

# Safeguarding Adults Review Adult P Multi Agency Action Plan

Norfolk Safeguarding Adults Board – Version 1 | 01-02-2024

#### Note regarding presentation of recommendations

- 1.1. Norfolk Safeguarding Adults Board (NSAB) has adopted a framework for thematic learning during Safeguarding Adults Reviews, with recommendations being presented in one of five categories:
  - Professional Curiosity
  - Fora for Discussion and Information Sharing
  - Ownership and Accountability: Management Grip
  - Collaborative Working and Decision Making
  - Managing Risk, Uncertainty and Mental Capacity,
     [Note this is a theme which underpins all the above, but specific learning against this theme is derived below].

These categories are all to be influenced by the lived experience of the adult.

Recommendation 1	NSAB to oversee the development of a briefing document and an effective countywide response, based on the learning from this review regarding cuckooing with the aim to support appropriate identification and responses by professionals and agencies.  This work will be led by the Norfolk Safeguarding Adults Board Business Group and linked to ongoing work on exploitation and county lines. The document will include signs and symptoms, and how to raise concerns. This briefing should be used as widely as possible, including via the Locality Safeguarding Adults Partnerships (LSAPs).  [TLF category: Professional Curiosity]  Note – work on this action is to be linked with a recommendation from SAR S yet to be published.			
NSAB Strategic Response: What difference do we expect to see?	<ul> <li>A recognised route for professionals to refer potential cases of cuckooing, for multi-agency discussion and appropriate action</li> <li>Greater awareness across professionals and public as to the signs and symptoms of cuckooing and where to refer cases to/obtain support</li> </ul>			
Owner	Action: What are we expecting to see	Timescale	Progress/Evidence/Impact	Completed
NSAB Business Group	<ul> <li>1.1 Establish a task &amp; finish group to define and map out what an effective county response looks like</li> <li>1.2 Produce support material as felt necessary</li> </ul>			

Recommendation 2	Assistive Technology team to lead on the development of a Norfolk County Council wide service level agreement, across all community alarm providers that Norfolk County Council work in partnership with by August 2023. This SLA will be shared with other Norfolk housing providers, where appropriate. Assistive Technology will also lead on the development of support for individuals, to share their information about their needs and vulnerabilities with their care alarm provider.  [TLF category: Ownership & Accountability: Management Grip]			
NSAB Strategic Response: What difference do we expect to see?	<ul> <li>Countywide service level agreement is in place and being utilised to support the effective delivery of safe services</li> <li>A process is in place which support individuals to share details of needs to their care alarm provider.  The percentage of those declining to share their needs information with their care alarm provider is declining year on year</li> </ul>			
Owner	Action: What are we expecting to see	Timescale	Progress/Evidence/Impact	Completed
NCC Assistive Technology Service Manager	2.1 Workshop with Norfolk's community alarm providers to develop agreed 999 response protocol (as pre-runner to service level agreement)	End of July 2023	Workshop held. Complete July 2023	
	2.2 Draft service level agreement created (SLA).  NB this has been informed by revision of the Tec Services Association (TSA) national quality standards framework for community alarm providers. The quality standards to be launched at the	01 March 2024	Copy to be shared with NSAB – providing clear evidence of the changes to the SLA, ensuring information about individuals needs are captured.	

	TSA national conference on 18 March 2024.  2.3 Norfolk County Council service level agreement with Norfolk's community alarm providers is in place	30 March 2024	Copy to be shared with NSAB	
Recommendation 3	Assurance that Careline365 will review and amend its policy in consultation with TEC Quality with a view to continuing to attempt to make contact with an individual following a non-response call until a resolution is achieved. [TLF category: Ownership & Accountability: Management Grip]			
NSAB Strategic Response: What difference do we expect to see?	Careline365 is working to a policy which requires call handler to continuing to attempt to make contact with an individual following a non-response call until a resolution is achieved – ensuring there is a clear route for escalation			
Owner	Action: What are we expecting to see	Timescale	Progress/Evidence/Impact	Completed
Head of Strategic Partnerships, Careline365	3.1 Copy of policy shared with NSAB	31/12/2023		

Recommendation 4	Housing providers and district councils to review the approach, which ensures a more effective handover of background and safety information, particularly for high-risk clients when they move between providers. Success to be measured through either introduction of an updated policy or confirmation through dip sample audit that current process, if followed, is fit for purpose.  [TLF category: Ownership & Accountability: Management Grip]			
NSAB Strategic Response: What difference do we expect to see?	Current, appropriate information r district councils and housing provi	<u> </u>	clients (particularly high risk) is	s shared between
Owner	Action: What are we expecting to see	Timescale	Progress/Evidence/Impact	Completed
Chair of District Council Safeguarding Group (DCSG)	4.1 Development of protocol – task and finish group set up spring 2024. Nomination from ASSD to support the group.	Raised and discussed in Housing Alliance in March 2024.	Copy of protocol is shared with NSAB	
	4.2 Agree protocol	June 2024		
	4.3 Promote protocol to both housing providers and district councils	Post June		
	4.4 Nine months after protocol has gone 'live' to complete dip sample audit of cases	Dip sampling complete and report to Housing Alliance, March 2025	Results of dip sample audit are presented to NSAB by the chair of District Council Safeguarding Group	

Recommendation 5	Norfolk and Waveney Integrated Care Boards lead on the further development and embedding of the 'was not brought' policy across health providers - NHS England guidance [TLF category: Ownership & Accountability: Management Grip]			
NSAB Strategic Response: What difference do we expect to see? Owner	"Was not brought" policy that is ender an individual and to take the most Action: What are we expecting to see		•	ng the level of risk to  Completed
Named GP for adult safeguarding	<ol> <li>Development and publication of an NHS NW ICB 'was not brought' policy</li> <li>Policy disseminated to all GP practices in March 2023. Planned review date is March 2024.</li> </ol>	March 2023	A summary report to NSAB from ICB, six months and one year after publication, showing policy is embedded and evidence it is being used by health providers.  Evidence: A feedback survey was sent out to GP practices in December 2023. While only a small number of returns was received, these did evidence the benefit.	

Recommendation 6	The local authority and Norfolk Constabulary to review their systems for quality governance around the recording of Section 42 enquiries, to ensure that there is a mechanism in place to monitor investigations that take too long or become stuck, and also that practitioners update partner agencies when one agency's involvement in a case comes to an end. They should undertake a dip sample audit of enquiries over a 12-month period to check if all had been actioned or closed appropriately, using their own policy standards, with the audit completed within nine months of publication of the SAR report.  [TLF category: Ownership & Accountability: Management Grip]			
NSAB Strategic Response: What difference do we expect to see?	The number of protracted investigations is reduced wherever humanly possible (acknowledging that some delays are dependent on factors outside both agencies control)			
Owner	Action: What are we expecting to see	Timescale	Progress/Evidence/Impact	Completed
Head of Service - Safeguarding ASSD  T/Detective Superintendent Safeguarding and Investigations Command Norfolk Constabulary	<ol> <li>Establish a method to review effective recording of s42</li> <li>To agree a definition for a trigger point action when investigation take too long</li> <li>To ensure there is a mechanism in place to update partner agencies when one agency's involvement has come to an end</li> </ol>	3 months from date of publication	To provide evidence of (1), (2) and (3) to NSAB six months after publication of the report	
	4) To carry out a dip sample audit	12 months from date of publication	To provide a summary Evidence of Impact (EOI) report to NSAB, one month after completing the audit	

#### Initialisms used in this plan:

ASSD Adult Social Services Department

CQC Care Quality Commission

EEAST East of England Ambulance Service NHS Trust

GPs General practitioners

NHSNW ICB NHS Norfolk and Waveney Integrated Care Board

MoU Memorandum of Understanding

NCC Norfolk County Council

NSAB Norfolk Safeguarding Adults Board

IQA Integrated Quality Assurance Team

SAPC Safeguarding Adults Practice Consultant

TF Thematic framework