abuse
- Domestic violence
- Sexual abuse
- Financial abuse
- Modern slavery
- Discriminatory abuse
- Organisational abuse
- Neglect and acts of omission
- Self neglect

The Safeguard 'threshold'

- In 2014 a new pathway for safeguard referrals was introduced which incorporated a 'safeguard threshold'. This means that there is now a formal agreed criteria for whether or not a reported issue or concern needs to be investigated any further. This decision is made by a senior social worker. If an issue does meet the new threshold then it follows a new 'pathway' which fully involves the victim and/or their carer - if they have one.
- The council's adult social care team also during 2014, developed a team specifically to support people who are 'at risk.' This is in recognition that not everyone meets the safeguard threshold but still requires support to live a life free from abuse and neglect.

Key focuses 2014/15

Throughout the year the board worked hard to implement their 2014/15 business plan which focused around six key principles - empowerment, prevention, proportionality, protection, partnership, accountability. Each of these six areas has been the key areas which have been focused upon.

Empowerment

The board have worked hard to ensure that victims of abuse and carers are providing information on what they want to achieve from their own safeguarding investigations. They are providing information on their own experiences and this is being taken on board. The board signed up to the 'Making Safeguard Personal' project which aims to ensure that views of victims are captured throughout safeguarding episodes.

The role of advocates is also being promoted to make sure that people are being supported throughout the safeguarding process. Advocacy services are now asked to help at a much earlier stage in the safeguard process and are now fully involved in the decision making process.

Work has also gone on to promote the issue of adult safeguarding and to ensure that people are clear as to what abuse is and how to report it. A new safeguarding website was launched in April 2014. This contains lots of information on both adults and children's safeguarding, along with a 'Report it' button. Throughout 2014 1050 alerts were received via the website.

Protection

The board has worked hard to make sure that Mental Capacity, Best interest and the Deprivation of Liberty are central to the safeguarding process.

A Supreme Court Judgement in March 2014 had a big impact on the number of people in hospitals and care homes who may be deprived of their liberty in their best interests and need a 'Deprivation of Liberty' order. The board has held meetings with care homes who have reviewed their care plans of residents to make sure they are using the least restrictive practices and have requested Deprivation of Liberty Safeguard orders for people who they felt met the new criteria.

Mental Capacity Act training has been delivered to two hundred members of staff and an action plan to raise the awareness of 'Best Interest' has been formulated.

The board has been identifying repeat safeguarding concerns and emergency themes from safeguarding issues in line with the Winterbourne View recommendations (Winterbourne View was a private hospital where people with learning disabilities were widely physically and psychologically abused by staff up to 2011. A serious case review took place as a result and was published by the Department of Health which cited many recommendations to avoid any repeats of this type of abuse in any organisation).

Prevention

The focus here through 2014/15 has been on the promotion of safeguard training to a much broader audience, to raise awareness on how abuse can be prevented. Along with these efforts has been work to promote safer recruitment of people in 'positions of trust'. The board has been keen to learn lessons from case studies and nationwide serious case reviews.

A whole range of tailored safeguarding awareness training courses have been provided over the past year to all sorts of groups and organisations across Dudley borough. The board was even asked to provide training to a local building society and to the Diocese of Worcester.

Three multi-agency practice learning events were held in 2014 where serious case reviews were considered and assessed. These were learned from and communicated through each agency.

Proportionality

Threshold training was provided to operational staff to make sure that there is an understanding of what actually constitutes a safeguarding issue. This will mean that people will be confident about reporting a safeguard issue and will eliminate unnecessary reporting.

It was also agreed that all of the board partners will immediately contribute staff and information to assist a safeguarding investigation. This will then be able to be conducted in a timely and proportionate manner.

Methods of restraint have also been identified and recorded to protect adults at risk and shared with local services and organisations. A Department of Health report called 'Positive and safe' was produced in response to the Winterbourne review where the incorrect use of restrictive practices was identified. Research showed that organisations are often unsure about the correct use of restrictive practices, with some services relying too heavily on the use of restraint. Guidelines have been produced for services which were shared with all borough wide organisations.

Partnerships

To meet the now statutory requirements of The Care Act the board consolidated its footing amongst partners.

The board also extended its wider partnership working with children's services, community safety, health and wellbeing services, health workers and councillors.

Board members were also asked over the period to commit additional financial and manpower resources to the board itself. This is to support the increased efforts in training, promotion and prevention work that the board has committed to deliver.

It is recognised that the financial pressures facing Dudley Council will impact considerably on the availability of resources and manpower and the board members have been regularly advised about this throughout the year especially when it has impacted upon the ability to deal with safeguard concerns within the borough.

Accountability

The board has asked for real assurances from all organisations across Dudley borough to recognise their responsibilities for safeguarding - as now laid down in the new Care Act. This has meant sometimes scrutinising incidents which have occurred in partner's settings.

The board also established a serious adult review panel which has begun to collect information and performance data to analyse information relating to specific serious incidents. Learning is shared and lessons are learned to ensure that people subject to abuse receive timely support from organisations.

Further training has been identified to meet competence levels required to properly and fully address safeguard concerns.

Performance Data

A full breakdown of safeguarding incidents can be found in the complete annual report.

- In summary, 1,713 adult safeguarding incidents were reported between 1 April 2014 and 31 March 2015. Of these 726 (42.4%) were carried forward through the safeguarding process as referrals.
- The majority of these were for females (59.8%), the majority being in the 85 plus age group (35.7%).
- The majority of these incidents took place in the victims own home (46.1%).
- The abuse category neglect and acts of omission was recorded as the highest proportion of all incidents at 29.5%. If all neglect categories are combined this increases to 43.7%.
- The number of completed referrals (where all investigations have been completed and an outcome agreed) was 567. The majority of these were either fully or partially substantiated.

People Services Scrutiny Committee - 28th January 2016

Report of the Strategic Director People

Deprivation of Liberty Safeguards (DoLS)

Purpose of Report

1. This report is to appraise the Scrutiny Committee about changes to Adult Safeguarding since the implementation of the Supreme Court Judgement in 2014 and the Care Act 2015 and consider the impact on adult safeguarding in Dudley.

Background

Deprivation of Liberty Safeguards (DoLS)

2. The Supreme Court ruling in May 2014 extended the remit of people in Residential, Nursing and Hospital beds who may be eligible for DoLS. It also introduced Community DoLS, whereby settings where a person is deprived of their liberty in their best interests to provide their care and support, but are in the community such as supported living arrangements, adult placements and domestic settings have to request a deprivation of liberty application through the Court of Protection.
3. It was expected nationally that this judgment would have a huge impact on the level of Deprivation of Liberty referrals, as care homes and hospitals needed to apply different thresholds to decide on whether they are depriving a person of their liberty.
4. In anticipation of this increase, , a further five staff were trained as Best Interest Assessors by June 2015 to complete the required assessments, alongside their normal workload and a further three staff are undertaking training in 2016. The department has also seconded a full time Best Interest Assessor until April 2016.
5. In addition the Department of Health provided local authorities with a grant towards training for staff and to provide support for the complex administrative process- two additional part time administrative staff was appointed within Dudley for this purpose.
6. From April 2014 – March 2015 615 applications were received within Dudley. From April 2015 to December 2015 456 applications have been received already. This compares with a total number of 142 for 2013-2014.
7. In September 2015 a comparison was made with other local authorities for April – June 2015 regarding the number of applications received:

Solihull	- 244
Stoke	- 261
Walsall	- 228
Dudley	- 219
Sandwell	- 221

8. Authorities' report significant back-log, as the region agreed that priorities should be given to those previously subject to a Deprivation and those in hospital so as not to delay the hospital discharge process. Dudley has completed 45% of their total assessments to date. This performance is comparable to other Local Authorities in the West Midlands and at a national level.
9. ADASS (the Association of Directors of Adult Social Services) have fed concerns about the significant rise in referrals back to the Department of Health. A new scheme for Deprivation of Liberty safeguards is being consulted upon for implementation in 2017.
10. As Community DOLS requires a different process via the Court of Protection. Social Care staff have been trained in the process and local procedures developed for implementation from January 2016. Additional staff have been appointed on a years contract to support the process. There are 54 Community DOLS awaiting assessment within the division.

Adult Safeguarding

11. In quarters 3 & 4 (2014 -15) 885 cases of safeguard concern were progressed to the local authority. In quarter 1 & 2 (2015-16) 986 cases were progressed to the local authority. Of those 986 - 409 were progressed for a safeguard investigation – (now called an Enquiry under the Care Act Legislation.) The others were signposted in other ways which included receipt of a care package; other services or for partners to assist with support.
12. Neglect is the highest type of abuse experienced at 44.3% of the total abuse recorded. There has been a substantial increase in the number of enquiries recorded as self neglect from 10 in the previous two quarters to 48 in these first two quarters of 2015 this is also reflected in increasing referral levels to our Adult at Risk team.
13. In response to self-neglect cases Adult Social Care created an Adult at Risk team in October 2014 as the Care Act included Self-Neglect as a category of abuse in April 2015. This has proved hugely resource intensive as people who self-neglect are historically difficult to engage. This comes at a time when local authority and partner agencies staffing resources are also under huge pressure. The remit for this team is also under pressure as Domestic Abuse was also included as a category of abuse since the Care Act implementation, and likewise people need considerable support to work through issues of Domestic Abuse.

A review of this service is currently in progress to deliver support effectively but within the resources available to the Council.

14. The Care Act also introduced a Section 42 enquiry which is the duty the local authority has to make or cause others to make safeguard enquiries. Dudley had co-operation from partner agencies, especially the CCG and Dudley group of

Hospitals NHS Foundation but support from the Police has been problematic and resulted in a report to the Board highlighting those concerns in December 2015.

15. The Care Act has also introduced non-section 42 enquires where a person has moved away from the agency/location of the abuse but others may still be subject to poor practice there. It also includes people who may have died, not from abuse, but where there was abuse alleged prior to their death. Up until December 15 two part-time staff dealt with these non- section 42 enquiries but the resources to fund these posts have now ceased and a waiting list emerging to undertake investigations of this nature.
16. The demand and pressures outlined above have been presented as a risk to the Adult Safeguard Board.
A review of the organisational team changes will consider these pressures and agree next steps.
17. The Supreme Court Ruling of 2014 and the Care Act of April 15 have added significant pressures upon Adult Safeguarding within the Borough.
18. In 2015 three separate deaths within the Borough led to the Adult Safeguard Board commissioning investigations by an independent author. These reviews are now known as Safeguard Adult Reviews. A report of one of the deaths has completed with additional training on the Mental Capacity Act and a review of the self-neglect procedures identified. The other two await court hearings regarding the prosecution of staff working for independent service providers, where their actions are being questioned in terms of their practice around dysphasia care for both people concerned.

Equality Impact

19. The Mental Capacity Act 2005 – Deprivation of Liberty Safeguards and the Care Act 2014 are consistent with the Equal Opportunities Policy of the Council.
The Safeguard & Protect Policy and Procedures were revised in April 2015 to take account of the legal changes of the Care Act and ensure that regionally Equal Opportunities remained addressed.

Recommendation

20. The People Services Scrutiny Committee is asked to recognise the increased complexities and demands placed on Adult Safeguard in 2015 and the consequent risks this brings to managing adult safeguarding concerns within the Borough. Further detail and performance information is available in the Safeguarding Adults annual report.



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List of Background Papers

Performance Data and Annual Reports about Adult Safeguarding

<http://safeguarding.dudley.gov.uk/adult/safeguarding-adults-board/publications/>

People Services Scrutiny Committee - 28th January 2016

Report of the Strategic Director People

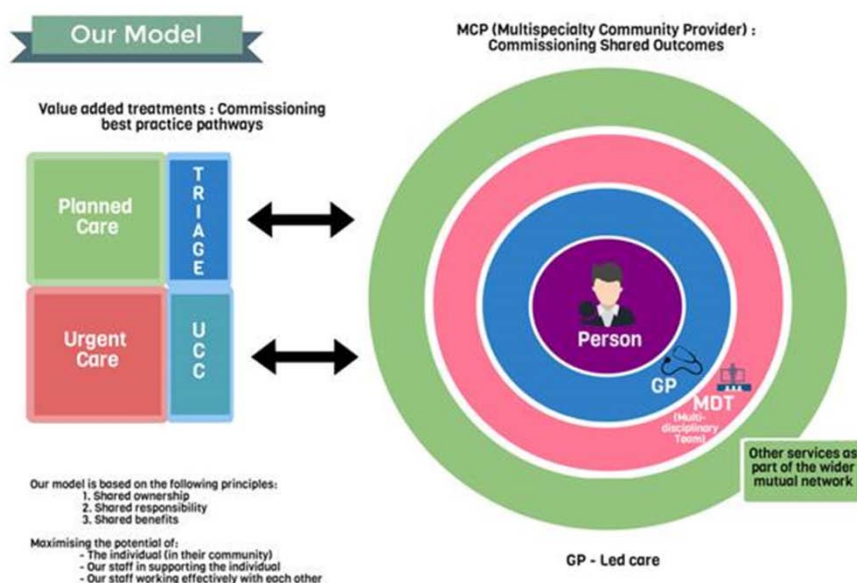
Dudley New Model of Care (Vanguard) Programme Update

Purpose of Report

1. To provide an update on the Dudley New Model of Care (Vanguard) programme.

Background

2. The NHS new care models programme was launched in January 2015 with individual organisations and partnerships invited to apply to become vanguards, one of the first steps towards delivering the NHS Five Year Forward View and supporting improvement and integration of services.
3. Dudley CCG submitted a bid to the programme on behalf of health and wellbeing partners in Dudley and was amongst the first vanguards chosen to deliver a multispecialty community provider (MCP) model of care.
4. The Dudley model reflects multi-disciplinary team (MDT) working at GP Practice and Locality levels, coupled with best practice pathways to planned and urgent care:



5. The model of care for the MCP can best be described by the three themes of access, continuity and coordination:

6. Whilst planning and delivery of the new model of care is very much owned and managed locally, the NHS new care models programme maintains oversight and offers a suite of practical and financial supports.
7. We are talking to the public about our plans and they are shaping what successful integrated care means for them:

The Five Year Forward View

What do you think?

Stakeholders and Needs:

- friendly** (to not a question of GPs, assuming you, it's the GPs' know about you)
- Respect** (access to information, tell story once, approachable, empowerment, treat whole person, flexibility, patient voice)
- Information Choice Listen** (individual needs addressed, listen, guide, specialisms, when is hospital the best place to be cared for?, better signpost, equipment)
- Nurse Specialists** (need to be more flexible, how do the people make you feel?, all equal, respect more for what they do, Jack as all breeds)
- DR named** (DR named, DR named, DR named)
- Which services are better provided in the community?** (face time? online consultations?, face time? in my 4 Feb before lunch, 10.30-11.30, next, A+E, named individuals with links to GPs & hospital)
- NHS Dudley** (clinical commissioning group, we want feedback!)
- Sharing information = safety** (zoo, zoo, zoo)
- Harness the power of technology** (better workforce, efficient use of facilities & buildings, best value for money)
- Standardise** (trust, everyone working together!)
- Integration** (focus on enablers, better patient pathways)
- Consistency** (everyone is registered with a G.P., multi-disciplinary teams)
- Challenges** (money is running out, squeeze on finance, public expenditure, more complex needs)
- The whole system is under pressure!**
- Thinking Differently** (www.possibilities.co.uk)

The CCG Healthcare Forum took place early December 2015 and approximately 80 participants took part in structured workshops around key workstreams as part of the New Models of Care (NMC). A presentation was delivered at the start which explained the NMC and why changes were necessary. The multi-disciplinary team (MDT) also presented to participants to explain how their roles had changed since they had started working closer together. Structured workshops included:

- 64

Feedback was captured at every workshop and has been fed into the workstreams.

- At the end of January 2016, a Listening Exercise will be launched which will see teams visiting groups and forums across the borough to talk about the New Care Models and to give participants the opportunity to share their views and opinions and help shape how we form better integrated health and social care.
- In addition there will be separate engagement for specific workstreams which may require formal consultation of softer engagement
- We are working with Healthwatch Dudley to ensure we reach some of the groups that we don't regularly engage with
- We are working with the Social Care Institute for Excellence (SCIE) to understand the wicked issues around New Care Models

We are developing a Task and Finish Group for engagement to ensure that everything we do is grounded in common sense, to hold us to account and to provide an objective perspective on plans and help shape the direction of travel.

8. The activity to deliver the model is being managed within a single programme. A multi-agency Partnership Board meets monthly to provide strategic direction and oversee delivery of the programme. Partnership Board receives a monthly progress report with commentary on four domains: Project Milestones, Finances, Performance and Risks & issues:

Finances

The NHS new care models programme is providing financial support to pump-prime change activity and to enable the transition to the new model of care. Funding is subject to the approval of a Value Proposition setting out the business case for the model.

For 2015/16, initial funding of £150,000 was provided to enable the setting up of programme management and governance arrangements. In addition, our Value Proposition identified a requirement of a further £2.7m to fund early delivery of key elements of the model.

To date some £1.8m has been received (in addition to the initial funding allocation) and whilst there has been some slippage in terms of timescales, we expect year-end receipts to fully match the above requirements.

Funding requirements for 2016/17 and 2017/18 are in the process of being identified and will be included in an updated Value Proposition, which is due to be submitted in February 2016.

Performance

The programme's performance framework comprises national and local performance indicators.

National Measures

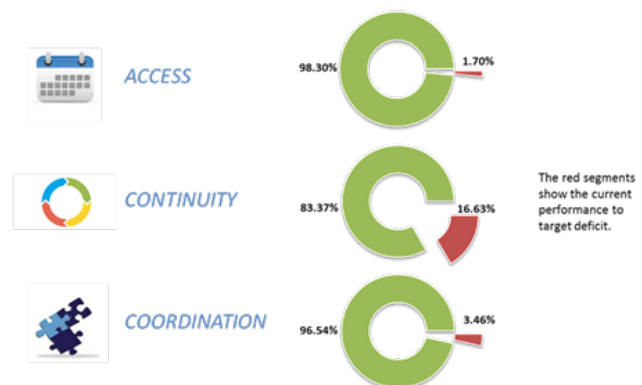
The NHS new care models programme has defined a basket of six indicators across three domains: Health & Wellbeing, Care & Quality and Efficiency. Performance across all Vanguard sites is benchmarked alongside 'non-New Care Model' sites. Performance data will be displayed on screen during the scrutiny session and the slides will subsequently be made available on CMIS.

Local Measures

Work to develop local indicators aligned to the programme's outcome objectives (Access, Co-ordination and Continuity) continues, with metrics needed to inform negotiations between CCG and providers. All relevant national indicators that could be utilised for the local metrics have been scoped and short listed. However, there is a significant amount of work required to finalise local indicators.

The graphic shows the size of the performance 'gap' across a basket of indicators linked to each objective. The model is not yet fully populated so gap data is indicative only at this stage.

Vanguard Aggregate Scores by Domain



* Please note that there is not a current performance position for all indicators. The above composite performance gap figures are therefore subject to change once the full suite of measures are compiled.

Risks & Issues

Risks and Issues (and dependencies between projects) are monitored, with very high and critical risks and issues reported to Partnership Board.

There are three substantial risks for the programme:

- Risk 3 (Partners disagree about the organisational form needed to deliver the model;
- Risk 8 (Programme capacity (staff resources) to deliver the programme within the defined timescales is insufficient);
- Risk 9 (Budget recovery actions within ASC affect programme delivery).

Two programme-level issues remain open. Both are considered 'High Priority' and receive Partnership Board attention:

Issue	Action
Inconsistent prioritisation of the programme across partner organisations. A number of BAU projects exist and continue to take priority.	Further analysis of system IT architecture against agreed architectural principles
Partners generally are concerned about involvement and consultation within the programme.	(1) Development of the new Value Proposition (2) Planned partner workshop to define the key components & attributes of the NCM in Jan 16 (3) Review of project leadership

Law

9. Project Leads are tasked with identifying legal implications and consulting across partner organisations as appropriate. Support is available from the NHS new care models programme.

Equality Impact

10. None at this stage. Dudley's New Care Model is a 'whole population' model and appropriate consideration is given to equality impacts across all projects.

Recommendation

11. It is recommended that People Services Scrutiny Committee receives the report and notes the good progress being made



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