

Solihull Safeguarding Adults Board

Involvement and engagement approach and
plan for safeguarding adults in Solihull

2017 – 2021

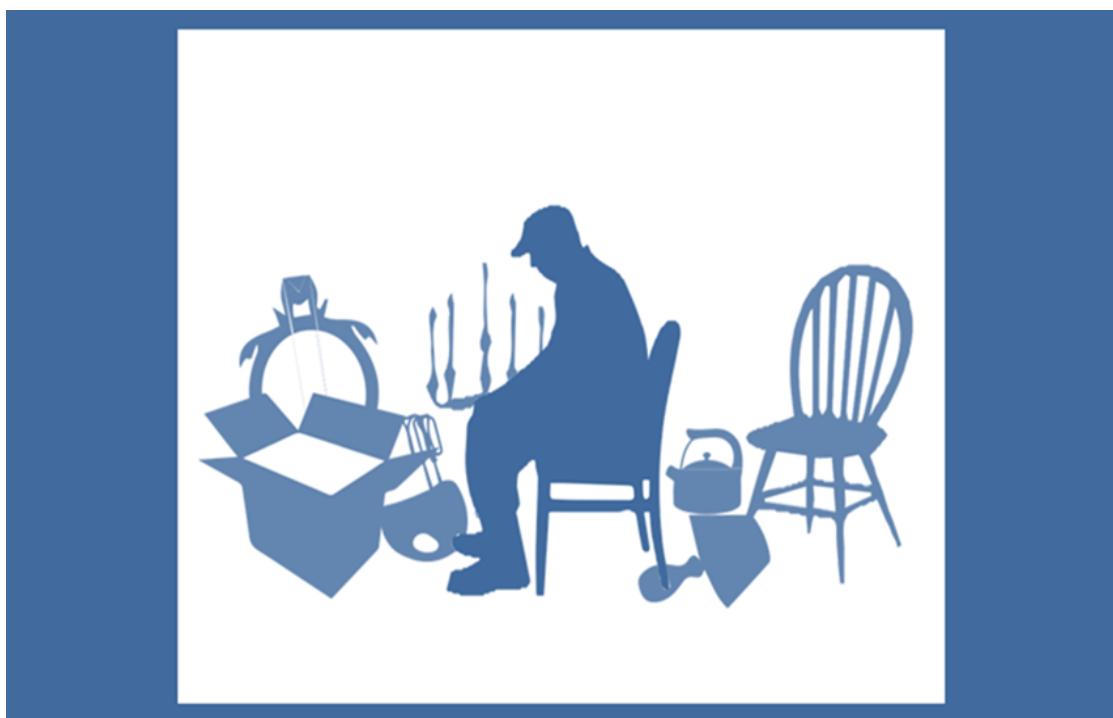
pushing
bullying pinching
withholding food & drink coercion intimidation
hitting isolating
restraint emotional abuse
misusing medication shaking
scalding teasing sexual abuse
leaving on own blaming
stealing money or benefits neglect
leaving on own ignoring needs

1. Introduction

There are many different areas within Safeguarding Adults where active involvement or engagement should be everyone's day to day approach. From individuals actively involved in their own safeguarding, understanding peoples experiences, providing good information and advice about safeguarding, informing training, co-producing strategies, policies, information and involving people/communities in the work of Safeguarding Adult Boards.

Solihull Safeguarding Adults Board has for the last 3 years strived to improve and increase the involvement and engagement of adults who are/have experienced Solihull Safeguarding Adults process to inform their work.

This document sets out the approach for involvement and engagement for the next 5 years.



Self- Neglect

2. Drivers for involvement and engagement?

There are a number of policy drivers (see appendix 1) for involving and engaging across the health and social care sector.

The most recent and prominent driver for involvement and engagement is the Care Act 2014 and the Making Safeguarding personal programme.

The Care Act 2014 Care and Support Statutory Guidance makes it clear that people should be at the centre of all safeguarding activity and is clear there are six key principles to underpin all adult safeguarding work they are:

- Empowerment,
- Prevention,
- Proportionality,
- Protection,
- Partnership and
- Accountability.

The making safeguarding approach is a national programme led by the Association of Directors of Adult Social Services (ADASS) and the Local Government Association (LGA) and funded by the Department of Health and has been running since 2010. Making Safeguarding Personal is a shift in culture and practice in response to what we now know about what makes safeguarding more or less effective from the perspective of the person being safeguarded. It is:

- having conversations with people about how we might respond in safeguarding situations in a way that enhances involvement, choice and control as well as improving quality of life, wellbeing and safety.
- seeing people as experts in their own lives and working alongside them. It is about collecting information about the extent to which this shift has a positive impact on people's lives.
- a shift from a process supported by conversations to a series of conversations supported by a process.



Discriminatory abuse

3. Definitions

Adults with care and support needs are people who receive or are eligible to receive social care services and includes older people, adults with learning disabilities, physical disabilities or mental health needs.

Carers are people who provide unpaid care to a family member or friend.

Advocate's support people to speak up about what they want, working in partnership with them to ensure they can access their rights and the services they need.

Adult Safeguarding is the term used to cover all work undertaken to support adults with care and support needs to maintain their own safety and wellbeing. It describes the preventative and responsive actions undertaken to support adults who are experiencing, or at risk of experiencing abuse or neglect.

Empowerment - give (someone) the authority or power to do something, presumption of person-led decisions and informed consent.

Involvement is a broad term that has been used to cover the whole spectrum ranging from giving information to service users; requesting specific contributions through surveys, panels etc.; two-way sharing of opinions to jointly develop options; responding to views from service users; shared planning and decision making with service users; to devolved decision-making to local groups and networks. Organisations and local authorities define the term according to the level of power sharing they decide to aim for.

Participation as a term is often used interchangeably with consultation, partnership or involvement. In its more specific sense, participation is not simply about being present or taking part but requires that those participating have some influence over decisions and action.

Engagement refers to the many different ways in which a community is involved in, or participated in, aspects of an organisation's activities. This can be at various levels, ranging from being consulted about a plan or community needs to very high levels of involvement, such as decision making and agenda-setting.

Co-production differs from user involvement in that whilst the latter covers a range of approaches, including consultation where no real meaningful power-sharing takes place, co-production demands more active involvement and decision-making by the person using a service and puts more emphasis on relational " rather than „transactional“ approaches to delivery. The essence of co-production is to encourage service users to use their human skills and experience to help deliver public or voluntary services; it is about broadening and deepening public services so that they are a shared responsibility, building and using a multi-faceted network of mutual support. (SCIE 2009, NEF 2008)

4. Benefits and challenges

There are many potential benefits for all concerned when there is active involvement and engagement with adults and carers.

The benefits of active involvement and engagement to the individual include:

- People feel valued and empowered.
- Individuals are more likely to have a more positive experience.
- De-mystifying safeguarding, enabling individuals to identify what they want to happen (their outcome) and ensure the enquiry is conducted at their pace.
- Ensures face to face contact – doing with not to an individual.
- Individuals feeling in control rather than the enquiry going at a pace they are not comfortable with.
- Reducing an individual's feeling of shame, embarrassment and isolation.
- Positive recognition of carers roles.
- Many people of all age groups want to engage, be valued and be part of their community, and have a say in things that affect them.

The challenges of active involvement and engagement are:

- Concerns about risk
- Individuals feeling embarrassed and ashamed.
- Fears of causing harm or increasing harm.
- Communication difficulties – in relation to disclosure, being believed, information that is accessible etc.
- Managing individual's expectations.

The benefits to Safeguarding Adult Boards include

- Safeguarding Adult Board can learn from people who have been through the safeguarding process, to ensure procedures and practices are fit for purpose.
- Improved relationships with the community.
- The reputation and influence of a Safeguarding Adult Board can be enhanced by demonstrating its closeness to its major target groups.
- Greater sense of purpose and fuller sense of how the work of a Safeguarding Adult Board impacts on individuals and the community.

The challenges are:

- Achieving fair representation as safeguarding adults has such a wide remit.
- People don't want to identify as a "victim".
- People don't always want to revisit a stressful or crisis experience.
- People don't always know they have been through a safeguarding process.
- Communication difficulties – the size and complexity of Board papers and discussions.
- SABs are strategic bodies not operational.



Sexual Abuse

5. Solihull's approach for the next 5 years

5.1 Involving people in their own safeguarding

It is really important that safeguarding adult's procedures are proportionate and undertaken with the individual and not "done to" individuals. The Safeguarding Adults Procedures followed by all partner agencies must therefore be person centred and outcome focused. In practice this means:

- Individuals must be informed a safeguarding concern is being raised or has been made and what will happen. If for reasons of mental capacity the individual is unable to understand then their next of kin or representative must be informed. Where an individual does not have a next of kin or representative then an Advocate or IMCA must be instructed.
- Individuals or those representing them must be asked what outcome they want as soon as it is practical in the safeguarding adults procedures.
- Individuals or those representing them must have access to information throughout the process so they can make informed choices.
- Individuals or those representing them must be enabled and empowered to participate in all aspects of the safeguarding adults processes for example: meetings, case conference, protection plans etc. These processes may need to be adapted to enable involvement.
- The outcomes identified by the individuals or those representing them must be reviewed at the end of the process to identify if they have been met, partially met or not met.

OUTCOMES BY 2021

- An outcome approach to safeguarding adults will be embedded into all safeguarding procedures, process and activity across the partnership.
- Data in relation to outcomes will be available to evidence this approach – showing an upward trend.
- Feedback from people's experience of safeguarding adult process will be a routine part of Solihull's end-to-end process and data will be collected to evidence this practice.

5.2 Understanding peoples experiences

In 2013 The Association of Adult Social Services (ADASS) and the Local Government Association said "*Unless people's lives are improved, then all the safeguarding work, systems, procedures and partnerships are purposeless*".

We can improve procedures and services by understanding the persons view and perceptions of the process and how involved they were or wanted

to be if we ask them. In practice this means:

- Individuals who have been through the safeguarding adults procedures should be asked for qualitative feedback for example – do they feel safer, did they feel in control etc.
- Individuals feedback will inform policies, procedures, practice, training and the work of the Board.
- The experience of carers who are supporting people through the safeguarding adults process, inform policies, procedures, practice, training and the work of the Board.

OUTCOMES BY 2021

The work of Solihull Safeguarding Adults Board will be informed by the experiences of individuals experiences Solihull's Safeguarding Adults processes – by:

- SAB Development days will include a 'citizens journey' to ensure their experiences remain our top priority.
- SSAB Performance Report will reflect the Governments 6 Principles and will include outcome based indicators to demonstrate involvement and engagement.
- The SABs Annual Report will report on what adults who have experienced the process say and the extent to which the outcomes they wanted have been realised. Case studies will be used throughout.
- The SAB's Strategic Plan will be informed by consultation with Healthwatch and will involve the local community.

5.3 Information, advice and Advocacy

The Local Government Association states:

Adult safeguarding needs to be as empowering as possible. It is vital that people have as much control and choice as possible, that their preferred outcomes are addressed and that the pace, meetings and protection plans are guided by their needs and circumstances. Accessible information, advice, support and good advocacy are essential components to this.

Having access to information and advice assists those involved in making informed choices about care and support and helps them to weigh up the benefits and risks of different options. Information and advice can enable people to keep themselves safe in the first place. However should abuse occur people need to know what options are open to them. It is also important in terms of understanding the safeguarding process and longer term support.

In practice this means:

- Good quality information which is co-produced will be available to adults, their family and friends and those accused of causing harm so they are clear about safeguarding.
- Information will be available in Easy to Read Format and other formats on request.
- An advocate will be appointed for all adults who have substantial difficulty being involved in their safeguarding activity or in expressing their views.
- An IMCA will be appointed for all adults who lack mental capacity where safeguarding measures are being put in place in relation to their protection from abuse. Access to IMCAs will not be restricted to people who have no one else to support or represent them. Therefore, people who lack capacity who have family and friends can still have an IMCA to support them through the safeguarding process.

OUTCOMES BY 2021

- A set of up-to-date, co-produced information which have been tested and reviewed will be easily available in formats that are accessible.
- Advocacy data will demonstrate the requirements of the Care Act 2014 s68 and Mental Capacity Act 2005 s35 are being met.
- Joint working with partners will be able to demonstrate community awareness of safeguarding adults.
- Where safeguarding activity is not the most appropriate action to be taken – people will benefit from up-to-date signposting and support.
- Local Area Coordination (LAC) will support prevention and early intervention.

5.4 Involving people/communities in the work of the Safeguarding Adults Board

Safeguarding Adult Boards have a duty to consult and involve people when developing their strategic plan. The Care and Support Statutory Guidance issued under the Care act 2014 states SAB should “*establish mechanisms for developing policies and strategies for protecting adults which should be formulated, not only in collaboration and consultation with all relevant agencies but also take account of the views of adults who have needs for care and support, their families, advocates and carer representatives*” (14.139).

The Making Safeguarding Personal Temperature Check 2016 commissioned by the Association of Adult Social Services identified many SABs are still struggling to get meaningful involvement with people on their

Boards. However 14 Boards (12%) had service user forums that were specifically for safeguarding.

SSAB has agreed the important element in relation to involvement in the Boards work is that people who have experience the safeguarding adult's process are the priority not just users of health or social care services. This is so their involvement in the work of the Board is credible and beneficial. Involvement can be achieved in a number of ways – attendance at Board meeting, via a forum, training/challenge direct to the Board etc.

In practice this means:

- The sub committees under the Board will be informed by “user” groups and/or “experts by experience”.
- An effective link with the Partnership Board for Adults with Learning Disabilities will be maintained.
- The work of the Board will be informed by service users’ experiences.
- Each year the Strategic Plan will be either developed or reviewed in consultation with Healthwatch and the local community.

OUTCOME BY 2021

The work of Solihull Safeguarding Adults Board will be informed by the experiences of individuals experiences Solihull’s Safeguarding Adults processes – by:

- An appropriate involvement and engagement model– which may be a Focus group/sub-committee with the aim that a member of the Focus Group/sub-committee will be elected to attend Board meetings.
- SAB Development days including a ‘citizens journey’ to ensure their experiences remain our top priority.
- SSAB Performance Report reflecting the Governments 6 Principles and will include outcome based indicators to demonstrate involvement and engagement.
- The SABs Annual Report reporting on what adults who have experienced the process say and the extent to which the outcomes they wanted have been realised. Case studies will be used throughout the Report.
- The SAB’s Strategic Plan being informed by consultation with Healthwatch and will involve the local community.

5.5 Training, Learning and Development

The quality of people’s experience of safeguarding is dependent on the competency of the staff coordinating the process. Continually learning and development is an on-going process with many different elements.

Training, learning and development is not restricted to employed staff and/or volunteers but is of equally importance to people who find themselves with safeguarding needs or at risk of harm and abuse.

In practice this means:

- There will be a comprehensive training offer from the SSAB to support partner agencies training programmes.
- An effective evaluation process will inform training programmes.
- Training, learning and development initiative will be provided to people with care and support needs/carers to keep safe, maintain healthy relationships, and build resilience, confidence, assertiveness, self-esteem and respect.
- SAB training will be informed by people direct experiences.
- The SAB competency framework based on national work will inform partner agencies practice to evaluate the skills and abilities of their staff

OUTCOME BY 2021

- Training, learning and development initiative for adults is provided each year.
- Training for practitioners and professionals is informed by service user's experiences. (MSP Feedback).
- Partners will be able to evidence safeguarding adult's attendance and competency of their staff, through SSAB performance Reporting and Solihull Partnership Strategic Self-Assessment Tool (SPSSAT).
- Staff supporting individuals through safeguarding will be confident and competent.

5.6 Policies, procedures, guidance and protocols

Strategies, policies and procedures provide the direction and scope of our work and the ways and means to do it, therefore service user involvement and coproduction is essential.

In practice this means:

- 'I' statements that express what people want to see and experience will be an integral part of all local policies, procedures and guidance.
- Strategies, policies and procedures will be co-produced with adults and will be informed by wide consultation.

- Strategies, policies and procedures will have an effective review timetable to ensure they are up to date.
- Where ever possible West Midlands Regional policies, procedures and guidance will be adopted to support a consistent approach across the region.
- Strategies, policies and procedures will be publically available and supported by training and briefings.

OUTCOME BY 2021

- Key strategies and all publications are co-produced.
- Policies, procedures, guidance and protocols are outcome focused and person centred.
- Strategies, policies and procedures will be regional, accessible and easily available.

5.7 Strategic Plan and Annual Report

The Care Act 2014 s43 (5) Schedule 2-s3 & s4 requires Safeguarding Adults Board to publish each year an Annual Report and Strategic Plan. The Care and Support Statutory Guidance issued under the Care Act 2014 by the Department of Health sets out how these documents should be developed and what they should include 14.152 – 14.161.

In practice this means:

- The SABs Annual Report will report on what adults who have experienced the process say and the extent to which the outcomes they wanted have been realised.
- An Easy to Read Executive Summary of the Annual Report will be produced.
- The SAB's Strategic Plan will be informed by consultation with Healthwatch and will involve the local community.

OUTCOME BY 2021

- The SABs Annual Report will routinely report on what adults who have experienced the process say and the extent to which the outcomes they wanted have been realised. Case studies will be used throughout the Report and an Easy to Read Executive Summary will be produced.
- The SAB's Strategic Plan will be informed by consultation with Healthwatch and will involve the local community.

5.8 New approaches

In 2010 the Local Government Association and Association of Directors of Adult Social Services launched a national programme – Making Safeguarding Personal which aimed to promote a shift in culture and practice in response to what we know about what makes safeguarding more or less effective from the perspective of the person being safeguarded. This programme has seen Local Authorities from across England taking a more a more creative approach to responding to safeguarding situations may help to resolve situations more satisfactorily and possibly more cost effectively.

Solihull has and continues to participate in the Local Government Association and Association of Directors of Adult Social Services national programme Making Safeguarding Personal.

In practice this means:

- Solihull will continue to learn from national projects and initiatives and will be open to considering new approaches.

OUTCOME BY 2021

- SSAB sub-committees will each year consider at least one new approach and make recommendations to the partnership on its suitability for implementation in Solihull.



Discriminatory abuse

Policy drivers for service user and carer involvement and engagement

Government guidance **Creating Strong Safe and Prosperous Communities** (July 2008) outlines the role of the local authority with its local strategic partnership partners is to “Exercise a leadership and governing role through identifying and articulating the needs and aspirations of local communities and reconciling or arbitrating between competing interests”.

Citizen involvement should be pursued where there is real scope and opportunity for them to influence decisions or become clearly actively involved in creating a co-producing ethos.

“Systematically and rigorously finding out what people want and need from their services is a fundamental duty of both the commissioners and the providers of services. It is particularly important to reach out to those whose needs are greatest but whose voices are often least heard” (‘Our Health Our Care Our Say’ – Department of Health, 2006)

Guidance set out in **Putting People First** (2007), a shared ambition to put people first through radical reform of public services, enabling people to live their own lives as they wish, confident that services are of a high quality, are safe and promote their own individual needs for independence, well-being and dignity. Putting people in the centre of transformation offers whole system change and not about change at the margins. To achieve this all stakeholders will need to work in partnership with people who use services and carers.

In the **Caring for our future: Reforming Care & Support** (white paper 2012) and the subsequent draft **Care and Support Bill** (2012) sitting alongside the white paper, the bill being a single, modern law for adult care and support that replaces dozens of existing out-dated separate and complex pieces of legislation. The new system will focus on people’s wellbeing, supporting them to live independently for as long as possible. Care and support will be centered on people’s needs, outcomes they want to achieve, giving them better care and more control over the care they receive.

The transformation envisaged by **Caring for Our Future** will come about only if it is a genuinely collaborative endeavor. We need to dissolve the traditional boundaries that lie between the third sector, private organisations, local authorities, communities and individuals. And we need to listen. In particular, we need to listen to the voices of those using care and support, their carers, their families and their friends. Their views and their insight will be vital if we want to get this right – now and in the decades to come.

Making It Real; Marking progress towards personalised, community based support (October 2011); with the wider Think Local Act Personal agenda 2011. Making it real- sets out what people who use services and carers expect to see and experience if support services were truly personalised. They are a set of ‘progress markers’ – written by real people and families – that can help an organisation to check how they are going towards transforming adult social care. The aim of Making It Real is for people to have more choice and control so they can live full and independent lives. Co- production is at the heart of the transformation in social care.

Solihull formally adopted the Making it Real programme approach in March 2013 to increase its engagement, involving and Co-production activity. Cabinet approved the

programme and the Making it Real; supportive tool to facilitate the cultural shift towards more meaningful engagement.

The council as a whole has a duty to involve local people in its decision making and putting people's decisions into practice as set out in the **Local Government and Public Involvement in Health Act** (2007) Local authorities will also have a more significant leadership role to play, shaping the local market and working with the NHS and others to integrate local services. This plan sets out Solihull's intentions and support to such significant change in practice throughout its business.

Think Local Act Personal; Making it Real - The markers;

- Ensure people have real control over the resources used to secure care and support
- Demonstrating the difference being made to someone's life through open, transparent and independent processes.
- Actively engaging local communities and partners, including people who use services and carers in the co-design, development, commissioning, delivery and review of local support.
- Ensuring that leaders at every level of the organisation work towards a genuine shift in attitudes and culture, as well as systems.
- Seeking solutions that actively plan to avoid or overcome crisis and focus on people within their natural communities, rather than inside service and organisational boundaries.
- Enabling people to develop networks of support in their local communities and to increase community connections.
- Taking time to listen to a person's own voice, particularly those whose views are not easily heard.
- Fully consider and understand the needs of families and carers when planning support and care including young carers.
- Ensuring that support is culturally sensitive and relevant to diverse communities across age, gender, religion, race, sexual orientation and disability.
- Taking into account a person's whole life, including physical, mental, emotional and spiritual needs.



Organisational Abuse

Contact details and links

If you require any further information, please contact the Solihull Safeguarding Adults Board Business Team:-

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