

Committee Agenda

Title:

Cabinet

Meeting Date:

Monday 14th December, 2020

Time:

7.00 pm

Venue:

This will be a Virtual Meeting

Members:

Councillors:

Rachael Robathan David Harvey (Chairman) Tim Mitchell Heather Acton Andrew Smith Timothy Barnes Paul Swaddle

Melvyn Caplan Matthew Green

This will be a virtual meeting and members of the public and press are welcome to follow the meeting and listen to discussion to Part 1 of the Agenda.



This meeting will be live streamed and recorded. To access the recording after the meeting please revisit the link. Participation through written representations is welcomed.



If you require any further information, please contact the Committee Officer, Reuben Segal, Head of Committee and Governance Services.

Email: rsegal@westminster.gov.uk; Tel: 07890 380137

Corporate Website: www.westminster.gov.uk

Note for Members: Members are reminded that Officer contacts are shown at the end of each report and Members are welcome to raise questions in advance of the meeting. With regard to item 2, guidance on declarations of interests is included in the Code of Governance; if Members and Officers have any particular questions they should contact the Director of Law in advance of the meeting please.

AGENDA

PART 1 (IN PUBLIC)

1. MEMBERSHIP

To note any changes to the membership.

2. DECLARATIONS OF INTEREST

To receive declarations by Members and Officers of the existence and nature of any pecuniary interests or any other significant interest in matters on this agenda.

3. MINUTES (Pages 3 - 4)

To approve the minutes of the meeting held on 28 October 2020.

4. COUNCIL TAX DISCOUNTS (INCLUDING COUNCIL TAX LOCAL REDUCTION SCHEME) AND COUNCIL TAX BASE REPORT

(Pages 5 - 20)

Report of the Executive Director of Finance & Resources

5. ANNUAL REPORT OF THE SAFEGUARDING ADULTS EXECUTIVE BOARD 2019-20

(Pages 21 - 68)

Report of the Bi-Borough Executive Director of Adult Social Care and Health Services

Stuart Love
Chief Executive
4 December 2020



MINUTES

Cabinet

MINUTES OF PROCEEDINGS

Minutes of a virtual meeting of the Cabinet held on Wednesday 28th October, 2020

Members Present: Councillors Rachael Robathan (Chairman), Heather Acton, Timothy Barnes, Melvyn Caplan, Matthew Green, David Harvey, Andrew Smith and Paul Swaddle

Apologies for Absence: Councillor Tim Mitchell

- 1 MEMBERSHIP
- 1.1 There were no changes to the membership.
- 2 DECLARATIONS OF INTEREST
- 2.1 There were no declarations.
- 3 MINUTES
- 3.1 That the minutes of the meeting held on 12 October 2020 be signed by the Chairman as a correct record of the meeting.
- 4 MEDIUM TERM FINANCIAL PLAN 2021/22 TO 2023/24 UPDATE REPORT
- 4.1 The Leader of the Council invited Councillor Melvyn Caplan, Cabinet Member for Finance, Property and Regeneration to introduce the item.
- 4.2 Councillor Caplan provided an update on the medium-term financial plan over the next three years as set out in the report following Cabinet's consideration of this in July. He advised that initial service efficiencies of £5.6m had been identified which would contribute to the identified £90m of savings that would need to be made over the next three years. With reference to paragraph 5.1 of the report which set out the council's financial position at period 5 (August 2020) he advised that the table was now out of date as the council had, last Thursday received just under £10m of additional grant money from the government in recognition of the cost pressures and loss of income linked to the pandemic. This will further help reduce the deficit for this financial year.

He stated that the council would ask the government for additional funding as required.

- 4.3 Gerald Almeroth, the Executive Director of Finance and Resources, summarised the savings approach and proposals which were set out in section 7 of the report. He explained that the council is taking a multi-faceted approach to identify savings proposals and highlighted that the £5.6m savings identified to date will be delivered through management efficiencies and are in the main not policy changes. He stated that where appropriate on individual savings proposals, equality impact assessments and consultations will be carried out.
- 4.4 The Leader of the council thanked Councillor Caplan and the Executive Director for Finance and Resources for their work on addressing the financial pressures in this financial year.

RESOLVED:

That Cabinet:

- 1. Noted the financial planning update including the latest government funding position.
- Approved the savings proposals listed in Appendix 1 to the report, subject to equalities impact assessments and consultation requirements where appropriate.
- 3. Noted the approach to identifying further savings for 2021/22 to 2023/24.

Reason for Decision:

The Meeting ended at 6.12 pm

The preparation of the budget and three-year medium-term financial plan is the first stage of the annual business planning cycle for the forthcoming financial year 2021/22. There is a statutory requirement to set a balanced budget and submit budget returns to the Ministry of Housing, Communities and Local Government (MHCLG). Approval of the revenue estimates constitutes authority for the incurring of expenditure in accordance with approved policies.

CHAIRMAN:	DATE	



Cabinet Report

Date: 14 December 2020

Classification: General Release

Title: Council Tax Discounts (including Council Tax

Local Reduction Scheme) and Council Tax Base

report

Report of: Executive Director of Finance & Resources

Cabinet Member Portfolio: Cabinet Member for Finance, Property and

Regeneration

Wards Affected: All

Policy Context: Statutory duty to set and collect Council Tax

Key Decision: Yes

Financial Summary: The report proposes that:

The Council Tax discount for second homes remains at 0%

 The Council Tax discounts for empty properties, including the discounts that replaced the previous Class A and C Council Tax exemptions, remains at 0%.

- A Long-Term Empty Property Premium is continued at the maximum level allowed for by central government legislation.
- The Director of Revenues and Benefits is authorised to determine any individual local discount requests in 2021/22 under Section 13A(1)(c) of the Local Government Finance Act 1992.
- The Council Tax Base is set at 133,817.98
 equivalent Band D properties for 2021/22 for
 the whole City, 100.40 equivalent band D
 properties for Montpelier Square and 3,514.63
 equivalent band D properties for Queen's Park.
- The existing Council Tax Local Reduction Scheme is retained for 2021/22.

1. Summary

- 1.1 The Local Government Act 2003 provided local authorities with discretion in relation to the level of Council Tax discount for specific categories of Council Tax properties, namely second homes and long-term empty properties. The Local Government Finance Act 2012 which came into effect in April 2013 removed several Council Tax empty property exemptions and replaced them with locally determined discounts. The Act also enabled local authorities to remove the minimum 10% discount for second homes and to set a local Long-Term Empty Property Premium.
- 1.2 This report recommends retaining the same level of Council Tax discounts in 2021/22 as were set in 2020/21.
- 1.3 The report recommends that the Council continue to charge a Long-Term Empty Property Premium in 2021/22 at the maximum level allowed for by the current legislation.
- 1.4 The Welfare Reform Act 2012 and Local Government Finance Act 2012 replaced the Council Tax Benefit scheme with a locally determined Council Tax Reduction Scheme (also known as a local Council Tax Support Scheme), which is effectively now a type of Council Tax discount. The recommended scheme for 2021/22 is a continuation of the scheme that was originally set by the Council in 2013/14.
- 1.5 The Council Tax Base is calculated in accordance with a nationally prescribed formula and represents the equivalent number of Band D properties within the area. The formula takes account of the number of properties in each band, the number of discounts given for single occupiers, empty dwellings, second homes and other eligible criteria, the prescribed proportions to convert numbers to Band D equivalents, and the estimated collection rate. The relevant regulations were changed from 1 April 2013, to enable the taxbase calculation to include a deduction for the equivalent number of Band D properties relating to the local authority's Council Tax Reduction Scheme. The Council Tax Base must be determined and be notified to the Greater London Authority (GLA) and other levying and precepting bodies. As in the past, these notifications must be made by 31 January.
- 1.6 The calculations as detailed in Appendices 1 and 2 confirm a figure of 133,817.98 equivalent Band D properties for the whole City, 100.40 Band D equivalent properties for Montpelier Square and 3,514.63 Band D equivalent properties for Queens Park. The Queen's Park Community Council was created on 1st April 2014 under the Council's Reorganisation of Community Governance Order 2013. The Queen's Park Community Council is a minor precepting authority for the purposes of Part 1 of the Local Government Finance Act 1992.

1.7 The taxbase calculation assumes that the recommendations in the report in relation to the level of Council Tax discounts and the Council Tax Reduction Scheme are adopted.

2. Recommendations

- 2.1 That the Cabinet recommend that the Council approve the following recommendations for the financial year 2021/22:-
 - (i) that the Council Tax discount for second homes remains at 0%
 - (ii) the Council Tax discounts for empty properties, including the discounts that replaced the previous Class A and C Council Tax exemptions, remain at 0%.
 - (iii) that a Long-Term Empty Property Premium continues at the maximum percentage allowed for by the current legislation, which is for 2021/22:

- Properties empty between 2 years - 5 years: 100% Increase

- Properties empty between 5 years – 10 years: 200% Increase

- Properties empty over 10 years: 300% Increase

- (iv) that the Director of Revenues & Benefits be given delegated authority to determine any individual local discount applications received from Council Taxpayers during the 2021/22 financial year under section 13A(1)(c) of the Local Government Finance Act 1992.
- 2.2 That the Cabinet recommend that the Council approve the same Council Tax Reduction Scheme for 2021/22 which has operated successfully since 2013/14. The scheme is based on the Default Scheme Regulations, updated to reflect changes made via the Prescribed Requirements Amendment Regulations and with War Disabled Pensions, War Widow, Pensions and Armed Forces Compensation scheme payments disregarded in full when calculating a claimant's income.
- 2.3 That the Cabinet recommend to the Council to resolve that the Council Tax Base for 2021/22 for the Whole City is 133,817.98 equivalent Band D properties, for Montpelier Square alone 100.40 equivalent Band D properties and for Queen's Park 3,514.63 equivalent Band D properties.
- 2.4 That the Cabinet recommends to the Council to resolve that the figures set out in paragraph 2.3 above for the Council Tax Base for 2021/22 be used by the Council to make a determination pursuant to the requirements of the Local Government Finance Act 1992.

3. Council Tax Discounts

3.1 Legislation

- 3.1.1 The Local Government Act 2003 provided local authorities with discretion in relation to the level of Council Tax discount for specific categories of Council Tax properties, namely second homes and empty properties. It also made provision for a local authority to set its own "local" Council Tax discount categories.
- 3.1.2 The Local Government Finance Act 2012 which came into effect in April 2013 removed several Council Tax empty property exemptions and replaced them with local determined discounts. The Act also enabled local authorities to remove the minimum 10% discount for second homes and to set a Long-Term Empty Property Premium.
- 3.1.3 The Welfare Reform Act 2012 and Local Government Finance Act 2012 replaced the Council Tax Benefit scheme with a locally determined Council Tax Reduction Scheme (also referred to as a local Council Tax Support scheme), which is effectively now a type of Council Tax discount.

3.2 Second Homes

- 3.2.1 A second home in Council Tax terminology is a furnished property which is noone's sole/main residence.
- 3.2.2 The original Council Tax legislation prescribed that all local authorities had to give a discount of 50% for "second home" properties. However, the Local Government Act 2003 provided local authorities with the discretion to change the level of discount to less than 50% but set a minimum discount level of 10%. The Local Government Finance Act 2012 subsequently allowed the minimum discount to be reduced to 0%.
- 3.2.3 The relevant regulations include exclusions to the local authority discretion in relation to second home properties. The main exclusion being that local authorities are not able to amend the level of discount for the second homes of people who are liable for Council Tax on a property that is provided by an employer (tied accommodation). This means that the Council must continue to give a 50% discount for second homes meeting this criteria. A local authority also cannot amend the 50% level of the second home discount for any dwelling that consists of a pitch occupied by a caravan, or a mooring occupied by a boat.
- 3.2.4 For each financial year since 2013/14 the City Council has decided that the second home discount should be set at 0%. It is recommended that the City Council retains the same 0% discount in 2021/22, as a decision to set a higher level of discount would reduce the Council's income.

3.3 Empty Properties

3.3.1 Prior to 1 April 2013, all Council Tax empty properties fell under one of the following three categories: -

- Class A Exemption

If the property was empty and subject to major repair works / structural alterations, it was exempt from Council Tax for 12 months.

- Class C Exemption

An exemption from Council Tax was granted for the first 6 months after a property became empty.

- Long-Term Empty Property Discount

This was a locally determined Council Tax discount for the period after a Class A or Class C Exemption had expired. The Council had set a 0% discount level which meant that the owners paid the full Council Tax charge.

- 3.3.2 The Local Government Finance Act 2012 amended the relevant legislation so that the statutory exemptions referred to above (Class A and Class C) were replaced by locally determined discounts from 1 April 2013.
- 3.3.3 Since the 2013/14 financial year the City Council has determined that a 0% discount should be set for:
 - a) The empty property discount which replaced the Class A exemption
 - b) The empty property discount that replaced the Class C exemption
 - c) The empty long-term property discount
- 3.3.4 It is recommended that the City Council retains the same 0% discount for each of the three categories of empty property discount referred to in 3.3.3. The recommendation being based on the fact that any increase in the level of discount will reduce the Council's income.

3.4 Long Term Empty Property Premium

3.4.1 The Local Government Finance Act 2012 allows local authorities to set a Long-Term Empty Property Premium for properties that have been empty for at least 2 years. The premium is currently (for 2020/21) set at 100% of the normal Council Tax for properties that have been empty between 2 years – 5 years and 200% of the normal Council Tax for properties that have been empty over 5 years.

- 3.4.2 The Rating (Property in Common Occupation) and Council Tax (Empty Dwellings) Act 2018 allowed local authorities to increase the Premium between 2020/21 and 2021/22 as outlined in paragraph 3.4.4.
- 3.4.3 The current 100% premium on the Council's 116 properties that have been empty between 2 years and 5 years provides around £65K per annum in additional Council Tax income. The current 200% premium on the Council's 62 properties that have been empty over 5 years provides a further £85K per annum in additional Council Tax income.
- 3.4.4 The Rating (Property in Common Occupation) and Council Tax (Empty Dwellings) Act 2018 amends the maximum premium level for 2020/21 and for 2021/22 as below:

2020/21 - implemented

Properties empty between 2 years - 5 years: 100% Increase Properties empty over 5 years: 200% Increase

2021/22 - recommended

Properties empty between 2 years - 5 years: 100% Increase Properties empty between 5 years - 10 years: 200% Increase Properties empty over 10 years: 300% Increase

- 3.4.5 There are only 17 (out of the 62 properties which have been empty for over 5 years) that have been empty for more than 10 years. The recommendation is to increase the premium for these properties in 2021/22 to the new maximum of 300%. This will deliver around £11K in additional income above the level that would have been raised under the 2020/21 maximum levels.
- 3.4.6 The Council considers that a decision to implement the maximum Premium aligns with the Council's current City for All agenda and the Council's aim of a fairer Council Tax system for all residents.

3.5 **Local Council Tax Discounts**

- 3.5.1 Section 13A of the Local Government Finance Act 1992 allows a local authority the discretion to create its own "local" Council Tax discounts for local situations which are not already covered by the national statutory discounts. The government's guidance gives the example of a local discount for properties affected by flooding.
- 3.5.2 Local discounts granted under Section 13A (I) (c) must be fully funded by the local authority.
- 3.5.3 It has been determined for each financial year since 2013/14 that the Director of Revenues & Benefits would be authorised to determine any individual applications from residents requiring additional assistance under the Local Discount provisions. In 2019/20 there were 79 approved applications (including 26 Care Leaver applications) totalling £26.6K. It is recommended

- that the delegation to the Director of Revenues and Benefits to determine individual applications is retained for 2021/22.
- 3.5.4 The current pandemic is likely to result in some increase in the volume of Section 13A awards in 2020/21 and 2021/22. However, in addition the government has asked local authorities to use the Section 13A legislative provision to "Top-up" Council Tax Support (CTS) claimants CTS awards by up to £150 where the claimant is not in receipt of a full 100% CTS award (i.e. the resident had a balance to pay on their Council tax account). This effectively is not a discretion as all local authorities are required to make the awards.

3.6 Council Tax Reduction Scheme

- 3.6.1 The Local Government Finance Act 2012 replaced the Council Tax Benefit scheme with a new locally determined Council Tax Reduction Scheme (also known as a local Council Tax Support scheme) from April 2013. This is effectively now a Council Tax discount.
- 3.6.2 Each local authority is required to annually set a local Council Tax Reduction scheme for working age claimants. The government continues to operate a statutory national scheme for pensioners, which provides them with broadly the same level of Council Tax Support as they received under the previous Council Tax Benefit scheme but has been adjusted by the government since its introduction to incorporate a number of welfare reform initiatives.
- 3.6.3 The local Council Tax Reduction scheme was initially funded through a specific central government grant set at 90% of each local authority's Council Tax Benefit expenditure. The government funding since 2014/15 has been rolled into the government's overall funding settlement and due to the overall cuts in funding for local government effectively increases the initial 10% funding reduction.
- 3.6.4 Since 2013/14, the City Council has agreed a Council Tax Reduction scheme which mirrored the previous Council Tax Benefit scheme, i.e. the City Council absorbed the government's 10% funding cut and did not pass the cut on to the borough's working age claimants. Technically this means that the original Council Tax Reduction Schemes (Default Scheme) Regulations are mirrored within the City Council's local scheme, with the addition that rates used to calculate the discount are uprated each year, and War Disabled Pensions, War Widow, Pensions and Armed Forces Compensation scheme payments are disregarded in full when calculating a claimant's income.
- 3.6.5 It is recommended that the Council should retain the same Council Tax Reduction Scheme in 2021/22.
- 3.6.6 The Council has in previous years conducted two consultations on the Council's website in relation to the Council Tax Reduction scheme. The results were limited, but the vast majority of responses were positive.

3.6.7 There is no statutory requirement to consult residents where there is no significant change to a Council's existing scheme.

4. Council Taxbase

4.1 Background

4.1.1 The Council is required for Council Tax purposes to notify the preceptors and levying bodies of the Council Tax Base.

4.1.2 The position is that: -

- a) the Council must approve and notify the preceptors and levying bodies of the Council Tax Base by 31 January each year,
- b) the appropriate figure must be calculated using the Valuation List and Council Tax records as at 30 November.

4.2 The Calculation of the Taxbase

- 4.2.1 The calculation of the Council Tax Base is by way of a statutory prescribed formula, which is set out at Appendix 1. The legislative changes relating to the Council Tax Reduction scheme resulted in a change to the formula for 2013/14 onwards (The Local Authorities (Calculation of Council Tax Base) (England) Regulations 2012). The change being that an estimate of the number of Band D equivalents relating to the Council Tax Reduction scheme has to be deducted from the overall taxbase. This amendment means that local authority taxbases from 2013/14 onwards are significantly lower than in previous years. However, the reduction was initially compensated for by a new Council Tax Support grant, which the government calculated based on 90% of the Council's previous Council Tax Benefit expenditure. The grant has subsequently been rolled into the government's overall funding settlement.
- 4.2.2 Appendix 2 shows details of the distribution of properties by Band, and the calculated equivalent Band D properties (known as the "relevant amount") within each Band after applying the formula.
- 4.2.3 To calculate the Council Tax Base the "relevant amount" figures for each Band have been aggregated and then adjusted to take account of the estimated collection rate and Ministry of Defence properties. The estimated collection rate used in the calculation for 2020/1 was increased to 97% from 96% in the previous year. It is recommended that this percentage should revert back to 96% for 2021/22 due to the likely on-going reduction in collection rates nationally arising from the pandemic and the associated difficulties in accurate forecasting.

- 4.2.4 The Council Tax Base is calculated, for the whole of the City for 2021/22 as 133,817.98 equivalent Band D properties, for Montpelier Square 100.40 equivalent Band D properties and for Queens Park is 3,514.63 equivalent Band D properties.
- 4.2.5 The Tax Base calculation assumes that the recommendations in this report in relation to the level of Council Tax discounts (including the Council Tax Reduction Scheme) are approved.

5 Financial Implications

- 5.1 The 2021/22 tax base shows a growth of 0.84% when compared with the 2020/21 tax base. The growth will deliver around £502K in additional Council Tax income in 2021/22 for the Council.
- 5.2 The Council's decision in 2013/14 to implement a Council Tax Reduction Scheme which mirrored the previous Council Tax Benefit Scheme, effectively meant that the Council had to absorb the government's 10% cut in funding for the Council Reduction Scheme arrangements. However, the increased Council Tax income derived from the Council Tax discount changes implemented in 2013/14 more than covered the shortfall. This remains the case in 2021/22.
- 5.3 The Business Rate Retention scheme introduced within the Local Government Finance Act 2012 replaced the previous Formula Grant scheme from 1 April 2013. The Retention scheme Funding Baseline was scheduled to be recalculated for the next planned scheme Reset in 2020. However it has recently been announced that the government's Fair Funding Review, including the funding baseline, and the review / revision of the national Business Rate Retention scheme will not now take place in time for the 2021/22 financial year. Therefore the changes in the Council's Tax Base will therefore not have an effect on the Council's grant funding position for 2021/22.
- On 1st October 2013 the Council made the City of Westminster (Reorganisation of Community Governance) Order 2013. This created a new parish of Queen's Park from 1st April 2014. The Queen's Park Community Council was elected on 22nd May 2014 and became a precepting authority. The Queen's Park taxbase of 3,514.63 equivalent Band D properties will result in an overall Council Tax income for the Community Council in 2021/22 (based on the existing precept level) of around £163k.

6. Legal Implications

6.1 The legal implications are outlined in the body of the report. There have been no relevant changes in legislation since last year's report.

7 Ward Members Comments

- 7.1 As this report relates to all wards, no Ward Member consultation was required.
- 7.2 The Ward Members for Queens Park were originally consulted as part of the City of Westminster (Reorganisation of Community Governance) Order 2013.

8 Outstanding Issues

8.1 There are no outstanding issues.

9. Reasons for Decision

- 9.1 The taxbase decision is sought in order that the Council complies with the requirements of the Local Government Finance Act 1992.
- 9.2 The retention of the same levels of Council Tax discount, for empty properties and second homes will continue to deliver additional Council Tax income for the Council without disadvantaging any vulnerable members of the community.
- 9.3 The recommendation to allow the Director of Revenues and Benefits to continue to determine any individual local discount claims will enable assistance to be given to individual Council Taxpayers if required, especially as there is no longer the ability for taxpayers to claim Discretionary Housing Payments (DHP) in relation to their Council Tax liability. This will also provide the mechanism for granting the local Council Tax discount for Care Leavers and other vulnerable Council Taxpayers.
- 9.4 The Council's proposed Council Tax Reduction Scheme will mean that the level of Council Tax support provided to the borough's working age claimants will effectively mirror that previously provided under the national Council Tax Benefit scheme.
- 9.5 The recommendation to set the Long-Term Empty Property Premium at the new maximum allowed for within current legislation aligns with the Council's City for All agenda and the Council's aim of a fairer Council Tax system for all residents.

10. Background Papers

10.1 There are no additional background papers.

IF YOU HAVE ANY QUESTIONS ABOUT THIS REPORT PLEASE CONTACT MARTIN HINCKLEY, DIRECTOR OF REVENUES & BENEFITS, ON 07816 215828 OR BY E-MAIL mhinckley@westminster.gov.uk

APPENDIX 1 – Taxbase Formula.

Formula for calculating the Council Tax Base.

For 2021 / 2022 the "relevant amount" for each band is to be calculated in accordance with the formula:

$$((H - Q + E + J) - Z) \times F / G$$

where:

H is the number of chargeable dwellings on the list on the relevant day, (30 November 2020) less an estimate of the number which are exempt.

For these purposes the authority is to take account of any alterations to the list which were shown as having effect on that day, or of any alterations which, though not shown on the list, the authority has been informed of by the Listing officer and had effect on that day. The authority is also to take account of the effect of the regulations under section 13 of the 1992 Act ("disabled reductions"), treating a dwelling as being in the band in respect of which the reduced amount is calculated.

Q is a factor to take account of the discounts to which the amount of council tax payable was subject on the relevant day based on the relevant discount percentage(s).

E is an adjustment to reflect any Council Tax Premium for long term empty properties.

J is an adjustment (positive or negative) in respect of changes in the number of chargeable dwellings or discounts or premiums during the period from the relevant day (i.e. 30 November 2020) to 31 March 2022 calculated as the difference between:

- (i) an estimate of the number of full year equivalent chargeable dwellings not on the list on the relevant day (30 November 2020) but which will be listed in that band for the whole or part of the year, plus
- (ii) an estimate of discounts which are estimated to be applicable on the relevant day, but which will not be applicable for the whole or part of the year, expressed as a full year equivalent number, based on the relevant discount percentage(s).
- (iii) an estimate of the aggregate of the number of chargeable dwellings which are on the list on the relevant day, but which will not be during the year, or part of the year, and the number which are not exempt on the relevant day, but which will be during the year or part of the year, plus
- (iv) the authority's estimate of the number of discounts, other than those in the formula above, to which Council Tax dwellings calculated for item (H) in the formula above, will be subject for the whole or part year (based on the relevant discount percentage (s)).

Z is the total amount that the authority estimates will be applied pursuant to the authority's council tax reduction scheme in relation to the band, expressed as an equivalent number of chargeable dwellings in that band.

F is the amount of Council Tax payable in respect of dwellings situated in the same billing authority's area (or the same part of such an area) and listed in different valuation bands in the following proportions: -

5:6:7:8:9:11:13:15:18

where 5 is for band A (Disabled), 6 is for band A, 7 is for band B etc.

G is the number applicable to band D (i.e. 9).

Full Year Equivalents.

Where an authority estimates that discounts / exemptions etc. will apply for only part of the year, or that the dwelling will only be banded for part of the year, the full year equivalent must be calculated for the purposes of the above formula. This will be the number of days for which the dwelling is banded / exempt etc. divided by the number of days in the year.

Appeals.

For the purpose of calculating the Tax Base an authority may estimate the number of appeals against banding that may have an effect on the number of properties within each band.

Council Tax Base.

In order to calculate the Council Tax Base, the "relevant amount" for each band is aggregated and the sum multiplied by the Council's estimated collection rate. An adjustment is made to this figure in respect of MOD property in the area.

MOD Adjustment.

This adjustment is an amount, estimated to be equivalent to the number of Band D dwellings, in respect of where a contribution in lieu of Council Tax is to be made by the Ministry of Defence for Class O (exempt) dwellings.

APPENDIX 2. - Tax base Calculations for 2021/22

TAXBASE FOR THE WHOLE CITY.

DISTRIBUTION OF PROPERTIES BY BAND AS AT 30.11.20 FOR THE WHOLE CITY.	EQUIVALENT BAND "D" PROPERTIES FOR EACH AFTER APPLYING THE FORMULA	
	((H – Q + E + J) – Z) X F / G	
BAND A: 1,701	BAND A: 939.00	
BAND B: 6,615	BAND B: 4,226.44	
BAND C: 15,793	BAND C: 11,992.89	
BAND D: 22,829	BAND D: 19,881.75	
BAND E: 23,663	BAND E: 25,336.06	
BAND F: 18,527	BAND F: 23,710.92	
BAND G: 23,692	BAND G: 35,621.67	
BAND H: 16,216	BAND H: 30,643.00	
Total: 129,036	Total: 152,351.73	

Less Z - = 13,435.39
X Collection Rate (96%) = 133,359.68
Plus MOD Adjustment + 458.30
-

TAXBASE = 133,817.98

APPENDIX 2.

TAXBASE FOR MONTPELIER SQUARE ONLY.

DISTRIBUTION OF PROPERTIES BY BAND AS AT 30.11.20.	EQUIVALENT BAND "D" PROPERTIES FOR EACH AFTER APPLYING THE FORMULA	
	((H – Q + E+ J) – Z) X F / G	
BAND A: 0	BAND A: 0	
BAND B: 0	BAND B: 0	
BAND C: 0	BAND C: 0	
BAND D: 1	BAND D: 4.00	
BAND E: 0	BAND E: 0	
BAND F: 0	BAND F: 0	
BAND G: 3	BAND G: 4.58	
BAND H: 47	BAND H: 96.00	
Total: 51	Total : 104 58	
BAND G: 3	BAND G: 4.58	

Less Z = - 0
Plus MOD Adjustment = + 0
X Collection Rate (96%) = 100.40

APPENDIX 2.

TAXBASE FOR QUEENS PARK COMMUNITY COUNCIL.

DISTRIBUTION OF PROPERTIES BY BAND AS AT 30.11.20 FOR QUEENS PARK	EQUIVALENT BAND "D" PROPERTIES FOR EACH AFTER APPLYING THE FORMULA	
PARISH.	((H – Q + E + J) – Z) X F / G	
DAND 4 50	DAND A CO CO	
BAND A : 56	BAND A: 29.33	
BAND B : 277	BAND B: 180.44	
BAND C: 833	BAND C: 630.67	
BAND D : 1,941	BAND D: 1,704.75	
BAND E : 1,885	BAND E: 2,093.97	
BAND F : 238	BAND F: 312.00	
BAND G : 32	BAND G: 49.58	
BAND H: 3	BAND H: 6.00	
	T-1-1	
Total: 5,265	Total: 5,006.75	

Less Z = 1,345.68
X Collection Rate (96%) = 3,514.63
A Collection Rate (90%) = 5,514.05
Plus MOD Adjustment + 0.00

TAXBASE = 3,514.63





Cabinet Report

Date: 14 December 2020

Classification: General Release

Title: Annual Report of the Safeguarding Adults

Executive Board

Wards Affected: All

City for All Summary Please see background information below

Key Decision: For information only

Financial Summary: For information only – Annual

contributions listed below

Report of: Bernie Flaherty

Bi-Borough Executive Director of Adult

Social Care and Health Services

Contact Officer:

patricia.mcmahon@rbkc.gov.uk

Tel: 07814173151

Financial Summary:

Annual contributions from SAEB members to support the function of the board include:

Mayor's Office for Policing and Crime £10,000.00 (£5,000.00 per borough)

CCG Collaborative £40,000.00 (£20,000 per borough)

London Fire Brigade £1,000.00 (£500.00 per borough)

1. Executive Summary

- 1.1 This is the 6th Annual Report of the Safeguarding Adult Executive Board. The multi-agency Board provides leadership of adult safeguarding across the Royal Borough of Kensington and Chelsea; and the City of Westminster. The purpose of the Board is to ensure that member agencies work together, and independently, to secure the safety of residents who are at most at risk of harm from others, or through selfneglect.
- 1.2 The report seeks to show how the SAEB and member agencies have addressed these priorities during 2019/20. This work included residents being at the centre of decision-making about their care, treatment, and safety (see case example on page 30). We continue to tackle financial abuse and fraud by helping people protect themselves and others against scams. In November 2019 the Safeguarding Adults Awareness Week campaign was both a national and local success. In the Bi-Borough residents had the opportunity to watch the 'Safe at Home' (short films) which were co-produced with our service user groups, receive helpful information from all our local services on scam awareness, wellbeing and safety, and ask any safeguarding related questions.
- 1.3 During 2019/20 the SAEB Partnership Implemented our business plan 'Statement of Intent 2019-200' which states what we want to achieve. This included placing higher focus on hearing the voice of the service user in the workings of the board. This also involved preparation for Liberty Protection safeguards in line with changes to the Mental Capacity (Amendment) Act 2019. The Deprivation of Liberty Safeguards Team successfully rolled out training for Practitioners and Managers (see page 24).
- 1.4 Community Engagement: We continue Making Safeguarding Personal (MSP) by hearing the voices of our residents and their experience of the safeguarding process. Our user groups have been involved in reviewing the materials in our 'say no to abuse booklet' and advised the comms team on how to improve the accessibility of the booklets. We developed a joint programme of events and practice tools with the local Safeguarding Children's Board. This approach enables overarching strategies such as "MSP" and "Think Family" to be linked into the work of the wider Safeguarding communities.
- 1.5 **Listening Leading and Learning:** As a partnership we have continued to look at information about local safeguarding activity to inform our priorities. We consider recommendations and lessons learned from both national and local Safeguarding Adult Reviews to understand what needs to change. Particularly where the learning shows there is room for agencies to work more effectively together to prevent abuse or neglect.

- 1.6 This last year we have used the 7-minute learning model to share learning via a series of workshops across the partnership for Mr X and we disseminated a 7 mins briefing on **Think Family (see page 29)**. Further work will be taking place in 2020/21 to embed this approach into Adult Social Care Practice.
- 1.7 Practitioners are also having to be vigilant in identifying and responding effectively to modern slavery, **human trafficking** and **self-neglect and hoarding**. The Bi-Borough has continued to strengthen its coordinated community response to tackling modern slavery & exploitation (see page 22).

2. Recommendations

The Cabinet is requested to consider the Annual Report 2019/20 of the Safeguarding Adults Executive Board (SAEB), with particular regard to the arrangements that have been put in place to meet the requirements of the Care Act 2014, from 1st April 2015. It is recommended that the report is noted and strategy and the priorities informing its current work endorsed.

3. Reasons for Decision: No decision to be made.

4. Background, including Policy Context

- 4.1 The SAEB operates under Schedule 2 of the Care Act 2014, overseeing the statutory duties of conducting Safeguarding Adult Enquiries (Section 42) and Safeguarding Adults Reviews (Section 44).
- 4.2 The report seeks to show how member agencies of the SAEB provide assurance to the SAEB for the ways in which its three strategic priorities (Making Safeguarding Personal; Creating Safe and Healthy Communities; and Leading, listening and Learning) are being promoted within their organisation.
- 4.3 The report also seeks to demonstrate how the learning from safeguarding enquiries and reviews conducted during the year lead, to changes that benefit the safety, health, and wellbeing of local residents, in both boroughs. This is particularly where the learning shows there is room for agencies to work more effectively together to prevent abuse or neglect.

5. Financial Implications

None

6. Legal Implications

6.1 The Care Act 2014 says the Board must publish a report of what it has done during the year to achieve its objectives, including findings of the

reviews arranged by it under Section 44 of the Act. The Safeguarding Adults Board has 3 core duties. It must:

- Develop and publish a strategic plan setting out how they will meet their objectives and how their member and partner agencies will contribute
- Publish an Annual Report detailing how effective their work has been
- Commission Safeguarding Adult Reviews (SAR's) for any cases which meet the criteria for these
- 6.2 The learning from Safeguarding Adults Reviews and Safeguarding enquiries this year has demonstrated how much can be achieved by working together to tackle issues that may make communities unhealthy or unsafe, and from learning lessons and making changes where these are indicated. The SAEB actively promotes a learning culture and members are transparent, engaged, and accountable to one another, leading to better outcomes for people in need of care and support.
- 7. Staffing Implications

None

8. Consultation

None

If you have any queries about this Report or wish to inspect any of the Background papers, please contact:

Patricia.mcmahon@rbkc.gov.uk

Tel: 07814 173 151

Safeguarding Adults Executive Board

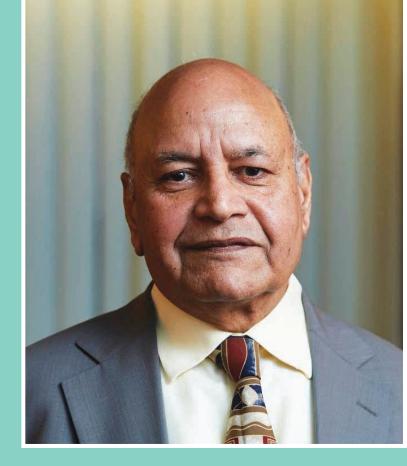
ANNUAL REPORT 2019/20

Safeguarding is everyone's business



Hello everyone, my name is Shiv Kumar.

I am a member of both the Local Account Group and the Safeguarding Adults Reference Group. One day in March while thinking about how to stay positive during this pandemic, I took pen to paper and wrote the first poem below.



We'll meet again, a poem dedicated to all members of the Local Account Group (LAG)

We'll Meet Again and we will fly the flag, whether it be union or Lag.

We will meet again, don't know where and don't know when, but I know we will meet again one sunny day.

Bravest are the NHS staff, Social Workers, carers transport and keyworkers and volunteers, fighting Corona virus arrows without much PPE.

In line of their duty, their lives under the guillotine, so that we can live.

So few on the frontlines are fighting this Corona War for all of us.

Thousands of candles can be lighted with one single candle, and life of that single candle will not be shorted.

Happiness never decreases by being shared.

Health is the greatest gift,

Contentment is greatest wealth,

Faithfulness is best relationship.

It is during our darkest moments that we must focus to see light.

Nothing is impossible, the word itself says, I'm possible.

Omnipresent says, I am with you all the time, but you ignore me. If you are kind to the needy, I give you 100x.

Walk on, Walk on, with hope in your heart and you will never walk alone,

You never walk alone.

While you walk through the storm, don't be afraid of the dark, at the end of storm there's a golden sky and the silver song of lark.

Walk on through the wind, walk on through the rain.

Though your dreams be tossed & blown.

Walk on, walk on, with hope in your heart,

You will never, walk alone.

With hope sometimes out of nothing, comes out something.

You never, never walk alone.

Whatever our minds conceive and believe, it can achieve. Walk on with hope in your heart,

You never walk alone

My father always said, health is wealth.

Look after your health, wealth will follow.

We will meet again, I don't know when, We will again, one sunny day.

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Our "House" model has set the scene for our safeguarding adults' journey for the last three



years. It remains valued by our service users and experts by experience. The model continues to support the areas of work with a focus on the person at the centre of the process and their well-being.

Foreword



I have great pleasure in introducing the Bi-Borough Annual Safeguarding report for 2019/20 on behalf of the Bi-Borough Adults Executive Safeguarding Board.

The board brings together representatives from across the public and voluntary sector to give focus and challenge to ensure that all adult public services are delivered as safely as possible across the two boroughs. Our role is to ensure that residents feel safe and protected; and free from harm, neglect and abuse.

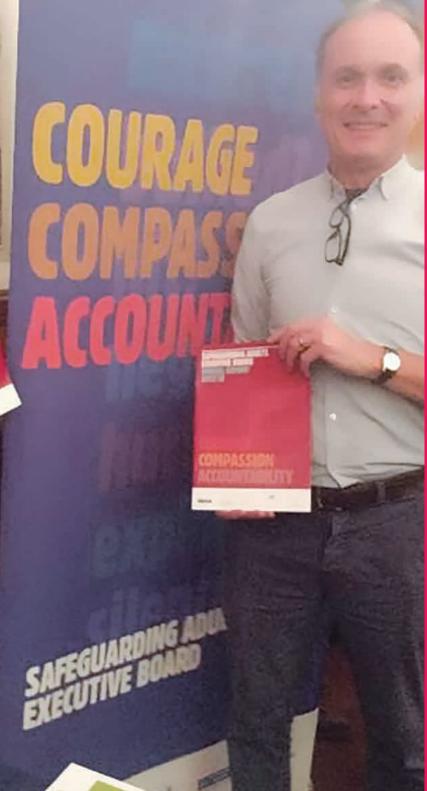
Looking back over a year gives us the opportunity to lay out some of the safeguarding work that we wanted to prioritise over 2019/20 and gives an account of what we have been able to achieve. It is a chance to reflect on some of the real successes that have been delivered in tackling safeguarding concerns but perhaps much more importantly has helped to identify gaps that we still need to address and shape the work that we have taken forward in this current year.

A key priority for the year was to involve service users and residents in the work of the board so that they can influence how we tackle safeguarding from their point of view. We recognised too that they can play a pivotal role in raising awareness of safeguarding across the Bi-Borough communities. I would like to give a particular vote of thanks to the Local Account Group and the Safeguarding Adults Reference Group who have worked together with both councils, the fire service, the police and health partners to highlight some of the safeguarding concerns that they have become aware of in discussion with local residents. They showcased their work in Safeguarding Awareness Week in November 2019, a flavour of some of their work is detailed in the report.

The report also highlights some examples in which staff from different agencies have worked together to produce safer and better outcomes for those they work with. Good safeguarding practice often comes from joint working and learning from each other. The board and staff working behind the scenes have developed excellent learning and development programmes to support effective partnership working and I am grateful to them for their invaluable contribution.

It is of course of great significance that by February 2020 we became aware of the impending Covid-19 pandemic, although at that point we could not have foreseen how it would impact on all our lives. It was evident from the outset though that there was a clear focus across the two boroughs to put measures in place to mitigate wherever possible the impact of the virus on residents and in particular those who were the most vulnerable. Residents themselves and the voluntary sector played a very large part in helping others where they could. Living through the last six months has created unprecedented strain on residents, their families and those who continue to strive to deliver the best public services that they can. The lack of social contact, isolation, fear and economic pressure of course add to the complexity of delivering effective safeguarding services and checks. As we move forward, we need to remain committed to upholding excellent safeguarding practice whilst recognising that we have to find new ways of working and supporting those who need it most.





I look forward to working with you all over the coming months to face new safeguarding challenges and thank you again for the very real contribution that is being made across the Bi-Borough to create a safe community for everyone.

Aileen Buckton

What does the Safeguarding Adults Executive Board do?

Our Vision

The strategic objectives and work of the board is based on the following vision:

People in Kensington and Chelsea and City of Westminster have the right to live a life free from harm, where communities:

- have a culture that does not tolerate abuse
- work together to prevent abuse
- know what to do when abuse happens

Roles and Duties

The Bi-Borough Safeguarding Adults Executive Board (SAEB) is a partnership of organisations working together to prevent abuse and neglect, and when someone experiences abuse or neglect, to respond in a way that supports their choices and promotes their well-being.

The role of the board is to assure itself that local safeguarding arrangements and partner agencies act to help and protect adults in its area.

The boards' main objective is to assure itself that local safeguarding arrangements and partner organisations act to help and protect people aged 18 and over in the area who:

- have needs for care and support
- are experiencing, or at risk of, abuse or neglect
- (as a result of their care and support needs) are unable to protect themselves from either the risk of, or experience of, abuse or neglect regardless if the council are funding care or not.

The Board is bigger than the sum of its parts

Our Values and Behaviours

The board believes that adult safeguarding takes **courage** to acknowledge that abuse or neglect is occurring and to overcome our natural reluctance to face the consequences for all concerned by shining a light on it.

The Board promotes **compassion** in our dealings with people who have experienced abuse and neglect, and in our dealings with one another, especially when we make mistakes. The Board promotes a culture of learning rather than blame.

At the same time, as members of the Board, we are clear that we are **accountable** to each other, and to the people we serve in the two boroughs.

The board is responsible for overseeing and leading on the protection and promotion of an adult's right to live an independent life, in safety, free from abuse and neglect across Kensington and Chelsea and the City of Westminster.

Safeguarding in numbers Kensington and Chelsea

Who Raised the concerns?

- → Each week the local authority received 15 safeguarding concerns, on average
- Just under half of the concerns were risk assessed and closed at the first stage in the safeguarding pathway
- Three out of four concerns were raised by statutory agencies

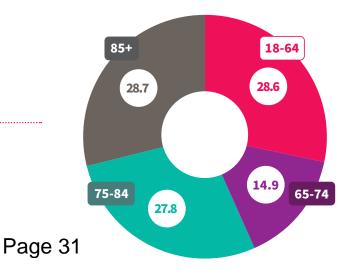




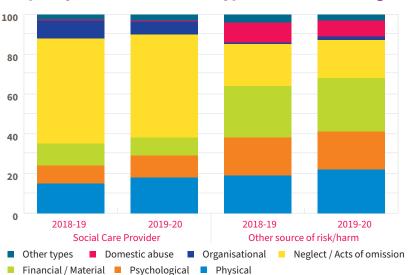
Other sources of referral include: banks, solicitors, Magistrates courts, Domestic Abuse services, Department of Work and Pensions, Victim support, Faith based groups, Housing Associations, Boarder Force agency, Outreach services, LBGT Groups

Age profile of the adults at risk

- → Over half of the adults at risk were aged 75 years or over
- Three out of ten of all concerns raised involved an assessment for mental capacity



Frequency with which different types of harm were alleged

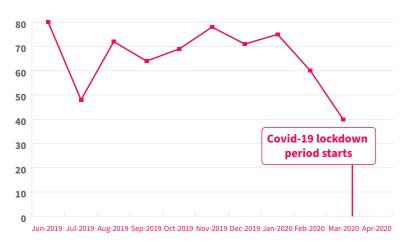


Did you know?

Three out of ten enquiries involved a social care provider and the main abuse type was neglect and acts of omission. This in the main relates to care quality issues

Number of safeguarding concerns received per month

In March 2020, when the official Covid-19 lockdown period started, there was a 40 per cent drop in concerns received. This then picked up in April 2020.

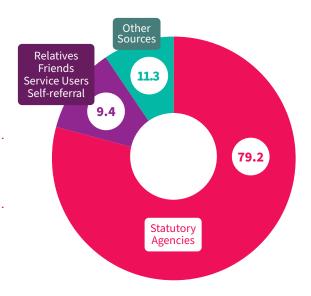




Safeguarding in numbers Highlights Westminster

Who Raised the concerns?

- → Each week the local authority received 14 safeguarding concerns, on average
- → Just under half of the concerns were risk assessed and closed at the first stage in the safeguarding pathway
- → Eight out of ten concerns were raised by statutory agencies

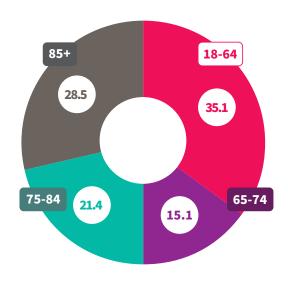




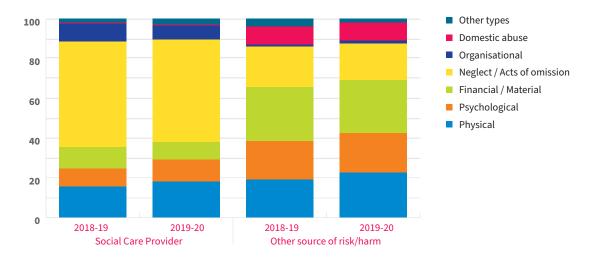
Other sources of referral include: Banks, Solicitors, Magistrates courts, Domestic Abuse services, Department of Work and Pensions, Victim support, Faith based groups, Housing Associations, Boarder Force Agency, Outreach services, LBGT Groups

Age profile of the adults at risk

- → Over half of the adults at risk were aged 75 years or over
- → 80 per cent of enquires where the person lacked capacity they were supported by a family member or representative this is the same as the London average.
- → 30 per cent or three out of ten of all concerns raised involved an assessment for mental capacity



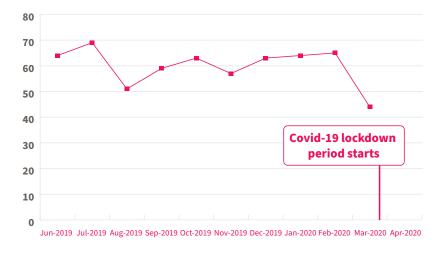
Frequency with which different types of harm were alleged





Four out of ten enquiries involved a social care provider and the main abuse type was neglect and acts of omission. This in the main relates to care quality issues. This is lower than the London average.

Number of safeguarding concerns received per month



In March 2020, when the official Covid-19 lockdown period started, there was a 29 per cent drop in concerns received. This then picked up in April 2020.

Creating a healthy and safe community

Communities have a large part to play in preventing, detecting and reporting abuse and/or neglect. The Safeguarding Board believes in partnership work and local solutions with services working with their communities.

To achieve our aims and those of our communities we have collaborated with other Council departments to include our Community Safety Partners as well as worked with service user groups to truly co-produce events and local newsletters.

Our Community Engagement Group is a sub-group of the board and is co-chaired by Miles Lanham Safeguarding Lead Notting hill Genesis and Ben King Station Commander London Fire Brigade until earlier this year when Ritu Guha User involvement Project Manager Advocacy Project replaced Ben as Co-Chair.



Did you know co-production – is an equal relationship between people who use services and people who provide services. They work together on all stages from designing services to making them happen.



Miles Lanham – Housing Operations Manager, Westminster & Bolney Notting Hill Genesis



Ben King – Station Commander London Fire Brigade



Ritushree Guha – User Involvement Project Manager

In 2019/20 the group focused on tasks set out under the priorities 'Making Safeguarding Personal' and 'Creating a Safe and Healthy Community'. With support of the Safeguarding Adults' Reference Group (our service user group) and the Local Account Group members we were involved in a variety of initiatives, such as:

Safeguarding Adults' Reference Group (SARG) Service User Involvement What we did

The Safeguarding Adults' Reference Group is made up of residents and service users across Kensington and Chelsea and Westminster. We are a group that include 'safeguarding experts by experience' as many of us have 'lived' experience of safeguarding.



The group is all about making safeguarding personal and making sure that local people have a voice in safeguarding to help try to reduce the harm to particular groups.

In 2019/20, we have focussed on training and raising awareness and have filmed a set of co-produced videos, which are being launched through the safeguarding newsletter.

In November 2019, we supported the first Bi-Borough National Safeguarding Adults Awareness Week

National Safeguarding Adults Week 2019

18th to 24th November 2019

event and it was a huge success. The response to the event exceeded all expectations with over 200 people applying for 120 places. The aim of the event was to create a Bi-Borough event where we all focused on safeguarding adults – so we can be better, together.

We were delighted for the support from the following groups and organizations: London Fire Brigade, Kensington and Chelsea and Westminster City councils, Metropolitan Police and the Harmonious Choir who all contributed to make this event such a success.

"The Bi-Borough National Safeguarding Awareness Event was very heart-warming with a real sense of community spirit"

Maria Stoeva spokesperson for the Safeguarding Adults Reference Group



"I am very pleased that the Community Engagement Group hosted this important event which raised awareness on 'staying safe at home,

safeguarding adults and promoted mental health and wellbeing across the Bi-Borough. It is such a privilege to work with people who really care about what they do.

"Thank you to all the inspirational speakers and especially to the Harmonious Choir with their emotionally rewarding and uplifting singing"

Aileen Buckton, Independent Chair, Safeguarding Adults Executive Board

The event raised awareness of how residents can stay 'Safe at Home' and provided attendees with information on health and wellbeing. We launched a set of 4 national universal videos accessible to all, from our Safe at Home Programme. The videos have been co-produced by SARG and Local Account Group members.

"We have been involved in a variety of ways such as helping with the scripts, making sure the content is relevant for the audience and have also acted in them. These videos contain helpful guides on fire safety, scams and security issues in the home".

Maria Stoeva



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Creating a Safe and Healthy Community

The case study below demonstrates that training volunteers and service users in the community in what signs to look out for in adult abuse and neglect helps to build confidence and prevent abuse and neglect.





Safeguarding Train the Trainers program has been successfully growing from strength to strength. Particular thanks goes to Ian Corpuz - Community **Champions Project Coordinator** at the Abbey Centre in Westminster who continues to deliver the programme to volunteers. The case study below demonstrates what differences there has been to the outcome of the person at the centre of the abuse primarily because the Abbey Centre Volunteer attended a train the trainers Safeguarding programme. By attending the training, she felt confident in escalating a safeguarding alert, which made a positive outcome from the volunteers point of view as well as the Service User.

Case Study

AL is a visually impaired elderly man, has other health conditions. Westminster City Council's Visual Impairment Rehabilitation Service made the referral by completing and emailing our referral form, from which we established that he needed support with the delivery of food and household toiletries.

Our Project Coordinator had a long in-depth conversation with AL to find out more about him and if there were any other issues with which he might need support once she received the completed referral form. She found out that AL had not been able to get out of his home for food for some time. He cannot cook his meals and most of the time he eats in a café due to his sight loss. We arranged for an emergency food parcel to include food that would be easy to prepare or ready meals and this was delivered to his home promptly.

We also determined that AL needed more regular support and company and arranged for a "befriending volunteer" to call him, agreeing a code word to be used by the volunteer during the initial telephone call so he would know the call was coming from the Abbey Centre and not a cold call or a scam. He was matched with a volunteer with whom he had things in common. This was conveyed to AL, so he knew who to expect to call. The volunteer called AL at agreed times and provided us with a breakdown of each conversation.

When AL did not answer the fourth call at the agreed time, the volunteer followed Safeguarding protocols that she learnt from attending Safeguarding training provided by the Abbey Centre, contacted us to say she had left a voice message promising to call back later, which was logged on our monitoring tracker. The volunteer called back later, but AL still did not answer. After another unsuccessful call first thing the following morning, a safeguarding alert was raised by telephone calling Westminster City Council's Visual Impairment Rehabilitation Service.

Outcome

A district nurse attended AL's home and, finding him on the floor, called a paramedic. AL, who normally wears a medical alarm, was not wearing it and it was out of reach. He was admitted to hospital and in poor health. Westminster City Council's Visual Impairment Rehabilitation Service sent an update report to us and, along with AL's family, praised the volunteer for being so concerned and caring for AL's welfare.

Follow up

We have remained in contact with the Visual Impairment Rehabilitation Service to monitor AL's progress while he was in the hospital and, when he was discharged, we resumed the delivery of food parcels and telephone support from the same volunteer, at his request. We hope we can help him to access more services and activities once the Abbey Centre reopens.

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Creating a Safe and Healthy Community

Safer Westminster Partnership and Safeguarding Executive Board: Collaborative approach to reduce harm to older people who may also be victims of crime

The board is working closely with the Safer Westminster Partnership to look at what the prevalence is, and support needed for vulnerable older people who are victims of crime. Kensington and Chelsea Community Safety are interested in the work being done in Westminster and would like to be included in discussions to see if there is the same need and to ensure that functions and processes are in place.

We have a multi-agency group of people in which we are exploring financial scamming and financial fraud and what we as a collaborative experience in supporting vulnerable adults.

This is what we know nationally

Many people may already know the dos and don'ts of financial fraud and scams – that noone should ever contact them out of the blue to ask for their PIN or full password, or ever make them feel pressured into moving money to another account. The trouble is, in the heat of the moment, it's easy to forget this or skim read texts and emails and not spot the giveaway signs.

Older people are more at risk of being victims of scams. Risk of financial abuse increases with age. It is estimated that 18 per cent of over 65's in the UK are at risk, this equates to nearly 6,000 residents in Westminster. Females and ethnic minorities are at a greater risk.

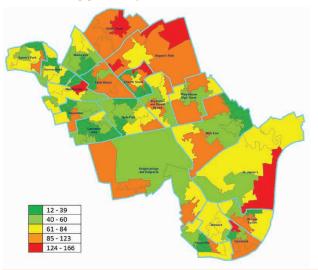
This is what we know in Westminster

Using this data can help us where to identify where to undertake targeted action. The maps below look at the location of Westminster's older residents.

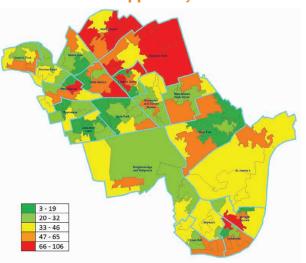
The largest proportion of elderly residents 65 plus live in the north east of the borough. 7.6 per cent in Regent's Park and 5.7 per cent in Abbey Road ward. This picture is more enhanced for older females, with Regent's Park having 8 per cent and Abbey Road 6.4 per cent.

The highest risk group are aged over 80.

2019 mid-year population estimate of over 80's approx. 9,000



2019 mid-year population estimate of female over 80's approx. 5,000

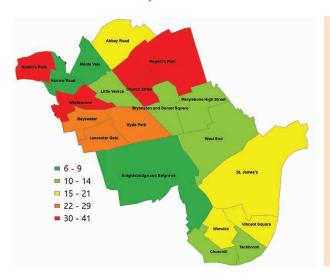


9.3 per cent of over 80-yearold females reside in Regent's Park and 7.9 per cent in Abbey Road. Single older households are also at an increased risk. The Office of National Statistics estimates the percentage of one person households in Westminster where the person is aged over 65 was **25.9 per cent** in **2019** and this is likely to increase to **28.1 per cent** by **2024**.

Other at risk groups are those living with dementia or cognitive decline. Public Health England data for 2019 estimates there are **4.6 people per 10,000 with dementia aged over 65 in Westminster**, this is slightly higher than the

London average of 4.54.

Number of Victims per Ward



This map relates to data sent to Westminster Trading Standards from the National Trading Standards Scam team. This is just one source of data relating to scams received by the Trading Standards team.

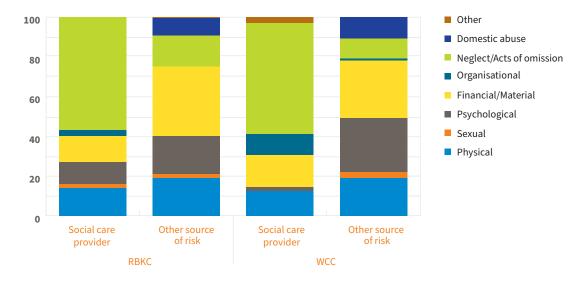
It shows that there is some correlation with the population age groups, with incidents concentrated in the north of the borough and also with areas of deprivation.

Safeguarding data for 2019/20 shows that if the source of the risk is not a social care provider then the biggest risk from other sources is financial and material abuse.

The SAEB and Safer Westminster Partnership will continue to work together to improve identification of victims and repeat victims.

We are looking at who we need to target by having a raising awareness campaign and training in the most vulnerable wards and which voluntary groups and teams should be involved in this piece of work .This will be reported into next year's Annual Report

Where incidents occurred in the adult's own home, the frequency with which different types of harm were alleged, according to the source of risk, for s42 enquiries completed in 2019-20



Creating a Safe and healthy community

Partnership working with our voluntary sector communities to Safeguard adults during the COVID-19 crisis

Each local authority has been asked to establish a Hub to support local residents who are self-isolating or whom are part of the 'shielding' cohort. The people who are shielding are determined by a narrow set of criteria that is based on pre-existing health conditions that place them at serious risk if they contract Covid-19. Age is not a factor.

The approach of the Safeguarding Adults
Board to Adult safeguarding prevention in the
Bi- Borough was to offer to work with both the
formal and informal responders to COVID-19,
and in particular for safeguarding in the context
of what was a crisis in which neither statutory
systems nor formal community organisations
are in a position to meet all the immediate
needs of the communities. The Board did this in
a number of ways to include:

- Working closely with both councils to support the safer recruitment of volunteers for the hubs
- E-Learning programme made available on Adult Safeguarding for internal staff made up of non adult social care staff working in the Hubs and external volunteers
- Offering advice on Disclosure and Barring Service checks
- Flyers for volunteers around awareness raising of Safeguarding and Covid-19
- Bespoke training and support for unregulated services

Adults at Risk who are self-isolating may not be able to access support or escape abuse at times when they otherwise would. Self-isolating may see an increase of risk of harm. We know that social isolation is an increasing risk factor in relation to abuse and neglect. In particular, we know that incidences of domestic abuse, self-neglect and carer stress will increase with social isolation. With more people being asked to self-isolate or shield as a result Covid-19 this needed to be a key consideration when offering preventative interventions to all organisations.

Priority Area for 2020-2021

We will continue to focus on identification of different or changing patterns of abuse manifesting during this Covid-19 pandemic to help others identify and report abuse. We will be paying attention to those living in regulated settings in particular care homes who may be particularly affected by Covid-19. We will also continue to monitor referrals from different ethnic backgrounds to identify gaps from which we can focus more targeted interventions.

What is Making **Safeguarding Personal?**

Making Safeguarding Personal is about having a conversation with people about how we might respond in safeguarding situations in a way that makes them feel involved, promotes choice and control of a given situation as well as aiming to improve quality of life, wellbeing and safety.

It is about seeing people as experts in their own lives and working alongside them with the aim of empowering them and enabling them to reach better outcomes of their circumstances and recovery.



How do we know we are making a difference?

The charts below show how RBKC and WCC compare with London as a whole. They are based on Safeguarding Adults section 42 enquiries concluded in the year.

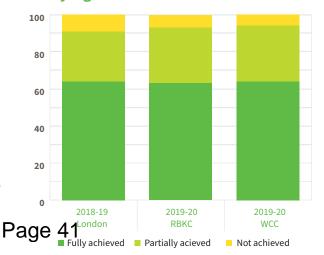
The London figures are based on s42 enquiries concluded in 2018/19. This is the most recent comparative data available. Because of Covid-19 the deadline for submitting 2019/20 data has been pushed back to September 2020. So, London data for 2019/20 is unlikely to be available until December 2020.

The figures for boroughs are based on s42 enquiries concluded in 2019-20 (i.e. in the following year)

We ask the adult at risk what they want to achieve through the safeguarding enquiry, and this is recorded.

Across London as a whole the adult at risk (or a representative) was asked what they wanted to achieve through the enquiry in eight out of ten cases. In RBKC and WCC the proportion was slightly higher. Among those asked there was a significant proportion who, though asked, did not express any desired outcomes. This may have been because they were not asked as this could have increased risk for that person such as in a domestic abuse situation. Where the person did express a desired outcome, in the great majority of cases (over 90 per cent) the person was judged to have fully or partially achieved the outcome they wanted.

Where the adult at risk said what they wanted to achieve through the enquiry, whether they were judged to have achieved it

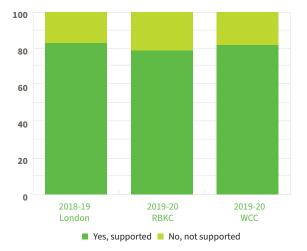


We ensure that if the person lacks capacity to make decisions about the Safeguarding enquiry then they are supported to do so.

Where the person was assessed as lacking capacity, in both RBKC and WCC in about eight out of ten enquiries the person was supported with their decision making by someone independent, for example an advocate, family member or friend, the same as the London average.

Where a person does not have a family member or a friend to support them then we use an Advocacy organisation to do this piece of work. Someone does not have to lack decisional making capacity to require an advocate they just need to have "Substantial Difficulty"

Where the adult at risk was assessed as lacking capacity to make decisions relating to the safeguarding enquiry, whether they were supported to make decisions, for s42 enquiries concluded in the year



Advocacy plays an important role in getting the voice of the service user heard. A good example of work in a care home is considered below. This was completed by the Advocacy Project who stand proud of their work on safeguarding.

"We work closely with professionals at all levels, including sitting on a number of safeguarding groups and boards; we provide resources, including a safeguarding support line and support for families and carers; we run training for other organisations; and help develop best practice in the sector.

Sometimes we are asked to undertake major advocacy work on behalf of Care Homes; where funders, families and carers may have concerns for the residents. A good example of this work is outlined in the case study below".

Case Study

A local authority asked advocacy to provide support for 40 residents in a nursing home where there were concerns about the quality of care. A simple animation is used to illustrate the advocacy process.

What happened next



Advocates visited the home and met with all residents who were identified as requesting or needing an advocate. Residents were provided with information about what standards they can expect in their care, which helped them to identify things they wanted to change.



Many residents had difficulties communicating their wishes or didn't have capacity to instruct an advocate. Advocacy worked with them using non-instructed advocacy. They worked collaboratively with the home and health and social care to support in addressing issues around person-centred care, communication, respect and dignity and restrictive practices.

All the residents were encouraged to join in new activities, which people very much enjoyed. The choice of activities reflected what the residents asked for. Staff became more engaged and

responsive with residents. Changes showed families and friends – including staff – that this was the residents' home.



Positive outcomes

For example, one resident wanted to buy a scratch card every Saturday because that was important to him. Another example was one woman wanted to move home to live with her partner. By working with professionals, the advocate supported her to explore her options, and be actively involved in the decision about where she was to live.



Through the work at this care home, advocacy developed positive relationships with the other professionals involved as everyone worked closely to identify problems and find solutions. Residents were positive about the support they got from advocacy and the partnership as a whole.

To what extent does the ethnicity of people involved in safeguarding reflect the ethnicity of people with care and support needs

Ethnicity and Safeguarding:

The Safeguarding Executive Board is committed to equality diversity and human rights. We respect the ethnic, cultural and religious practices of people who use our services across the partnership. But we need to understand better to what extent does the ethnicity of people involved in safeguarding enquiries reflect the ethnicity of people with care and support needs?

Are we directing our resources in the right areas to ensure we are offering the same level of support to all our resident?

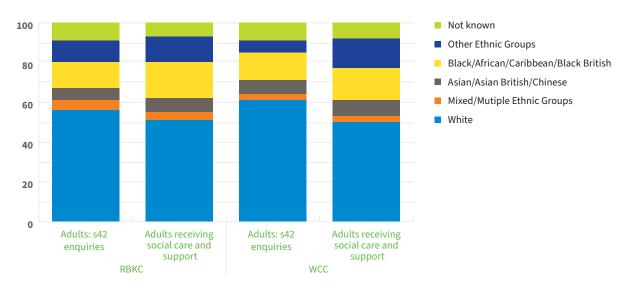
To answer this question, we would need to know the ethnic composition of everyone in the two boroughs who has care and support needs, rather than the ethnic composition of the general population.

In the absence of such information the closest reference population we have is people known to adult social care. The chart above compares the ethnic profile of individuals who were involved in s42 enquiries which started in 2019/20 with the ethnic profile of adults who received social care and support during that time.

The comparison suggests that there is in both boroughs, among people involved in s42 enquiries, an over-representation of people who are white and an under-representation of people from some minority ethnic groups. In RBKC there would seem to be an under-representation in particular of people from Black communities and in WCC an under-representation of people from other ethnic groups which includes the Arab communities.

Priority area for 2020-20201. We intend to explore this further in 2020-2021 by breaking down Section 42's by local wards; ethnicity and abuse types. We have already started working with our local communities to launch an awareness programme and increase the safeguarding referrals of people from the Black, Asian Minority Ethnic background.

A comparison between the ethnic profile of adults involved in s42 enquiries starting in 2019-20 and the ethnic profile of adults who received social care and support in 2019-20

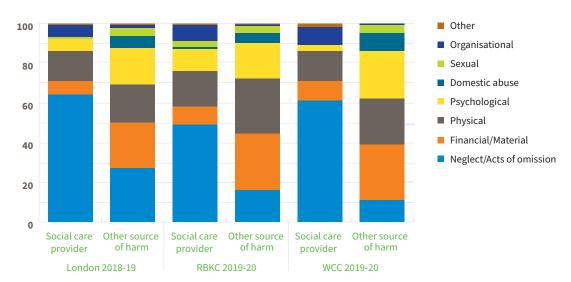


Are we as a board addressing abuse in the right way?

Abuse is a violation of a person's rights by someone else. The Care Act 2014 outlines a number of different types of abuses which we currently report on. The data below outlines the frequency with which different types of harm abuse were alleged which is was similar in both boroughs.

Neglect or acts of omission were more likely to be mentioned across London as a whole where the source of risk is a social care provider. Neglect and Acts of omission normally relates to Social Care Providers. In 2020-2021 we will be working closely with our partnership to look at Care Home Resilience plans across the Bi-Borough. Working in close collaboration with local Care Homes and health partners at a Board level we are determined to ensure that each resident is getting high quality care in the most appropriate setting for their needs, with the appropriate levels of infection control and equipment in place.

Frequency with which different types of harm or abuse were alleged, according to whether or not the source of harm was a provider or social care, for s42 enquiries concluded in the year



Are we focusing our attention as the SAEB in the correct settings and in the right way

seven out of ten incidents which led to s42 enquiries occurred in the person's own home. This compares with just over five out of ten across London as a whole.

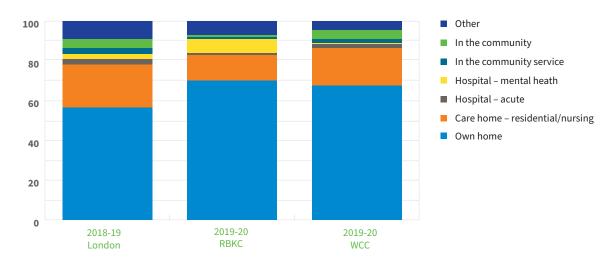
In RBKC and WCC about

In RBKC **74.1** per cent of incidents occur in someone's own home this is a year on year increase from **68.5** per cent in **2018/19**

In WCC in 2019/20 **66.7 per cent** of incidents occurred in someones own home this is a year on year increase from **61.9 per cent in 2018/19**.

One of the priority areas for the SAEB in 2019/20 will be to explore best practice with adults who self-neglect including those who hoard. We will be looking at case examples across the partnership and at published Serious Care Reviews (SCRS) and Safeguarding Adults Reviews (SARS) to support revised guidance in the dilemmas and challenges to supporting this client group.

The different settings where incidents occurred, for s42 enquiries concluded in the year



Other abuse types: Modern Slavery and Exploitation as a safeguarding concern

Modern Slavery is an umbrella term for human trafficking and servitude and is used when somebody is forced or coerced into doing something and another person gains from this exploitation. Modern slavery affects people of all ages, genders and nationalities. Perpetrators may be organised crime gangs or individuals who spot an opportunity to take advantage of a person's vulnerability.

Modern Slavery & Exploitation Coordinated Community Response



Modern Slavery can include; Sexual Exploitation – Prostitution, Lap dancing/strip clubs, (child/extreme) pornography) **Labour Exploitation** – Domestic Work, garment industry, shellfish industry, catering, agriculture and construction Page 46

Over 10,000 individuals were identified as victim/survivors of modern slavery in the UK last year, 2019/20, and it is estimated that thousands more are trapped in exploitation, unable to access support.

Both councils have continued to strengthen their coordinated community response to tackling modern slavery and exploitation. Safeguarding data is collected on Modern Slavery cases which come to our attention.

The coordinated community response recognises that modern slavery is everyone's business and Safeguarding plays an important part of this response where the adult may have care and support needs. Our multi-agency partnership group developed the theory of change below which sets out how we developed case conferences for Modern Slavery cases. One of the projects we have been delivering under Victims Support is multi-agency case conferences to provide tailored wrap-around support for victims/survivors who are homeless.

The Passage and Westminster City Council worked together to support eight victims/survivors last year, providing emergency bed spaces and support. Funding was granted by the Ministry of Housing, Communities and Local Government to expand the project and The Passage day care centre for homeless people in Westminster now has a dedicated Victim Navigator to support victims of modern slavery who are homeless.

in the period from April 2019 to March 2020 compared with seven (one adult, six

Safeguarding representation is involved to consider if the person is eligible for a Section 42 response and to support decision making in cases such as where mental capacity and advocacy considerations are needed to be made. Making urgent safety plans with non-statutory partners is part of the role safeguarding plays and we need to keep in mind those people who decline help may be controlled and coerced. Our front-line staff particular in the Information and Advice Services are trained to be first responders and make referrals to the *National Referral Mechanism* or to support the person to make other safety plans.

You can learn the signs of modern slavery at www.stopthetraffik.org/spot-the-signs/ Help and advice is available 24/7 via the Modern Slavery Helpline: **08000 121 700**.

We also have a local directory of survivor support services www.angelou.org/human-trafficking

Leading, Listening and Learning

The board is open to new ideas and areas of development and we want to learn from cases that went wrong from within our communities and from other disciplines. We took forward recommendations for further work from the recent Peer Challenge and hold each to account and learn when things could have gone better.

Deprivation of Liberty Safeguards (DoLS)

Andy Seymour – DoLS Manager

- The trend of DOLS requests
 received and processed has
 stabilised over the Bi-borough
 and remains at around 1000 per
 year. Nationally, all Supervisory
 Bodies are seeing a stabilisation of requests.
- All referrals were triaged using the Adult Directors of Adult Social Care DoLs risk tool.
 79% of the referrals were urgent or renewal requests and were taken forward. This year we have focused on removal of a growing back log of triaged DoLs referrals which were rated medium.

We receieved **1030** DoLs referrals in 2019-20 **213** Medium Priority **817** High Priority **25%** of DoLs referrals come from the Acute Hospital

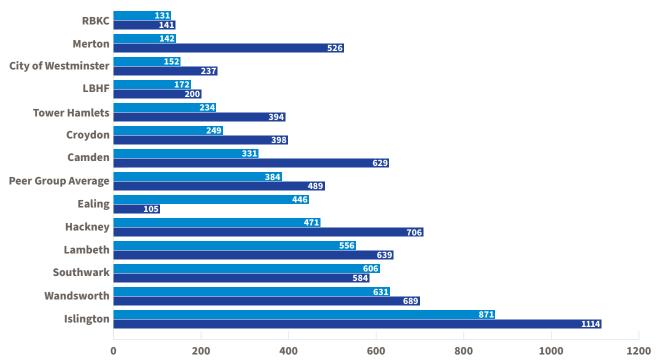
of the adult population for Kensington and Chelsea and City of Westminster and its peer group reports that the area is slightly below average per 100,000 head of population below average for 2018/19 at a comb

- figure of 378. Data is not yet available for the year 2019/20 due to delay in reporting due to Covid Outbreak.
- The new data will include the removal of the backlog which was completed in 2019/20 and will put the Bi-Borough well above average across its London Peer Group.

Details of the back-log removal are discussed below.

- The Peer Review findings in March 2019 stated that Deprivation of Liberty safeguarding team was skilled and experienced. However, it also stated that a review of the arrangements for medium risk of Deprivation of Liberty safeguarding referrals ought to be completed.
- To help in addressing the outstanding assessments the DoLS team begun work on a data cleansing exercise of approximately 1,300 assessments. We worked closely with our health and Adult Social Care commissioning colleagues to support managing authorities, to include hospitals and privately arranged placements, to supply the DoLs team with accurate DoLs data which is then cross referenced with the records we hold.

Number of DoLS application completed per 100,000 of the adult population for Westminster City and RBKC, and its peer group for the reporting period 1 April 2017 to 31 March 2019



An application is considered to be 'complete' in the reporting period 1 April 2017 to 31 March 2019, when enough information has been gathered to enable a decision to either grant or not grant the application to take place and the relevant form has been completed and signed by the relevant person at the Local Authority, irrespective of when it was recieved

- The DOLS team are often not informed if a person passes away or moves on from the establishment they are staying in, this gave a more accurate view of exactly how many DOLS assessments outstanding over the Bi boroughs.
- We are now pleased to report that a backlog of 600, post data cleanse, outstanding assessments have now been cleared. We are grateful for the dedication and hard work of all our colleagues in helping us achieve this milestone.

Since the end of March 2020 there is now no Deprivation of Liberty Safeguard be supporting the completion of all DoLs

This is the result of a successful joined up piece of partnership work that enabled us to adopt a multi-disciplinary approach, drawing on the skills of Independent Best Interest Assessors and Best Interest Assessors employed in the roles of Social Worker, Nurse and Occupational Therapist by the Bi- boroughs and the local Clinical Commissioning Group.

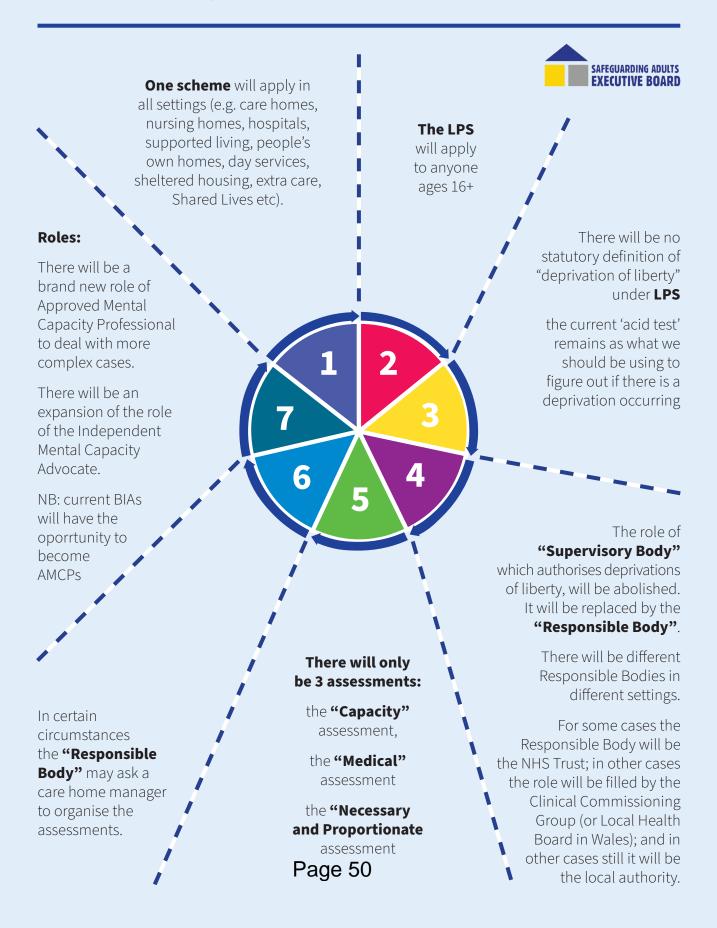
Note

Liberty Protection Safeguards (DOLS replacement) has been put on hold until April 2022, by the Department of Health and Social Care. This has provided an opportunity for the Bi-Borough to look at DOLS in the community in greater detail.

As a result, there will be additional training for practitioners and managers around DOLS in the community and Liberty Protection Safeguards, which will assist practitioners and managers, across the two boroughs to deepen their understanding of the new safeguards and developing best practice in these areas.

The Mental Capacity (Amendment) Act 2019 received the Royal Assent on 16th May 2019. The purpose of the Act is to abolish the Deprivation of Liberty Safeguards (DoLS) and to replace them with a completely new system, the Liberty Protection Safeguards (LPS). This system will apply to England and Wales only.

The 7 main points of the LPS are:



Safeguarding Adult Reviews

The Care Act 2014 states that the board must conduct a safeguarding adults review in accordance with Section 44 of the Act. The reviews are about learning together and improving how adults are protected from abuse and neglect.



Catherine Knights Director of Quality Central and North West London NHS Foundation Trust Co-Chair of the Safeguarding Adults Case Review Group.



Trish Stewart Associate Director of Safeguarding Central London Community Healthcare NHS Trust Co-Chair of the Safeguarding Adults Case Review Group.

This year we have focused on a number of areas of work: reviewing how we learn from safeguarding adult reviews and ensuring that we can demonstrate how this is embedded into front line practice: reviewing our own internal processes and systems for referrals and ensuring we are accountable for decisions we make throughout the process.

What we have learnt from Mr X

The Mr X Safeguarding Adult Review was reported in last year's report. This year we can demonstrate the learning into practice which occurred after we delivered three workshops for multi-agency front line staff. The following findings of the Mr X SAR are addressed using examples in day to day practice in the following areas.

- 1. Manage violence and aggression of staff by patients and family/carers
- 2. To always "think family" where there is a parent-carer of an adult child living with other younger children
- 3. Robust Managerial oversight for complex case work

The Mr X SAR findings said: Manage violence and aggression of staff by patients and family/carers

Community London Central Health Trust did: Tackling unacceptable Behaviour Week 15th – 19th July 2019 The Central London Community Health (CLCH) Care NHS Trust ran a campaign of events to raise awareness about unacceptable behaviour, during July 2019. The aim of the campaign was to; reduce the frequency of unacceptable behaviour shown towards staff whilst undertaking CLCH their role. The campaign was designed to raise issues expressed by CLCH staff when put in a difficult situation with a service user and or unpaid carer.



"One of the hardest things to face as a target at work, is the sense of utter loneliness. Your co-workers and bosses want to look good and will not stand up for you."

In conclusion tackling unacceptable behaviour campaign raised awareness of the organisations commitment to ensuring its staff have a safe working environment and recommendations were identified to improve the management of unacceptable behaviours in the following areas:

- 1. Tackling unacceptable behaviour should form part of induction
- 2. Training on unacceptable behaviour should be mandatory
- 3. Awareness Week for unacceptable behaviour should be annual event
- 4. Providing of more resources e.g. posters should be made

The Mr X SAR findings said:

To always "think family" where there is a parent-carer of an adult child living with other younger children



The Local Safeguarding Children's **Board and the Safeguarding Adults Executive Board did:** Safeguarding Survey and 7 mins learning for all staff

A survey was commissioned jointly by Adult and Children's Services on Think Family. The survey was circulated to around twenty agencies, with 275 responses. The questions were based around an understanding of Think Family as a practice tool.

Safeguarding in Drug and Alcohol Wellbeing Service · DAWS · Think Family in action



By Elizabeth Odigie Safeguarding Family and Women's Services Manager Drug and Alcohol Wellbeing Service



The Drug and Alcohol Wellbeing Service is a community-based substance use and wellbeing social enterprise, commissioned to provide services to local residents in the Boroughs of Kensington and Chelsea, Hammersmith & Fulham and the City of Westminster. Safeguarding remains a key focus for the service, with risk management and safety planning at the forefront of all the services on offer from clinical provisions through to family and women's work. In-keeping with this focus and with a view to expanding on the community services on offer, the Open DAWS Women's service was commenced in 2019 as a way of reducing the barriers women face in accessing 52the DAWS service and raised awareness for the services, which in conjunction with the DAWS wider community.

Family and Carers Service, supports much of the work being carried out in addressing the 'toxic trio of risk' internally and within the local community, utilising a Think Families approach and trauma-informed practice. Through this, there is acknowledgement that a multi-agency way of working and use of partnerships are the key ways of supporting clients holistically whilst increasing recovery capital. Therefore, continued involvement in community forums including the Team Around the Family Hub, Early Help Panel (to name a few), on-site satellites and joint working with other agencies have enabled progress for clients accessing

7 Minute Briefing



1 What do we mean by 'Think Family'?

A Think Family approach refers to the steps taken by children's, young people's and adult's practitioners to identify wider family needs which extend beyond the individual they are supporting.

For example, in relation to safeguarding, if you work primarily with adults, you should still consider the safeguarding needs of children, and if you work mostly with children, you should still consider the needs of vulnerable adults.

Safeguarding is everyone's responsibility!

7 What the LSCP and SAEB will do next?

The results of the survey have been considered by the partnerships and will help shape further joint learning opportunities to ensure that frontline practitioners and managers can continue to work in partnership across both the children's and adults' workforce in social care, police, health and the voluntary sector.

2 Why do the LSCP and the SAEB want to raise aware-ness of the Think Family approach?

The LSCP and the SAEB for RBKC/ WCC want to ensure that frontline practitioners and managers understand and apply a 'Think Family' approach in their work.

This is as a result of the learning that emerged from a recent Safeguarding Adults Review (SAR) involving an adult with care and support needs who present-ed with severe neglect.

The household also comprised of several younger siblings under the age of 18.

A Think Family Approach SAFEGUARDING ADULTS EXECUTIVE BOARD

3 Key Learning Points from the Safeguarding Adults Review included:

- To always consider 'Think Family' approach where there is a parent-carer of an adult-child living with other younger children
- Importance of following No Access Policy
- Importance of escalation to safeguarding teams and regular supervision
- Managing aggressive patients and family towards staff

4 Think Family Survey Results

The LSCP and SAEB conducted a Think Family Survey late last year to gauge how well understood a Think Family approach was by frontline practitioners and managers across our workforce. The survey was completed by 278 workers. Participants responded to a number of questions, including: How confident would you say you feel about implementing the Think Family approach in your work? 28% responded 'very confident' 36% responded 'somewhat confident' 11% responded 'not so confident' 15% responded 'not at all confident'

6 Think Family: what should practitioners do?

- Think about the family's needs and all staff involved with the family so we can work together.
- Make sure information is shared appropriately according to the level of risk and the need for people to understand any difficulties.
- Escalate your concerns to appropriate levels of line management if you are not being listened to or heard.

5 Think Family: what should practitioners do?

The LSCP and SAEB would like to encourage frontline practitioners to:

- Consider the needs of the whole family and be responsive to those needs.
- Consider all the factors of everyone in the home, and frequent visitors, including things like poverty, use of drugs, alcohol, domestic abuse, and mental ill health, which may impact upon all the family.
- Managers were more confident around Think Family, than frontline staff. Staff had strong feelings that Think Family was being used, it improves response from the families.
- Need to implement appropriate training and try to ensure good working practices with other agencies as there was a lack of confident in implementing Think Family.

A seven-minute briefing has been produced on Think Family and further work will be taking place to embed into Adult Social Care Practice.

Case Study

Mr X Findings Said: Robust Managerial oversight for complex case work.

Partnership response from People involved: GP, District Nurses (DN), DN manager who had known Ms PD for around six years, Senior Case Manager (My Care, My Way), Senior Occupational Therapist (Community Independence Service), Social Worker (Adult Social Care) and teams of dedicated Care Workers from the succession of Care Providers.

This case study covers the last 15 months of Ms PD's life and provides an insight into the intensive partnership working between colleagues in Health and Social Care. The team consistently demonstrated compassion and willingness to go that extra mile in their care for Ms PD, a person with complex needs and a personality disorder. She either would not or could not weigh up the consequences of her decisions to refuse care and support on a regular basis, which then lead to extreme self-neglect and ultimately her death at the age of 65.

"As the allocated Social Worker, I was fully supported by both my Team Manager and Head of Service"

As Ms PD's condition deteriorated through her withholding consent for several weeks at a time to be washed or have her incontinence pad changed, the risk to her health and wellbeing escalated rapidly. As a consequence of Ms PD's severe self-neglect there was a build-up of faeces in her bed and on the floor, which led to fly larvae being found in her bed, on her body and within open wounds.

In spite of the extremely poor environmental conditions in Ms PD's room, which presented a risk to her health and all those who visited her, our Health and Social Care colleagues continued to respect Ms PD's past and present wishes, feelings, beliefs and values by delivering the care she needed at the pace she was willing and able to accept. It was heart-warming to hear our colleagues speak about Ms PD with such respect.

whilst at the same time speaking of their feelings of helplessness at her refusal to see the risk she was putting herself at by refusing personal care and investigations into the extreme pain she advised that she was experiencing.

In response to these increased risks, magnified due to Ms PD being restricted to bed and her refusal for many years to sit out of bed due to her fear of hoists. The Health and Social Care team, consisting of colleagues from Community London Central Health Trust CLCH, Clinical Commissioning Group CCG and the Council, met via the Risk Assessment Planning Protocol organised and chaired by the Adult Social Care Head of Service to devise strategies to mitigate the risks of Ms PD skin breakdown and sepsis.

Family's engagement with Health and Social Care was inconsistent, nonetheless, they were invited to meetings and the Social Worker maintained regular contact to obtain their views and to keep them informed of progress.

At the point when Ms PD was assessed by the social worker to lack capacity to make informed decisions regarding her care, an application was made to the Court of Protection with CCG and CLCH joined as parties to these proceedings.

Ms PD only felt able to accept on the fourth meeting to transfer over to a new mattress as her existing mattress was deflating. Each attempt required co-ordinated planning between our Health and Social Care colleagues to ensure there were colleagues with the appropriate skillset, who Ms PD trusted, to transfer her to a new mattress via a Slide Board.

Ms PD's personality disorder demanded patience and a co-ordinated approach to her care, and this required good communication between the colleagues in the team.

feelings, beliefs and values by delivering the care she needed at the pace she was willing and able to accept. It was heart-warming to hear our colleagues speak about Ms PD with such respect,

Ms PD sadly passed away, but there is no doubt that the Health and Social Care Team did their best to improve her life, but she was regrettably either unable and/or unwilling to accept this help.

Reviewing our own internal processes for Section 44 referrals and ensuring we are accountable for decisions we make throughout the process

The SAB must arrange a safeguarding adults review when an adult in its area dies or there is a near miss as a result of abuse or neglect and there is concern that partner agencies could have worked more effectively to protect the adult.

We have been working on the process and practice to deliver different types of Safeguarding Reviews under a Section 44 of the Care Act in order to maximise on the learning for front line staff across the partnership. We realise that learning takes time and cannot be a one size fits all approach.

Factors such as complexity of case and repeating themes come into play. Other learning processes require review as we learn more from the cases which are discussed in the Safeguarding Adults Case Review Group.

Updates from the Learning Disabilities Mortality review group indicated that themes coming out of completed reviews included:

A Learning Disabilities case

Does not meet the criteria for S44 though work was done regards this near miss?

Mr N was admitted to an Acute Medical Hospital in January 2020 and treated for Sepsis on account of a urinary Tract Infection and Aspiration Pneumonia he was treated with IV antibiotics. He was discharged with oral antibiotics. The following day he became unresponsive after having choked on some breakfast. The paramedics manually removed the chewed breakfast and took Mr N to hospital where he was assessed for a Naso-gastric Tube.

He was incredibly unwell and very much fighting for his life. A safeguarding sec. 42 was raised as it was felt his initial discharge was unsafe, and questioned whether Mr N would be in the same position, should he have remained an inpatient with access to appropriate therapies to fight infections.

There are concerns in a number of areas which was deemed a near miss.

- 1. That Mr N was unsafely discharged and as a result, was re-admitted one day later with very significant health concerns which could lead to risk to life
- 2. That in relation to the lack of communication between hospital and the provider during the first hospital admission and subsequent discharge this attributed to poor provision of specialist liaison and reasonable adjustments.

Both the discharge itself and communication issues with the provider were looked into to establish if anything could have prevented Mr N's serious health deterioration and re-admission to hospital.

The Section 42 enquiry revealed that Mr N presented at the hospital without a Hospital Passport with his personal details and did not have a review of his difficulties in swallowing which ought to have been done under a SALT assessment.

It was concluded that Mr N did not receive appropriate reasonable adjustment and specialist liaison during his initial admission and his carers were not empowered to advocate for their client.

- Documentation around Mental Capacity and Best interest sometimes missing or poorly recorded
- Delays in diagnosing and treating serious medical conditions
- Urgent /proactive treatment not being delivered in line with clinical guidelines and diagnosis and treatment of serious medical conditions
- Issues seem to be greater when dealing with urgent care within an acute hospital

The consequences are that people with Learning Disabilities are encountering delays in diagnosis and treatment of serious medical conditions Page 55

We have been exploring these themes using a thematic review approach of several cases with repeating themes and had a focus session on Learning Disabilities cases in which very similar findings were discussed with our Acute Hospital partners.

The Safeguarding Case Reviewed Group reviewed several cases in 2019/20 but did not conclude any cases in the year.

Violence Against Women and Girls (VAWG) and Adult Safeguarding

Partnership Working

The relationship between the SAEB and the VAWG board is one of equal partners underpinned by a joint working protocol.

The VAWG and SAEB will be jointly accountable for developing plans to prevent violence against women and girls, including domestic abuse and modern day slavery (as defined by the Care Act 2014). These will be led and overseen by the VAWG partnership apparatus.

Approximately 200 cases per year across the Bi-Borough are considered by adult safeguarding processes where domestic abuse is a significant feature. Of these, 10 per cent will be high risk and require the support of the, Multi-Agency Risk Assessment Conference, MARACs.

There is a sometimes complex and symbiotic link between those experiencing domestic violence or elder abuse and their carers, either as victims or perpetrators. These complexities can impact upon assessment and interventions of practitioners across disciplines. This is an emerging area of work in which we want to maximise learning from having joint reviews and audits.

The SAEB Safeguarding Adults Case Review Group supports the SAEB in discharging its statutory duties in regard to Safeguarding Adults Reviews (SARs) and undertakes a programme of case audits to inform organisational and professional development.

Similarly, the VAWG board via the Risk and Review Operational Group supports the respective Community Safety Partnerships to fulfil their statutory duties in regard to managing the processes for establishing Domestic Homicide Reviews (DHR) and implementing their learning and recommendations.

On occasion the SAR and DHR processes may be undertaken simultaneously. The processes for these reviews have been established by Government and are separate. However, shared learning will be considered as the reviews are undertaken to maximise benefit from participating organisations

There are opportunities to formalise the statutory DHR and SAR joint arrangements through a shared protocol which makes explicit the roles, responsibilities, accountabilities and processes for joint statutory reviews.

Throughout 2019/20 Safeguarding Adults has supported the review of DHR processes locally. A DHR task and finish group has been put together to refine this process and ensure that learning from all DHRs are streamlined, the accountability process is strengthened, key learning 'themes' are identified, and a clear protocol is put in place.

An outcome from this group has been a thematic action plan drawn up from findings from local DHR's over the past three years. Theme 8 is related to Adult Safeguarding which will be worked on in the coming year.

Thematic Action plan DHR group

- To raise awareness of the prevalence of familial abuse (+ older people) as a form of domestic abuse.
- To effectively communicate to partners thresholds for victims to access support and how this aligns with Care Act obligations.
- Carers Assessments to include a question around domestic abuse. (how it is asked)
- Think Family when the Victim of abuse is also the main carer for an elderly person



Jargon Buster

There is a lot of safeguarding jargon in health and social care and we are committed to busting it. This is Our Safeguarding Jargon Buster using plain English definitions of the most commonly used words and phrases in this annual report

Abuse: Harm that is caused by anyone who has power over another person, which may include family members, friends, unpaid carers and health or social care workers. It can take various forms, including physical harm or neglect, and verbal, emotional or sexual abuse. Adults at risk can also be the victim of financial abuse from people they trust. Abuse may be carried out by individuals or by the organization that employs

Accountability: When a person or organization is responsible for ensuring that things happen and is expected to explain what happened and why.

Adult at risk: An adult who is in need of extra support because of their age, disability, or physical or mental ill-health, and who may be unable to protect themselves from harm, neglect or exploitation.

Advocacy: Help to enable you to get the care and support you need that is independent of your local council. An advocate can help you express your needs and wishes, weigh up and take decisions about the options available to you. They can help you find services, make sure correct procedures are followed and challenge decisions made by councils or other organizations.

Best interests' decision: Other people should act in your 'best interests' if you are unable to make a particular decision for yourself (for example, about your health or your finances). The law does not define what 'best interests' might be but gives a list of things that thPage 58

people around you must consider when they are deciding what is best for you. These include your wishes, feelings and beliefs, the views of your close family and friends on what you would want, and all your personal circumstances.

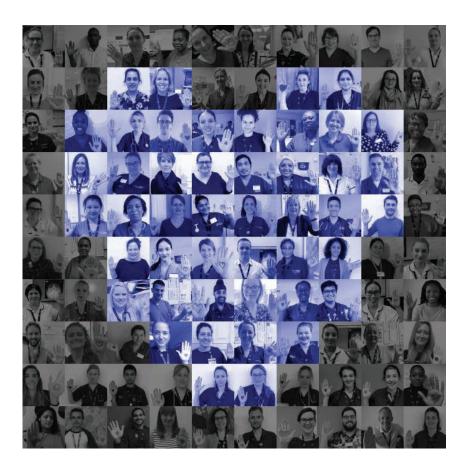
Carer: A person who provides unpaid support to a partner, family member, friend or neighbour who is ill, struggling or disabled and could not manage without this help. This is distinct from a care worker, who is paid to support people.

Co-production: An equal relationship between people who use services and people who provide services. They work together on all stages from designing services to making them happen.

Covid-19: The formal name given to the current outbreak of coronavirus. It is an infectious illness that may be mild or severe that is caused by a coronavirus. It usually causes a fever, cough and shortness of breath, and may progress to pneumonia and respiratory failure. The word comes from coronavirus plus disease, and the 19 refers to 2019, the year the disease was first identified in China.

Deprivation of Liberty Safeguards: Legal protection for people in hospitals or care homes who are unable to make decisions about their own care and support, property or finances. People with mental health conditions, including dementia, may not be allowed to make decisions for themselves, if this is deemed to be in their best interests. The safeguards exist to make sure that people do not lose the right to make their own decisions for the wrong reasons.

Domestic Homicide Review (DHR): A multiagency review of the circumstances in which the death of a person aged 16 or over has, or appears to have, resulted from violence, abuse or neglect by a person to whom they were related or with whom they were, or had been, in an intimate personal relationship, or a member of the same household as themselves



Learning Disabilities Mortality Review

(LeDeR): A national research programme looking at why people with learning disabilities often die at a younger age than other people. LeDeR reports to NHS England on the main causes of these deaths and on how they could be prevented.

Liberty Protection Safeguards: In July 2018, the Government published a Mental Capacity (Amendment) Bill, which passed into law in May 2019. It replaces the Deprivation of Liberty Safeguards (DoLS) with a scheme known as the Liberty Protection Safeguards (although the term is not used in the Bill itself)

Making Safeguarding Personal (MSP): It means that you are asked what you want to do about the incident of abuse and how you may be supported in making yourself safe. It helps you to take control and it gives you choice.

Mental capacity Act 2005: A law that is designed to protect people who are unable to make decisions about their own care and support, property or finances, because of a mental health condition, learning disability, brain injury or illness. Mental capacity is the ability to make decisions for yourself. The law says that people may lose the right to make decisions if this is in their best interests.

Near Miss: Something that is not supposed to happen and is prevented before harm is caused.

Pandemic: Outbreaks of a particular disease all over the world, or a very large part of it, at the same time. It does not relate the severity of the disease itself.

Self-harm: The most common form of selfharm involves cutting of the skin using a sharp object. Self-harm is primarily a coping strategy and can provide a release from emotional distress and enable an individual to regain feelings of control. It can be a form of selfpunishment for feelings of guilt. It can also be a way to physically express feelings and emotions when individuals struggle to communicate with others.

Think Family: A Think Family approach is the steps taken by practitioners to identify wider family needs which extend beyond the individual they are supporting.

What the board will be working on in 2020/21

Making Safeguarding Personal

I am able to make choices about my wellbeing

Creating a Safe and Healthy Community

- I am aware of what abuse looks like and feel listened to when it is reported
- I am kept up to date and know what is happening.
- I want to feel safe in my own home
- My choices are important
- My recovery is important
- You are willing to work with me

Leading, Listening and Learning

- We are open to new ideas
- We are a partnership of listeners
- We give people a voice
- We hold each other to account
- We want to learn from you

The Board will continue to be guided by what people are telling us is important to them.

We continue to work in the coming year on the themed areas below.

- **1.** Culture of Learning: What difference is the board making
- 2. Regulated services, Care Homes and Domiciliary Care: Care Home resilience planning with a Covid-19 lens
- **3.** Community Safety Partnership: Crime and vulnerable adults **Page 60**

- **4.** Who is our community what voices do we not hear: Working with diverse communities?
- **5.** Mental Capacity Act and best interests in the community
- **6.** Housing and Safeguarding: Hoarding and self-neglect
- **7.** Quality Assurance: How do we has a board hold our partners to account

Appendices

Who is the Safeguarding Adult Executive Board?

Membership and tasks

Section 43 Schedule 2 of the Care Act 2014 outlines local authorities' responsibilities to set up a Safeguarding Adults Board (SAB). We have a mix of statutory partner membership and other members whom we consider have the right skill and experience to support local needs.

The statutory members of the Safeguarding Adults Executive Board:

- The Bi Borough Executive Director of Adult Social Care and Health
- The Chief Nurse and Director of Quality, Caldicott Guardian, NHS North West London Collaboration of Clinical Commissioning Groups (NWL CCGs)
- BCU Commander of Central West, Chief Superintendent, Metropolitan Police

An example of the development of close multi-agency partnership working with the NHS for the benefit of people with a learning disability.

A young woman with learning disabilities and mental health problems was admitted via A+E after being rescued from her burning flat. She had a known history of setting fires and self-harm. She was taken to our intensive care unit and then transferred to St Charles' once she was medically fit. Close communication with Westminster Learning Disability Partnership enabled us to identify her whilst still in the emergency department and provide background information to the hospital. Psychiatry Liaison, Westminster Learning Disability Partnership and community mental health were all involved to ensure her safety and care once she had left our trust.

There are senior representatives on the Board, from the following organisations:

- London Fire Brigade
- Imperial College Healthcare NHS Trust
- Chelsea and Westminster Hospital Foundation NHS Trust
- The Royal Marsden NHS Foundation Trust
- Central London Community Healthcare Trust
- Central North West London NHS Foundation Trust
- Community Rehabilitation Company (CRC)
- National London Probation Service
- Council staff from Children's Services, Community Safety, Housing, Trading Standards and Adult Social Care
- Local councillors
- Mind
- Genesis Notting Hill Housing

- Public Health Community Champions Programme
- Royal Brompton and Harefield HNS Foundation Trust
- Healthwatch
- Local Account Group

Board members could be the senior 'go to' person in each of these organisations or services with lead responsibility for adult safeguarding.

They bring their organisations' adult safeguarding issues to the attention of the board, promote its priorities, and disseminate lessons learned throughout their organisation.

The board can use its statutory authority also to assist members in addressing barriers to effective safeguarding that may exist in their organisation, and between organisations.

This will require the SAB to develop and actively promote a culture with its members, partners and the local community that recognises the values and principles contained in 'Making Safeguarding Personal'. It should also concern itself with a range of issues which can contribute to the wellbeing of its community and the prevention of abuse and neglect, such as:

- the safety of people who use services in local health settings, including mental health
- the safety of adults with care and support needs living in social housing
- effective interventions with adults who selfneglect, for whatever reason
- the quality of local care and support services
- the effectiveness of prisons in safeguarding offenders
- making connections between adult safeguarding and domestic abuse
- Supporting transition arrangements between Children and Families and Adult Social Care.

The safety of people in local health settings is important to us

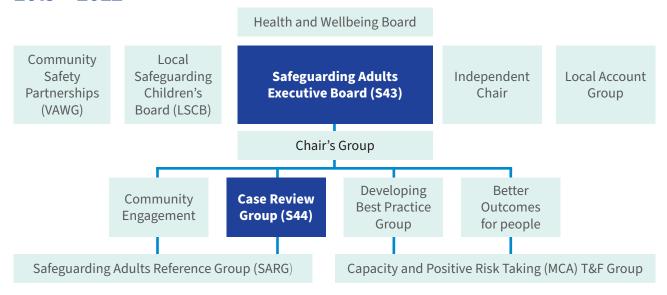
A man in his 60s with learning disabilities was the subject of a prolonged safeguarding investigation. Several admissions for aspiration pneumonia gave rise to a view of unsafe discharges. After many discussions with a learning disability provider and good partnership working with professionals, involvement of our speech and language service, a better eating plan was developed and carers were taught how to feed him correctly to avoid aspiration and reduce future admissions. This case was considered by the case review group and included with similar cases to show the learning from joint working and information sharing across agencies.

How the Safeguarding Adults Executive Board works

3. Structure and Substructures.

The board may request members to take particular actions. This should be specified in the terms of reference and through clear structures and governance arrangements. The governance arrangements can be seen below.

The Safeguarding Adult Executive Board and Work-Streams 2019 – 2022



The SAB should agree, record and regularly review:

- the roles and responsibilities of each member or partner, organisation or individual
- how the SAB is resourced
- how the SAB should operate
- any subgroup structures
- any task-and-finish groups



The SAEB has two different service user groups.

The Local Account Group who support the development of the Board at a strategic level and the Safeguarding Adults Reference Group who are service users by experience.

Financial Contributions

Most of the funding for the board comes from the Local Authorities. However, we are grateful to; The North West London Collaboration of Clinical Commissioning Groups (NWL CCGs) contribution of £20,00.00 per borough per year and the Mayor's Office for Policing and Crime who provide an annual contribution of £5,000 to each borough for the local safeguarding adult board.

Also, for the fourth year running, the London Fire Brigade has contributed £1,000 per borough, to be shared between the Safeguarding Adults Board and the Local Safeguarding Children Board.

The money is a welcome contribution to the on-going costs towards raising the awareness of Adult Safeguarding in our communities via events and promotional materials such

Page 63 os . It is also used to support the

We are grateful for the number of organisations who chair the subgroups of the board from the following organisations:

- Central North West London NHS Foundation Trust
- Imperial College Healthcare NHS Trust
- Central London Community Healthcare Trust
- The Royal Marsden NHS Foundation Trust
- London Fire Brigade
- Metropolitan Police
- Notting Hill Genesis Housing
- The North West London Collaboration of Clinical Commissioning Groups (NWL CCGs)

commissioning of Safeguarding Adult Reviews which is discussed in the Listening Learning section of this annual report.

We also acknowledge the value of the work of the subgroups which are all Chaired by senior members of the Board. The Sub-group Chairs are integral to supporting the workings of the Board and delivery of the business plan. Attendance is very good and members are committed and work hard to progress the board's priorities and to ensure that people are safeguarded.

Links to other boards and partnerships

The board works effectively with other boards and partners including:

- Local Safeguarding Children Boards (LSCBs)
- Community Safety Partnerships (CSPs)
- Violence Against Women and Girls (domestic abuse forums)

This approach enables overarching strategies such as making safeguarding personal and think family to be linked into the work of the wider Safeguarding communities. However, we recognise that further work is required in this area to ensure greater collaboration and will be next year looking at how other boards interface with each other to include the Health and Wellbeing Board.

Work reported on includes:

- **1.** Joint *Think Family Survey* with Local Children's Partnership Findings in the Leading Listening Learning section
- **2.** Working with Community Safety Partnerships Elder Abuse and Crime -Findings found in the Leading Listening and Learning section

What the Board worked on in 2019/20 Business Plan

The outcome of the peer review provided key messages on what is working well and areas for consideration. These have been taken forward to inform the board Business Plan for 2019/22.

Making Safguarding Personal	Leading Listening and Learning	Creating a safe and healthy community	Governance
Think Family: To jointly raise awareness and develop guidance and tools Transition Group: Joint workshops with operational staff to develop sound pathways for young adults into adult services which are relevant to need this may mean statutory or voluntary organisations. SAEB and LSCB: Joint Board Event to review work and share experiences Lead group or agency LSCB SAEB	Liberty Protection Safeguards: Help prepare SAEB Partnership for LPS (Postponed till April 2022) Multi-agency Quality Assurance: Partnership Audit of Mental Capacity Audit practice Partnership awareness Sec.44 pathways Homeless and Roughsleeping implications for Safeguarding London Fire Brigade LeDer Reviews	Prevention "Raising Awareness of Safeguarding": Increasing service users by experience involvement in SAEB activity Co-designed events for seldom heard service user groups Multi-agency leaflets -Review Train the Trainer-Refresh Strategic involvement in shaping the board strategy Lead group or agency Community Engagement group Safeguarding Adults Reference Group Local Account Group	Governance review: Legal Indemnity Insurance Membership review Finance review Service User Engagement Review Our Values Cycle of Quality Assurance function Lead group or agency SAEB
Variability in referral rate across partnership: Consistency in responses Bi-Borough Board to align local practice and pathways Lead Group Better Outcomes for People	Developing good partnerships practice around managing risk and defensible decision making Lead group or agency Liberty Protection Safeguards Safeguarding case reference Group	Advocacy Re-commissioning Workforce development Public Awareness Lead group or agency ASC Commissining	IT systems and Information Sharing • Statement from the SAEB to reinforce obligations • Focus on best practice in recording Lead group or agency • Better Outcomes for People



Safeguarding Awareness Week Community Engagement Group

19 November 2019

14.00 - 16.30 Small Hall, Kensington Town Hall, W8 7NX

NETWORKING EVENT

This networking event hosted by the Safeguarding Adults Executive Board is open to all residents, staff and service providers. Presentations will start promptly at 2:30pm and will include:

Staying 'Safe at Home'
Safeguarding Awareness

National Safeguarding Adults Week 2019

18th to 24th November 2019

People in the Royal Borough of Kensington and Chelsea and Westminster City Council have the right to live a life free from harm where communities:

- have a culture that does not tolerate abuse
- work together to prevent abuse
- know what to do when abuse happens













mistreated? ied? lected? Don't ignore it. Report it.

Kensington and Chelsea
T 020 7361 3013
E socialservices@rbkc.gov.uk

Westminster T 020 7641 2176

E adultsocialcare@westminster.gov.uk

















