



Norfolk Safeguarding Adults Board Manager's Blog

March 2017

Celebrating World Social Work Day

Tuesday 21st March is [World Social Work Day](#). In my role as NSAB board manager I have the privilege to work alongside so many different people, including social workers, all of whom are helping take forward our safeguarding adults work for Norfolk.

Social workers, often a profession which has come in for harsh criticism in the past, play an important role in the safeguarding process. In Norfolk we have specialist adult social workers in our [Multi-Agency Safeguarding Hub \(MASH\)](#) and a **Safeguarding Adults Practice Consultant (SAPC)** in each of the five localities across the county.

To acknowledge and celebrate the work of social workers on [World Social Work Day](#), here is a flavour of the work I have seen our SAPC doing at first hand to tackle abuse and harm of vulnerable adults in Norfolk. If you haven't made friends with your SAPC yet, do seek them out via our [locality safeguarding adult partnerships](#). Here is a day in the life of an SAPC ...

8am

Answer emails and phone messages from Social Care staff about adults who appear to need a referral under the Care Act (2014), or Community and Hospital Health staff to ensure Section 42 (S42) enquiries are raised appropriately. Respond to requests for advice with existing safeguarding cases, questions around the referral process, and invitations to attend meetings relating to high risk or other safeguarding situations.

Review missing persons information that Police have shared in the MASH mailbox, establishing those who are known to Social Services in order to offer support to Police. Consider any onward referrals that may be required. Keep up to date with **information and alerts** about care providers in our locality, helping to identify any patterns that may indicate a larger concern.

9am

Meeting with **Police, Children's Services, Health, Domestic Violence Teams Probation and the Matrix**, to discuss safeguarding cases that have been come up since 5.30pm the previous day.

10am

Complex S42 enquiry. Visit the provider environment where someone recently died, meet the other service users, and discuss in detail with the provider the events that occurred, alongside a health safeguarding colleague. Meeting is quite intense. Spend another 30 minutes discussing meeting and other ongoing cases afterwards with my health colleague – it's good to have an opportunity to catch up.

1pm

Back in the office. Review 17 new emails and return several phone messages that have come in. **Speak to workers from three different social care teams in Social Care (SAC) locality**, each with a concern or update around cases they are working on. Work together to identify what the safeguarding aspects are, what the individuals want to happen, what options are available. Outcome is that situations can be managed outside of the formal safeguarding process, but all three calls are logged as consultations where we set out the rationale for the intended next steps.

Telephone call with the mother of the person who died in the service I visited this morning. This is a difficult call: I need to listen, understand and take forward the concerns she raises, while remaining as impartial as possible and considering the available facts as I must in my role. Reassure her that her concerns will be considered and I will update her about the enquiry progress as soon as I can. End the call knowing that I can never achieve the true outcome she would like, which is for her relative to still be alive.

2pm

Quick sandwich, followed by **joint care home visit with NHS/CCG Safeguarding Lead**, after urgent admission to hospital of a service user. The care home raised the referral, after suspending members of staff for not responding to the person's care needs. Discover there is no documentation/care plans for insulin-dependent service users. Liaise with Police regarding whether a crime has been committed. Service user remains critically ill in hospital.

3pm

Attend Professionals Meeting that was already scheduled at same Care Home which is dual registered that afternoon to discuss ongoing safeguarding concerns, and update on previous night's referral. Attendees include GP, Practice Manager another GP Surgery, QA Manager, Safeguarding Lead for Health, District Nurse Lead for that particular home, Manager of Home, Care Quality Commission and Regional Operational Lead for the Provider Organisation. Meeting discusses all areas of concern and actions being taken.

4.30pm

Meeting with Level 1 Safeguarding Adults Practice Consultant worker to discuss next steps for her progression to Level 2.

5.30pm
Home

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21 March 2017