

Strategic Outcomes Framework for Adult Safeguarding

1 Background and Context – From Adult Protection to Safeguarding Adults - The National Perspective

1.1 The duty to safeguard vulnerable adults is enshrined within the Human Rights Act 1998. Everyone has a right to live their lives free from violence and abuse. In preserving this right, public authorities have a duty to intervene proportionately to protect the rights of citizens. These rights are contained within:

- Article 2 – ‘the right to life’;
- Article 3 – ‘freedom from torture (including humiliating and degrading treatment)’; and
- Article 8 – ‘right to family life (one that sustains the individual)’

1.2 Any adult at risk of abuse or neglect should be able to seek help from public services so that they can live their lives safely in accordance with the principles outlined in Para 1.1. Public services should work together so that vulnerable adults have access to a range of services that can offer prompt and effective protection to guarantee their immediate safety. Additionally, appropriate action must be taken to change the behaviour of abusers and to tackle systemic or institutional failings to prevent the continued abuse of vulnerable adults.

1.3 This means that individuals should have immediate access to the wide range of services and institutions that exist to protect all citizens. This included access to appropriate social care services charged with investigating abuse cases, the civil and criminal justice system and to victim support services. There can be no justification under any circumstances for the abuse of a vulnerable person *‘Abuse is a violation of an individual’s human and civil rights by any other person or persons.’* (‘No Secrets’ DoH 2000)

1.4 Anyone experiencing abuse or neglect is unlikely to remove themselves from the situation or environment in which the abuse is occurring. The very nature of their vulnerability is likely to prevent their escape from an abusive situation. This means that prompt, effective and coordinated action by appropriately resourced public services must be in place, not only to remove the immediate risk to the individual, but also to tackle some of the underlying behavioural and societal factors that have allowed the abuse to develop and continue unchecked.

1.5 The term *‘vulnerable adult’* has multiple definitions. It may no longer be helpful in tackling abuse because one accepted definition: *‘someone who is or may be eligible for community care services’* and within the same group those who *‘were unable to protect themselves from considerable harm’*; seems to

locate the cause of abuse with the victim, rather than placing responsibility with the acts or omissions of others.

1.6 Additionally, since the original publication of 'No Secrets' in 2000, there have been significant legal and policy changes which have led to a change in emphasis where adults are now being supported to access services rather than services intervening to provide protection for an individual citizen. The concept of 'active citizenship' is now taking a central role in preventing risks to independence. This changing context means that many references to the protection of 'vulnerable adults' and to 'adult protection' work are now being replaced by the wider term: 'safeguarding adults'.

1.7 This phrase 'safeguarding adults' means an adult *'who is or may be eligible for community care services'* to retain independence, well being and choice and to access their human right to live a life that is free from abuse and neglect. The definition includes people who are also assessed as being able to purchase all or part of their community care services, as well as those who are eligible for community care services but whose need – in relation to safeguarding – is for access to other mainstream services such as the police. (Safeguarding Adults, 2005)

1.8 Unlike Child Protection work, safeguarding adults work does not take place within a statutory framework. The Association of Directors of Adult Social Services (ADASS) recognises that while there is no statutory framework, there have been significant changes contained in a range of recent legislation that support work to protect individuals who are being abused or neglected – for example the crime of 'familial homicide' (Domestic Violence, Crime and Victims Act 2004), sections 34-44 of the Sexual Offences Act (2003) and the crime of ill treatment or neglect of a mentally incapacitated adult (Mental Capacity Act 2005).

1.9 A key question for further debate involves the need to examine why the ratio of abuse allegations to criminal prosecutions is so poor. Is this because the existing legislation is not sufficient to successfully bring such cases before the criminal courts or are abuse cases considered too difficult to investigate and prosecute because of the vulnerability of the victim and witnesses? These are difficult questions which present challenges for individuals and organisations including social care professionals, health, police and the Crown Prosecution Service. The creation of an effective and dynamic Adult Safeguarding Board can help to address these questions and challenges by helping to put adult safeguarding at the forefront of the agenda across all partner organisations.

1.10 The ADASS has supported the line taken by Action on Elder Abuse (AEA) whose report entitled 'Adult Protection Data Monitoring' (2006) recommended that specific legislation in relation to vulnerable adults should be put before Parliament. ADASS have argued that if legislation is necessary, the following would be essential:

- A duty to Act or investigate;

- A duty to share information between the statutory agencies and Regulators as already exists in children protection work.
- A duty to co-operate (as already exists in children protection work).
- Clarification of the duties and powers of other Local Authorities and Health Agencies across organisational and geographical boundaries
- Powers to enter domestic properties.
- Duties of regulatory bodies to work in partnership with local authorities in identifying and responding to instances of potential abuse and neglect, including institutional abuse and neglect.

1.11 Advantages include clarity on the role of the statutory agencies, affording greater protection to vulnerable adults, empowering staff and potentially accessing resources to support the implementation of the legislation. The Children Act 1989 provides the statutory basis for child protection but processes have been in place for many years to ensure that children are afforded protection from abuse. This very important area has quite rightly been resourced to tackle abuse following a number of tragic and very well publicised child abuse cases. The same cannot be said for the abuse of vulnerable adults.

1.12 The seven social care outcomes also have a significant contribution to make to safeguarding work. The fifth outcome about **'freedom from discrimination or harassment'** makes reference to people who need social care services having equal access to those services without hindrance from discrimination or prejudice. People also need to feel safe and safeguarded from harm. Effective safeguarding also means that vulnerable adults are also able to live their lives free of fear and to enjoy productive and meaningful lives and thus helps to achieve some of the other outcomes like **'improved quality of life'**, being able to exercise more **'choice and control'** and have their **'personal dignity and respect'** assured.

1.13 It should also be noted that there have been significant changes in Mental Health legislation which are likely to bring benefits in the form of additional safeguarding tools that will become available. Briefly, we now have the Mental Capacity Act which has created a statutory framework for substitute decision making for adults who lack capacity. In 2007, the Mental Health Act became law. This Act amends the Mental Capacity Act to introduce the Deprivation of Liberty Safeguards. It also fundamentally changes the Mental Health Act 1983, introducing Supervised Community Treatment Orders, new consent to treatment provisions and new types of workers, such as Approved Mental Health Professionals (AMHP) and Approved Clinicians. Mental Health legislation has become much more complex and will demand from Local Authorities the provision of a workforce that is highly trained and competent and supported by good legal advice to facilitate the delivery services in a safe and defensible manner.

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1.14 Finally, the pattern of service provision, especially in the private residential care sector means that vulnerable adults from one local authority area may often be placed in another local authority area.

1.15 This sets the context for the development of a Strategic Outcomes Framework for Adult Safeguarding. This Framework will help to create the conditions for improved levels of safeguarding for vulnerable adults covering the broad spectrum of vulnerability from adults with learning disabilities to older people.

1.16 The need to develop a coherent and sustainable approach to safeguarding is vital. The abuse of vulnerable adults is still not sufficiently visible on the national or local radar. We know that increased reporting does not reflect a sudden increase in abuse, but we also know that the number of reported incidents is still a real underestimate of the scale of abuse being perpetrated against vulnerable adults.

1.17 Therefore, we need to ensure effective buy-in from all key partners in Health and the public protection agencies to work on the development of a strategic outcomes framework which will focus on the agreement and delivery of shared priorities and integrated action to prevent and tackle abuse in a more systematic and coherent way. Resources allocated for safeguarding and applied in a piecemeal way need to be pooled and targeted for maximum effect in delivering the improved safeguarding outcomes vulnerable people expect and deserve. The creation of effective Safeguarding Boards is a step in the right direction for developing a strategy that key partners can all contribute to and help to deliver. A key role for the Safeguarding Board would then be to oversee the effective delivery of the safeguarding outcomes framework across the partner organisations.

1.18 The Safeguarding Board will develop a clear remit and responsibilities around policy development and implementation, agree protocols for information sharing and to seek agreement on joint funding for initiatives commissioned by the Board. This role should also encompass a general duty to promote good practice, raise public awareness of safeguarding issues and develop an effective leadership role.

2 Safeguarding Vision and Outcomes

2.1 The Adult Safeguarding Board's vision is that:

all adults have a right to live free from fear, violence, harassment, discrimination or abuse and the Board will work tirelessly to ensure this vision becomes a reality for all adults who are or may be at risk of abuse at any point in their lives.

2.2 A key driver for improvement is the development of the seven social care outcomes two of which directly relate to adult safeguarding. Specifically, *'freedom from discrimination and harassment'*, *'personal dignity and respect'* and *'improved quality of life'* all have direct relevance in terms of adult safeguarding. Therefore, it seems sensible to use these high level outcomes, rather than creating new one, but to supplement them through the development of context and locality specific sub-outcomes and performance measures which demonstrate the delivery of those high level outcomes.

2.3 The sub-outcomes and performance measures for each high level outcome is outlined in Table 1 below. The expectation is that the Adult Safeguarding Board would coordinate the achievement of these key outcomes in partner organisations and it is envisaged that all partner organisations would sign-up to them. In effect, the Outcome Framework would describe a 3-year programme of activity which the Safeguarding Board will actively promote within all partner organisations.

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Outcome	Sub-outcomes	Performance Target	How will this be achieved?	By when?	By Whom?
Freedom from Discrimination or Harassment	Increased reporting levels	10% Annual Increase against baseline	<ul style="list-style-type: none"> • Development and implementation of effective Communication Strategy to raise awareness • Implementation of agreed Learning and Development Plan to raise awareness of adult abuse across all partner organisations and stakeholders 		
	Reduced risk to victims	20% reduction in re-offending	<ul style="list-style-type: none"> • Ongoing analysis of adult abuse cases – leading to more effective preventative measures, reveal evidence of systematic failure and targeted interventions to reduce the incidence of abuse • Further development of effective information sharing protocols between all partner agencies • Share learning and best practice from completed investigations in all partner organisations • Develop programme of effective preventative actions to safeguard known high risk individuals or groups e.g. older people and adults with learning disabilities 		

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	More criminal acts brought to justice	5% Annual Increase against baseline	<ul style="list-style-type: none"> Raising knowledge and skills levels among investigators and Police in non-specialist roles through co-ordinated Learning and Development programme Improve partnership working between social care agencies and the criminal justice agencies e.g. Police, Probation and the CPS 		
Maintaining Personal Dignity and Respect	Reducing the risk of institutional abuse or systemic failure	Establish current baseline and set appropriate targets	<ul style="list-style-type: none"> Development of effective contract monitoring processes Improved information sharing and data analysis and targeted interventions Creation of Multi-Skilled Improvement Teams who can parachute into organisations at risk of failure 		
	Improving standards for older people in care settings	Establish current baseline – develop clearly defined standards	<ul style="list-style-type: none"> Adoption of clear standards of good practice Regular and systematic audits against standards 		
	Improved processes for identifying and reducing complaint levels	Complete process improvement/ mapping exercise in Year 1	<ul style="list-style-type: none"> Undertake process improvement exercise in high and medium risk establishments Targeted interventions using Improvement Teams where necessary Regular and systematic analysis of complaints 		

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	Improved satisfaction levels for people in care settings	Establish current baseline and set targets for improving satisfaction levels	<ul style="list-style-type: none">• Establish service user expectations using SERVQUAL framework• Measure quality gaps and link to process improvement work		
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3 Delivery Plans

3.1 The Safeguarding Board will develop and coordinate a three-year work programme. Much of the detailed work will be undertaken by a number of workstream groups as follows:

- **Learning and Development Programmes**– identifying, developing and commissioning the necessary learning programmes to support strategic and operational managers, investigators and support staff and general awareness programmes for partner organisations
- **Partnership and Community Engagement** – raising the profile of adult safeguarding in a wide range of public, private and voluntary organisations in addition to direct engagement with service users and their families to support the achievement of improved safeguarding outcomes
- **Performance Management**– developing and implementing effective performance management systems and learning from best practice providers for adaptation and development in partner organisations
- **Policy Development and Quality Improvement** – ensuring policies reflect the latest thinking and practice on effective adult safeguarding including the regular and systematic review of critical processes and practice
- **Communication and Advocacy**– developing and implementing an effective communication strategy to raise the profile of adult safeguarding work across partner organisations and in local communities – effectively advocating the needs and expectations of vulnerable adults in partner organisations

3.2 The initial 3-Year work programme for the new Safeguarding Board will be to implement the recommendations and action plan from the Strategic Review of Adult Safeguarding which took place in early 2008. This Review recognised the vital leadership role that the Safeguarding Board would need to take in achieving the outcomes in this framework document.

4 Terms of Reference

5 Membership

5.1 The Safeguarding Board's membership will be restricted to senior level representation mainly but not exclusively from the key statutory partner organisations. It is anticipated that there will be an important role for services users and/or their representatives. The proposal is that Board Members have sufficient seniority within their respective organisations to make and implement decisions, allocate funding and champion adult safeguarding in their own organisations. The Board will ensure effective representation from

the other partner agencies and stakeholders on the workstream groups. Representatives on the Board will include:

- Adult Services – Director/Assistant Director and Safeguarding Adults Coordinator
- Health Services – Director/Assistant Director
- Police – Assistant Chief Constable
- CPS – Head/Deputy Head of Service
- Voluntary Sector – Chief Executive
- Service User Representative
- Fire Service – Assistant Chief Fire Officer
- Domestic Abuse Partnership – Co-ordinator

5.2 It is proposed that the Safeguarding Board will have an independent Chair. The Independent Chair will be appointed through a competitive process and will be paid a daily rate for their work on the Board. The Chair will be appointed for a maximum of three years with the key aim of delivering the agreed three year work programme.

6 Frequency of Meetings

6.1 The Board will meet monthly during its first year of operation to ensure the work program remains on schedule. Progress will be reviewed at the end of the first year and, depending on the level of success, the frequency of meetings may be reduced to at least 4 times/year for subsequent years.