

# Annual Report | 2023/2024



# Contents

1. Forward by the Independent Chair – Dr Carolyn Kus .....	3
2. BSAB Board .....	4
3. How is BSAB Funded? .....	6
4. Key Safeguarding Facts for 2023-2024 .....	7
5. Our Vision and Core Duties .....	8
6. Progress and Achievements of the Board 2023-2024 .....	10
7. Progress and Achievements of Partner Organisations 2023-2024 .....	11
8. Making Safeguarding Personal .....	37
9. What is a Safeguarding Adult Review (SAR)? .....	40
10. Assurance Report 2023-2024 .....	41
11. How do we support learning, development, engagement, and information sharing? .....	43
12. Future Priorities 2023-2025 .....	44
13. Appendices .....	45
14. Glossary .....	50

# 1. Forward by the Independent Chair – Dr Carolyn Kus



**Dr Carolyn Kus**  
Independent Chair

**I am pleased to share with you Birmingham Safeguarding Adults Board (BSAB) annual report, this report is an opportunity for us to not only share our achievements but also to identify future areas of focus.**

As a partnership it is important that the public are given an insight into our work and as a Board we demonstrate the progress we have made and equally the challenges raised throughout the year.

Board Members are committed to working together to safeguard our citizens at risk, this last year we have worked together as a partnership to focus on the following key areas of concern which were self-neglect,

hoarding, care market quality and trauma informed practices. Next year we will be re-launching our new strategic plan with our priorities and key areas of activity of focus for the next 3 years.

The report has been styled to be an informative document using infographics to make our data more accessible, we have included citizens stories and subsequent learning, there is also a section which details the progress and achievements of both the board and our partner organisations.

As a Board we are always seeking to develop, we have agreed to change our governance and reporting processes to become more focused this includes a series of board development sessions, over the next 2 years, as well as the introduction of a policies and procedures subgroup.

Thank you to all partners, citizens and organisations for their support and I look forward to building stronger partnerships and achieving our goals for the citizens of Birmingham.

“ *Our vision is that people with care and support needs in Birmingham are able to live their lives free from harm.* ”



## 2. BSAB Board

### Welcome to Birmingham Safeguarding Adults Board (BSAB) Annual Report for 2023-2024.

The Care Act 2014 makes the forming of a Safeguarding Adults Board (SAB) a statutory requirement, the board comprises of senior leaders from key agencies responsible for adult safeguarding in Birmingham. The effectiveness of the board is reliant on the commitment, collaboration and support of key stakeholders, partner agencies and other local and regional Boards. BSAB is independent which enables it to provide effective scrutiny of local adult safeguarding arrangements, the Board meets quarterly and takes a strategic lead in the protection of adults with care and support needs.

The Annual Report (a requirement of the Care Act) gives BSAB the opportunity to share annually their progress, challenges and areas of identified development. As an added element of oversight, BSAB presents the Annual Report to both Overview and Scrutiny Committee, as well as the Integrated Care System through the Place board, on an annual basis. Our main purpose as a Board, is to obtain assurances that local safeguarding arrangements across the partnership are in place and are robust to protect the welfare of local citizens who may be at risk of abuse and/or harm, and to take relevant measures where concerns are raised.

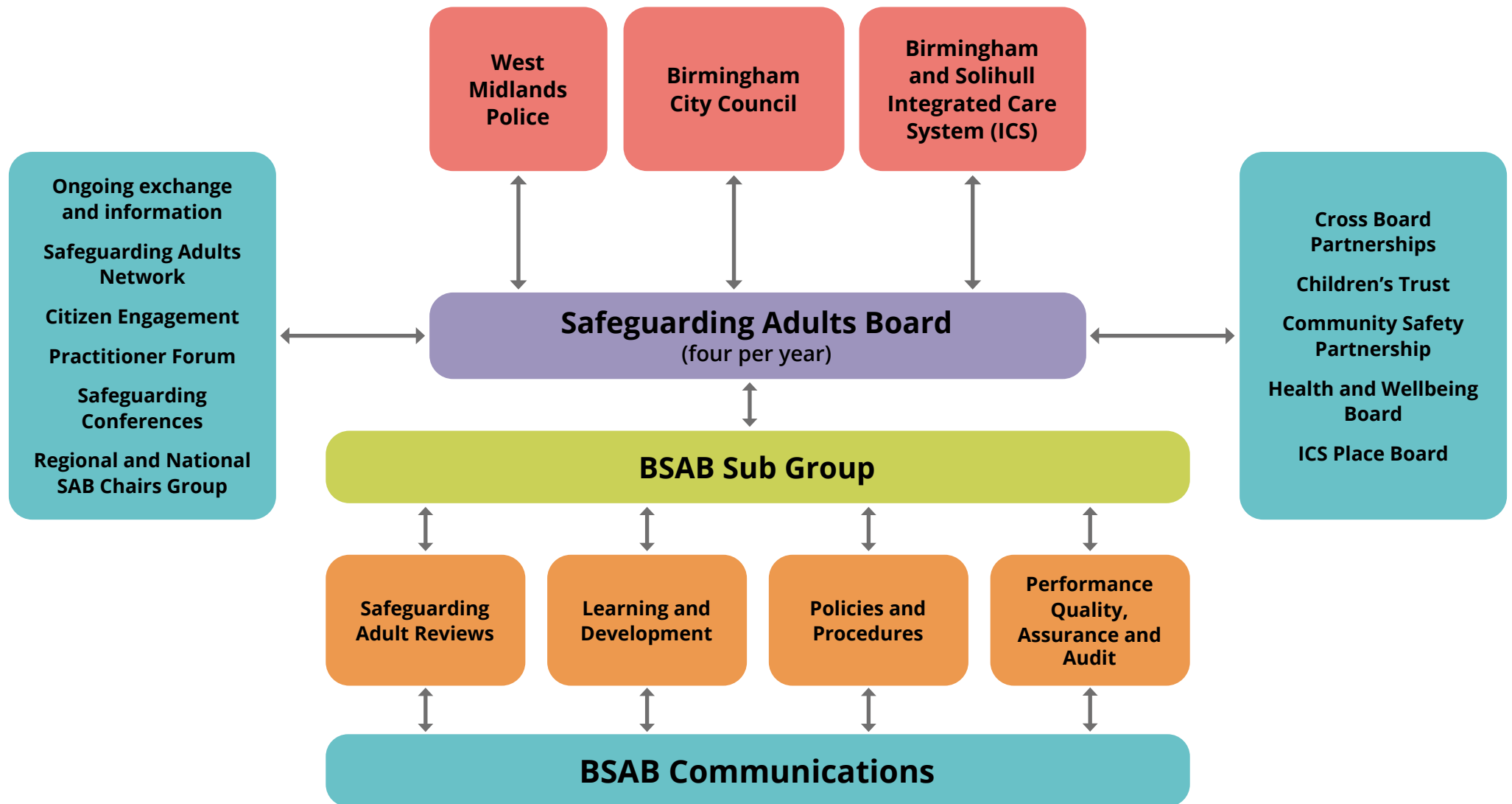


BSAB's membership is made up of senior officers nominated by partner agencies, partners of the Board have delegated authority to represent and to make decisions on behalf of their organisation. Members of the Executive Board are:

- Birmingham City Council - Adult Social Care
- Birmingham City Council - City Housing
- West Midlands Police
- Birmingham and Solihull Integrated Care System (ICS)
- Healthwatch Birmingham
- West Midlands Fire Services
- Voluntary Sector Representation – Women Acting In Today's Society (WAITS)
- Birmingham Community Healthcare Foundation Trust
- Birmingham and Solihull Mental Health Foundation Trust
- University Hospital Birmingham.



# BSAB's Board Structure 2024



# 3. How is BSAB Funded?

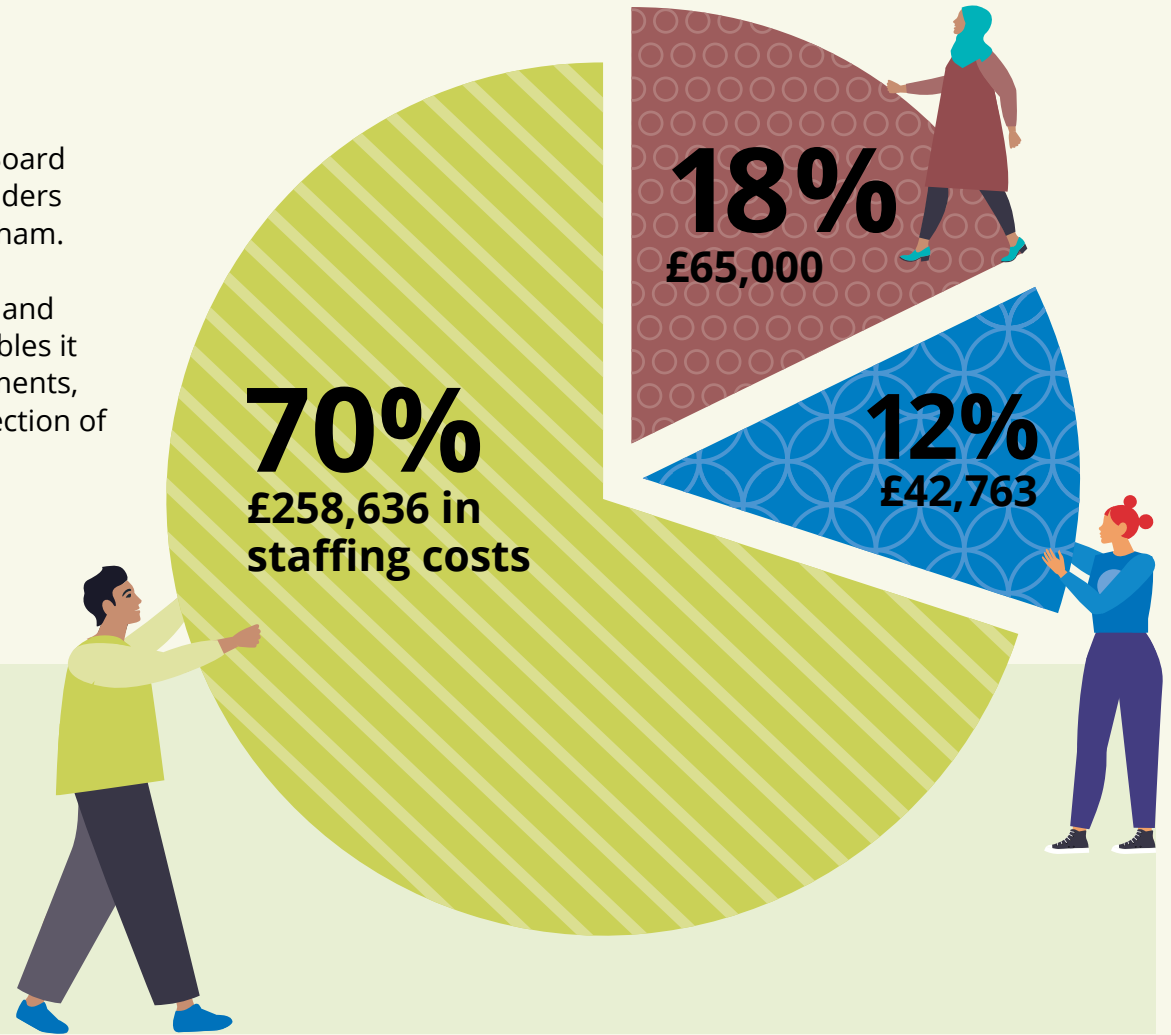
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### Financial Contributions 2023-24

- Birmingham City Council
- Birmingham and Solihull Integrated Care System
- West Midlands Police

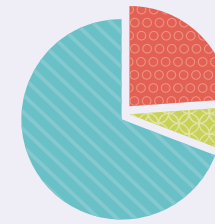
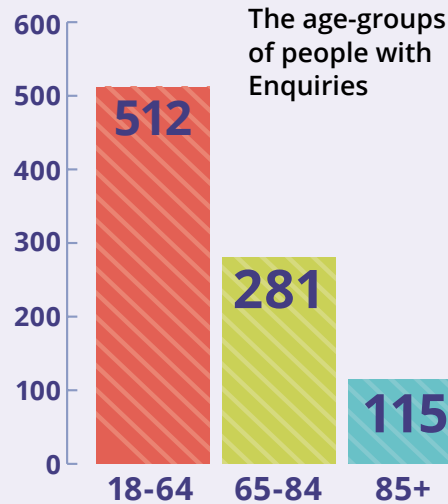


# 4. Key Safeguarding Facts for 2023-2024

**876,858**  
adults live in  
Birmingham



**152,753**  
are aged 65 and over



**69%**  
1,150 concluded Enquiries listed the source of risk as someone known to the person at risk

**24%**  
400 concluded Enquiries involved service providers

**7%**  
111 concluded Enquiries listed the source of risk as someone not known to the person at risk

**5%**  
Increase in the number of Concerns raised, up from 12,951 last year

**51%**  
Enquiries started previously – down from 1,867 last year but higher than 834 the year before

**532**  
Enquiries involved allegations of neglect

**431**  
Enquiries involving allegations of psychological abuse

**1045**  
Abuse or neglect occurred in the person at risk's home

**423**  
Enquiries involved alleged physical abuse

**550**  
Enquiries involved allegations of Financial Abuse

**Ethnicity of enquiries raised:**

**493**  
White British

**333**  
Black and Minority Ethnic

**82**  
Not Known

By **Concern** we mean the reporting and responding stage in the safeguarding process under the Care Act 2014.

By **Enquiry** we mean the planning and undertaking of the enquiry stage in the safeguarding process under the Care Act 2014.

## 5. Our Vision and Core Duties

“ *Our vision is that people with care and support needs in Birmingham are able to live their lives free from harm.* ”

During the period 1 April 2023 and 31 March 2024 the Board met 4 times and was supported by the Delivery Group and 3 subgroups – Learning and Development, Safeguarding Adult Reviews, and Quality and Performance.

Safeguarding Adults Boards have three core duties as detailed by the Care Act 2014:

- **To publish a Strategic Plan setting out how they will meet their objectives and how their members and partner agencies will contribute. The plan must be developed with the local community involvement and the SAB must consult the local Healthwatch.**
- **To publish an Annual Report detailing what the Birmingham Safeguarding Adults Board (BSAB) has done during the year.**
- **To conduct any Safeguarding Adult Reviews in accordance with Section 44 of the Care Act.**



# The Annual Report 2023/2024 provides an overview of the Boards' achievements against the BSAB Strategic Plan 2021-2024. The Strategic Plan is being reviewed and refreshed in 2024 and will involve collaboration with Healthwatch.

The Annual Report, Strategic Plan and the principles of the Board are fully aligned with the six key principles outlined in the Care Act 2014.



## Empowerment

I am consulted about the outcomes I want from the safeguarding process and these directly inform what happens.



## Prevention

I am provided with easily understood information about what abuse is, how to recognise the signs and what I can do to seek help.



## Proportionality

I am confident that the responses to risk will take into account my preferred outcomes or best interests.



## Protection

I am provided with help and support to report abuse. I am supported to take part in the safeguarding process to the extent to which I want and to which I am able.



## Partnership

I am confident that information will be appropriately shared in a way that takes into account its personal and sensitive nature. I am confident that agencies will work together to find the most effective responses for my own situation.



## Accountability

I am clear about the roles and responsibilities of all those involved in the solution to the problem.

# 6. Progress and Achievements of the Board 2023-2024

For the period 2023-2024, BSAB achieved several key achievements and identified areas for learning and development which will be incorporated into the new strategic plan and identified priorities.

Key Achievements	Areas for Development and Learning
<ul style="list-style-type: none"><li>• Signed up to the Trauma Informed Practice West Midlands Coalition.</li><li>• Kept our information leaflets up to date to inform professionals and citizens on safeguarding.</li><li>• Continued to strengthen our working with the Children’s Trust - looking to development areas of commonality for joint working.</li><li>• Continued to work with and input into regional and national safeguarding groups/Boards.</li><li>• Strengthened and developed our dashboard to be more inclusive of partners data, enabling us to focus on the wide aspects of safeguarding.</li><li>• Continued to seek assurance from partners using audit and inviting partners to present at executive board.</li><li>• Safeguarding conference on Trauma Informed Practice undertaken using a previous SAR as a case study.</li><li>• Signed up the regional DWP protocol so we work closely with colleagues in DWP to identify potential safeguarding issues. DWP will be invited to present updates to the board.</li><li>• Held several practitioner forums with a focus on self neglect, and information sharing.</li><li>• Updated the governance of the board including board membership to be more inclusive.</li><li>• Published and presented the Annual Report to Birmingham City Council Overview and Scrutiny Committee and ICS Place Board.</li></ul>	<ul style="list-style-type: none"><li>• New strategic plan with agreed priorities.</li><li>• Plan on a page.</li><li>• Subgroups new Terms of Reference (TOR) and reporting structures.</li><li>• Communication Strategy.</li><li>• Annual Safeguarding Conference.</li><li>• Strengthen Board Governance.</li><li>• Board Members Development Sessions.</li><li>• Practitioners Forums.</li></ul>

# 7. Progress and Achievements of Partner Organisations 2023-2024

The Board worked closely with its statutory partners, with partners being both present and Chairing at the subgroups. We asked this year for a focus of achievements and outcomes in relation to Making Safeguarding Personal (MSP) and areas for development.

## West Midlands Fire Service (WMFS)

Key Achievements	Making Safeguarding Personal
<p>WMFS has an updated Safeguarding Policy and Procedures which states that safeguarding is everyone's responsibility. There is now a permanent Safeguarding Manager and a Flexi-Duty Service to support staff to respond to, report and refer safeguarding concerns in a timely manner. Local Prevention Leads are in place to embed the policy and procedures in practice.</p> <p>WMFS has a Safeguarding Competency and Supervision Framework with 4 levels of safeguarding training. Implementation is in progress. Safeguarding is included in the induction for all new Fire Fighters. Level 1 safeguarding awareness eLearning is mandatory for all staff.</p> <p>The Partnerships and Prevention Team represent WMFS on Safeguarding Boards. They support SARs and CSPRs where appropriate and ensure learning is communicated in WMFS. They are involved in multi-agency reviews to identify learning and improvements including DHRs and SARs.</p>	<p>In the last quarter of 2023/24, WMFS reviewed its provision of complex needs support and fire safety tutoring. This review has created a specific role dedicated to providing professional supervision for this team. Complex needs support enables WMFS to interact with some of our most vulnerable members of society over a longer time than an emergency service would usually (in an emergency situation). This longer-term approach is vital in understanding the needs of the individual and enables us to work with that person to address these needs, and in doing so ensure that Making Safeguarding Personal is considered (where appropriate).</p> <p>The Partnerships and Prevention Team represent WMFS on Safeguarding Boards. They support SARs and CSPRs where appropriate and ensure learning is communicated in WMFS. They are involved in multi-agency reviews to identify learning and improvements including DHRs and SARs. These learning and improvements are discussed within a panel environment, allowing professionals to discuss cases where Making Safeguarding Personal should have been considered. If it was not, this can be highlighted, discussed and appropriately actioned in these environments. WMFS have a Safeguarding Oversight and Assurance Group within which we discuss key learning points from said outcomes. Core attendees of these groups cross all departments within WMFS, allowing for understanding throughout the organisation.</p>

## Areas for Development/Learning

Level 1 Safeguarding Awareness training has been introduced and is mandatory for all WMFS staff. This training includes MSP.

Several members of staff have completed level 4 Safeguarding training in order to provide resilience when Safeguarding Manager is absent.

## Organisational Plans

Level 1 Safeguarding Awareness training has been introduced and is mandatory for all WMFS staff. This training includes MSP.

Several members of staff have completed level 4 Safeguarding training in order to provide resilience when Safeguarding Manager is absent.

## BSAB Focus

Highlighting training events would be most beneficial as we are currently confirming job specifications/scopes within a range of departments which relate to safeguarding. Understanding what training may be on offer will enable us to train our staff to a higher level and gain assurance that we are doing so effectively.



## Birmingham Community Healthcare NHS Foundation Trust (BCHC)

### Key Achievements

The Safeguarding team's role is to ensure that all staff in the organisation have access to effective safeguarding policies, training, advice and supervision, in accordance with national and local requirements and standards. Key achievements:

- To keep our workforce safe and resilient, we have continued to promote the Safeguarding service and increase our visibility across the organisation, embedding a culture of recognition and response to safeguarding, supporting patients/citizens, communities, and our own staff within the organisation. This has been demonstrated by the increase in safeguarding advice calls into our Duty service.
- We continue to embed our team ethos of 'Think Family' and integrated approach to safeguarding. This incorporates that 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 adults with needs for care and support. This has been further evidenced by the launch of the Domestic Abuse for Managers guidance, which supports managers to appropriately support staff members and allows Safeguarding Adults and Children Practitioners to work together to provide a seamless service.
- We offer a blended approach to safeguarding training, giving colleagues more flexibility to customise their learning. This has included a suite of face- to-face, virtual, and e-learning opportunities. This has been evidenced by staff meeting compliance Key Performance Indicator targets of above 85% across the divisions we serve. Our training includes meeting the needs of all staff including NHS apprentices, volunteers and a growth in international recruits. Additionally, we have supported Birmingham Safeguarding Adults Board by leading on a number of Safeguarding Forums where multiagency development is vital. We have heavily invested in our recruitment and retention through developing our own staff with learning opportunities to increase knowledge across our service which maintains standards.
- We have established stronger links with our Trust colleagues and multi-agency partners, acknowledging the benefits of joint working, where we are maximising the effectiveness of multi-agency decision-making, sharing problems and solutions, and efficiently delivering safeguarding services. The Safeguarding team has offered bespoke support and guidance into teams where safeguarding risks and concerns have escalated; this work has been supported with a suite of audits to seek assurance of safeguarding practice across BCHC with quarterly safeguarding newsletters shared supporting learning across the organisation. To support this, we have linked with the new Patient Safety Incident Response Framework which helps explore themes where learning can aid NHS improvements.

## Making Safeguarding Personal

We evaluate outcomes of key achievements in a number of ways which include a) audits which includes day and night audits, customer service and dignity audits, b) a Duty system in place which records all actions on interventions where outcomes are important, c) the sharing of safeguarding data in a Safeguarding Sub Committee meeting where check and challenge are in place to support Trust activity, d) the sharing of citizen stories in relevant forums including Trust and BSAB forums. Two good examples to highlight are:

- On each section 42 enquiry we complete a Fact Find to support the Local Authority in addressing allegations of abuse. This process includes capturing the Patient voice on each case to gain information and seek consent so that we are acting in tandem with the patients wishes, this safeguarding element is backed up with a robust Patient Experience process which focusses on quality, compliments and complaints.
- We have a robust audit and workplan which is monitored regularly in safeguarding sub committee where key goals over the coming year are monitored and developed linked to BSABs plan on a page and in response to local or national cases where there are lessons to learn. The work and audit plan rely on a team of professionals where check and challenge take place in the strive to meet the needs of those with care and support needs.

## Areas for Development and Learning

The Safeguarding team is represented on the Trust's Mandatory Training Group which identifies training needs and leads across the Trust supported by a Quality Assurance Training Group (QATG) for the development of individual training packages which are quality assured and scrutinised to meet the standards set in the Safeguarding Intercollegiate document, which ensures staff have appropriate training for their role with the expectation that our patients/ citizens are safeguarded and supported. Within the last 12 months, the QATG has updated and approved the mandatory joint level 2 Safeguarding e-learning, in accordance with local and national changes, and to incorporate learning from recent reviews as well as reviewing and updating level 3 training and multiple other packages. These updates reflect Trust to policies and guidance which police our activity to embed the Care Act (2014).

This year, the face-to-face Safeguarding level 3 training has continued with a regular offer to deliver Mental Capacity Act (2005), Care Act 2014 Section 42 Enquiries, domestic abuse training, DASH assessment training, self-neglect and homelessness packages.

The quality assured level 3 Safeguarding Adults self-neglect training package is now embedded into our Virtual Campus online learning platform alongside other packages to support ease of access. A bespoke package was also developed to meet the learning needs identified in a Learning from Lives and Deaths review re People with a Learning Disability (LeDeR) action plan delivered extensively to staff working in the Adult Community Services division focussed on ensuring those with a learning disability are supported taking into account considerable need.

The Safeguarding Adult team in the QATG work with Safeguarding Children colleagues to support the Think Family approach, additionally, the Safeguarding team continue to produce seven-minute briefings that are shared widely at meetings, conferences, through the safeguarding newsletter, Trust bulletin and weekly updates. These brief learning updates cover a wide range of areas from cultural competence, domestic abuse in older adults, how to report a concern and learning from reviews. We have completely reviewed and updated our Trust Safeguarding Intranet information to support enquiry and learning.

## Areas for Development and Learning

With the introduction of more training packages, the QATG acknowledge the need for thorough evaluations of training and have worked with the Information Technology (IT) team and the Learning and Development team to set up improved ways of capturing these, via 'QR' codes and improved access within Trust e-learning packages. Evaluations of online training packages are now available for qualitative scrutiny by QATG to support quality of delivery.

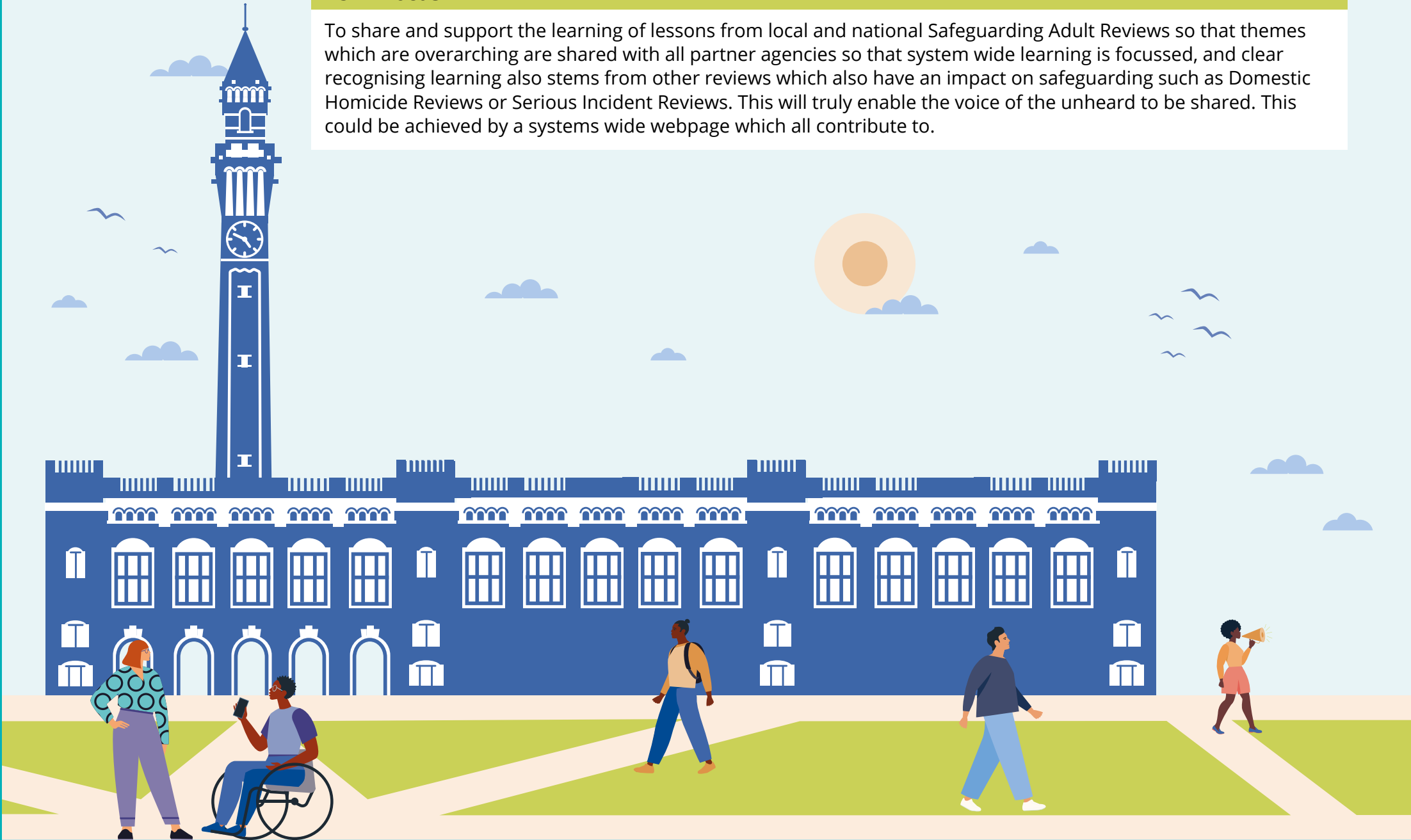
## Organisational Plans

We produce a workplan which is monitored in our safeguarding Sub Committee where check and challenge occur. The plan for the coming year focuses on the following areas:

- Safeguarding Adults Making Safeguarding Personal. This is to ensure the patient voice is heard in line with the Essential Care Framework. In this respect we recognise that hearing the patient voice is so important to what we do. The patient voice enables us, as an organisation, to pick up on our quality, promote dignity, learn lessons and address themes which become apparent. This follows through our patient experience, risk management and safeguarding processes.
- Safeguarding Adults Self-Neglect (Safeguarding from Abuse). We have widely advertised, provided training on and facilitated the use of the city- wide Self-Neglect Pathway which we aim to embed fully in our NHS culture. The area of self-neglect in a community trust is significant and working with Birmingham City Council and other partners are key to this work hence the link into our annual workplan.
- Information Technology (Good Governance). This work started with a goal of moving from an older data system to be more in tune with the data, gathering, recording and sharing of information which is required as we move into the years ahead. This work involves working with specialists in technology in our Trust to promote a comprehensive approach to the use of technology to ensure we are fit for purpose in terms of all safeguarding activity.
- Addressing Vulnerabilities (Compassionate and Professional Staff). This is to ensure Safeguarding supports Divisional progress in addressing vulnerabilities, for example supporting the Learning Disabilities and Autistic Spectrum Disorder process in Trust to focus on prevention of abuse and promote quality of care. This work recognises the importance of working together, developing systems to ensure needs are met and hearing the individual voice to address areas of need.
- Mental Capacity Act 2005. This works is built into our workplan with the goal of embedding MCA is all that we do. This flows through training, policy and practice with a Safeguarding Practitioner attached to each of our 5 Divisions in Trust to encourage and support the MCA.
- Domestic Abuse (Safeguarding from Abuse). Over the coming year we aim to embed application of the Domestic Abuse Prevention Strategy (2024 to 2026) to support patients, families and employees within BCHC through our policy, training and Duty system which holds addressing the challenges of domestic abuse as a high priority.
- Staffing Safeguarding Review (Including Disclosure and Barring Service, International Recruits, Temporary Staffing and Apprentices). This work aims to ensure we are continuously thinking about our workforce, employing staff with the Trust values at the heart of our care. Our trust values are to be Caring, Open, Respectful, Responsible and Inclusive. We are very conscious that organisations can be malevolent or benevolent and we want to ensure that safer recruitment embeds safeguarding practice at every stage of our processes from scrutiny of job applications to robust interviews to quality check of references right through to support and supervision provided to staff backed up by a clear Freedom to Speak Trust initiative and Duty of Candour to admit when we make mistakes.

## BSAB Focus

To share and support the learning of lessons from local and national Safeguarding Adult Reviews so that themes which are overarching are shared with all partner agencies so that system wide learning is focussed, and clear recognising learning also stems from other reviews which also have an impact on safeguarding such as Domestic Homicide Reviews or Serious Incident Reviews. This will truly enable the voice of the unheard to be shared. This could be achieved by a systems wide webpage which all contribute to.





## Birmingham and Solihull Integrated Care Board (BSoL ICB)

### Key Achievements

- We have maintained a strong oversight of safeguarding arrangements across the system.
- We have continued to raise awareness of Making Safeguarding Personal and the Mental Capacity Act and how it is applied in practice.
- We developed and implemented a robust audit schedule with emphasis and focus on the adult with care and support needs. Each quarter a different topic was included in the audit and over the year covered financial abuse, risk enablement, MSP, MCA & self-neglect.
- We have continued to participate in the Domestic Homicide Reviews, Safeguarding Adult Reviews, learning reviews. Themes, trends have been monitored and cascaded the recommendations, learning via 7 min briefings, newsletters, supervision and GP safeguarding forums.
- We continued to work collaboratively with our partners and as a statutory member we remain committed to the BSAB and its subgroups.
- We have continued to embed the “Think Family” approach to safeguarding and also awareness of Trauma informed practice.
- The pilot for the Offensive Weapons Homicide Reviews (OWHR) began in April 2023 and we worked with our other Statutory partners to participate in the reviews, identify any learning and monitor progress/ challenges of this pilot.
- We continued to work collaboratively with the Violence Reduction Board on the strategy and the implementation of the Serious Violence Duty.
- The safeguarding team continues to offer safeguarding group supervision provision to four provider organisations safeguarding named nurses.
- The training offer across the ICB has been reviewed with a successful Level 3 package being delivered to those in the ICB that meet the Intercollegiate Documents definition for Level 3 training.

### Making Safeguarding Personal

Undertook a number of safeguarding audits with staff within Continuing HealthCare (CHC), GP surgeries and Learning Disability (LD) care homes, focused on staff knowledge and understanding of safeguarding and how it is applied in practice, including questions on MSP.

We also monitor and audit the designated nurse’s advice and support duty database. Any training that we deliver is also evaluated.

## Areas for Development and Learning

- The training offer across the ICB was reviewed with a successful Level 3 package being delivered to those in the ICB that meet the Intercollegiate Documents definition for Level 3 training.
- With monies from NHSE a Level4/5 training event was held for all designated and named professionals.
- Safeguarding training/digital support package for Pharmacy, Ophthalmology & Dentistry (POD) has been devised and shared with community dentistry leads. The package is being launched on the community dentists learning and development platform whereby they will be able to record staff compliance upon completion of the digital training package. The package will be shared with community Optometry Leads and Pharmacy Leads for their own individual use/ implementation.
- 7 minute briefings developed related to exploitation, professional curiosity, transferable risk have been shared across primary care and provider leads. We have also cascaded the briefings from safeguarding reviews too.
- The safeguarding team continues to offer safeguarding group supervision provision to four provider organisations safeguarding named nurses.
- The safeguarding team has been running and chairing bi-monthly safeguarding meetings for primary care, attended by the GP practice safeguarding lead as a method of disseminating key safeguarding messages and learning arising and identified through conducting statutory reviews and early learning from the rapid review process and scopes undertaken by the team.

## Organisational Plans

- Continue to work in collaboration with safeguarding partners to safeguard, promote health and well-being and protect the rights of those in the most vulnerable situations within Birmingham and Solihull.
- We will continue to work collaboratively to ensure we are compliant with the Serious Violence Duty legislation.
- We will continue to work alongside our other Statutory partners to participate in the pilot for Offensive Weapons Homicide reviews (OWHR) reviews, identifying any learning and continue to monitor progress/challenges of this pilot.
- We will continue to monitor and evaluate outcomes of serious safeguarding incidents and seek assurance that plans have been implemented and lessons learnt.
- We will continue working in partnership to improve practice re staff Understanding of MCA and DOLS.
- We will continue with our audit programme and each quarter include key topics.

## BSAB Focus

- Back to basics – what is a safeguarding concern, is it a quality issue or neglect?
- Develop a robust multi agency audit schedule/programme.

## Birmingham and Solihull Mental Health Foundation Trust

### Key Achievements

The Adult Team structure has been expanded and has been aligned to areas where there is more demand (such as acute inpatients and dementia & frailty):

- A named Doctor for Safeguarding Adults was appointed in September 2023 to work with the Safeguarding Team to support and promote the provision of effective services to safeguard services users of BSMHFT and to support adherence to the relevant legislative frameworks. An additional band 7 Safeguarding Facilitator was also recruited to, specifically to work in the adult safeguarding workstream and support the delivery of safeguarding practice at BSMHFT.
- The safeguarding team have increased their visibility by providing face to face support through safeguarding supervision and ad hoc teaching and development in response to incidents or specific issues related to quality and safety. In addition to this, the Level 3 face-to-face Adult Safeguarding training has been refreshed to capture more recent case studies which align more closely to system-wide objectives.

### Making Safeguarding Personal

We have aligned the safeguarding priorities for the Trust with the Birmingham (BSAB) priorities. Making Safeguarding everyone's business is key to our Think Family Approach. We have recently reviewed our level 3 training content to ensure themes such as professional curiosity, judgement and accountability are embedded into the training to enhance the knowledge and skills of our staff.

Making Safeguarding Personal (MSP) is a theme that we have reintroduced and reinforced into the refreshed Level 3 Adult Safeguarding Training – and is embedded within the teaching sessions we are developing.

Learning through development and assurance is another area where we are seeking to improve quality, and this is embedded within the plans to do site visits and reviews in 2024/25.



## Areas for Development and Learning

A suite of 7-minute briefings have been developed alongside a communications plan in order to cascade focused learning throughout the organisation.

It was identified through the BSOL ICB Health Safeguarding Board that there was a need for high quality, master's level safeguarding specific study for safeguarding professionals across the ICS. To date, seven members of the Trust Safeguarding Team have been supported to complete this module.

## Organisational Plans

- We are launching a new approach to safeguarding within the organisation following the Think Family agenda. Learning from safeguarding reviews tells us that it is essential to understand the context of families and to respond to their unmet needs and any risks they face. This helps us promote the wellbeing of children and adults with care and support needs and to keep them safe. This is due to be rolled out very soon.
- We have developed a way of collating learning and recommendations to join up themes between adults, domestic abuse and children and young people with the aim of streamlining recommendations and enhancing our response as a team.
- There is a refreshed focus on the adult safeguarding pathway within the organisation – we are in the process of recruiting a named doctor for safeguarding adults and a dedicated band 7 nurse for this workstream.
- We are becoming more visible amongst clinical sites and seeking to actively support staff with complex cases.

## BSAB Focus

A dispute resolution and escalation procedure for the management of individual safeguarding adults' cases where professional disagreement arises would be incredibly helpful.



## Birmingham Women's and Children's NHS Trust (BWC)

### Key Achievements

- **Maternity Services** - In 2022/2023 there was a notable increase in pregnant women who had a learning disability where mental capacity assessments were required, or where significant mental health issues identified when accessing maternity care. In 2023/2024 the Safeguarding Adults Midwife facilitated an adult safeguarding maternity case study as part of the Saving Mothers and Babies Lives training programme for maternity services staff. The Learning Disabilities Lead Nurse has been working in partnership with the Safeguarding Adults Nurse to improve services for pregnancy women with a Learning Disability and/or Autism including improving access and engagement to reduce health inequalities and improve the early identification of any safeguarding risk.
- **Learning Disabilities** - The Lead Learning Disability Liaison Nurse has worked alongside the Adult Safeguarding Midwife to assess need and offer appropriate referrals; hospital passports and reasonable adjustment plans for women with a learning disability. This included ensuring appropriate referrals to adult social care, advocacy services and voluntary agencies, such as specialist services for parents with learning disabilities and Children's Social Care were made where appropriate.
- **Mental Capacity Assessments** – Birmingham Women's and Children's NHS Trust (BWC) has a Mental Capacity Act (MCA) Policy. There has been a focus on young adults receiving care at BCH and ensuring that staff have a clear understanding of the MCA and the process for informed consent including best interests. There is a planned audit of the MCA process compliance in July/August 2024. BWC is delivering the Oliver McGowan training across the Trust, and this includes MCA as a key component. MCA was a feature in a recent safeguarding newsletter to raise awareness. BWC are represented at the Midlands MCA Forum.

### Making Safeguarding Personal

BWC is delivering the Oliver McGowan training which is a key component of making safeguarding personal enabling staff to be skilled in their approach and understanding of adults with additional learning needs. The Tier 1 for non-clinical staff and Tier 2 training for clinical staff commenced in 2024. The BWC Learning Disabilities Clinical Educator has been involved in a secondment to support the BSol Oliver McGowan project team.

BWC has identified a gap in knowledge at BCH in relation to young adults receiving care aged 18+ . There has been a focus on skilling staff to have an enhanced understanding and the knowledge to support young adults with, additional needs and their families including "understanding the person". "Understanding how to communicate" and "responding to safeguarding needs in partnership". There has been a focus on the Learning Disabilities Liaison Team working collaboratively with the Safeguarding Team and partner agencies to ensure that young adults are involved in their care including reasonable adjustments to support communication, hospital passports to understand the person, and best interest meetings to understanding their wishes and feelings.

## Key Achievements

- Safeguarding Adults Training and Supervision– The safeguarding team have reviewed and updated the safeguarding adults training in line with the intercollegiate document for health and learning from SCRs and DHRs. Training has included learning from recent non-fatal strangulation studies. Training compliance is monitored through the BWC safeguarding governance structure. Information is available on the Trust intranet site and disseminated via a number of '7-minute' briefings, bitesize training sessions and newsletters that include key messages, The safeguarding adult's midwife and the safeguarding specialist nurses for mental health services facilitate safeguarding supervision via drop-in group sessions, 1:1s and ad-hoc for staff working with adults with care and support needs. BWC is delivering the Oliver McGowan training which is a key component of making safeguarding personal enabling staff to be skilled in their approach and understanding of adults with additional needs. The Tier 1 for non-clinical staff and Tier 2 training for clinical staff commenced in 2024.
- Safeguarding Adults Audit Plan – The BWC safeguarding team have a specific safeguarding adults audit plan. The BWC safeguarding team have established a new auditing tool for safeguarding adult referrals to regularly assess the quality of referrals made for the Trust. They will then offer targeted support to areas where it's felt there is a learning need as a result.
- BSAB Engagement - BWC are represented at the BSAB sub-groups including the Governance and Scrutiny Committee, the Serious Adult Review Meetings on a case specific basis and the Learning and Development Meetings.
- Domestic Abuse (DA) –Routine enquiry for domestic abuse is embedded in policies across the Trust and staff are encouraged to be pro-active in finding opportunities to see people alone. The DA specialist midwife and the FTB safeguarding specialist nurses provide expert advice and support to staff. The DA Specialist Midwife and the FTB safeguarding specialist nurses are actively engaged in the MARAC process. Supporting referrals, lateral checks and actions follow-up.
- The BWC Safeguarding team audited the effective use of the Domestic Abuse DASH tool at Birmingham Children's hospital and FTB 0-25 Mental Health Services to understand quality and outcomes.

## Areas for Development and Learning

- BWC received a CQC review inspection of FTB 0-25 Mental Health services in July 2023 which identified a significant improvement in staff safeguarding training compliance following the delivery of bespoke safeguarding training face to face during May, June, and July 2023 by the specialist safeguarding nurses, supported by the Associate Director of Safeguarding and the Director of Safeguarding.
- Staff received training on how to recognise and report adult abuse, appropriate for their role. Staff had received safeguarding training for adults at level 1 to level 3.
- The CQC review inspection report following the training programme referenced that "Staff knew how to recognise adults at risk of or suffering harm and worked with other agencies to protect them. Staff said that the trust safeguarding leads attended the Hubs and provided advice and guidance to staff on live cases. In addition, staff could contact the trust safeguarding lead separately with their queries. Each Hub had a safeguarding lead, who staff knew and could easily access. Staff knew how to make a safeguarding referral and who to inform if they had concerns".
- BWC is engaged in rolling out the Oliver McGowan training across the Trust.

## Key Achievements

- MAPPA - The BWC safeguarding team worked with the FTB leadership team to develop the BWC trust MAPPA Policy to ensure that statutory obligations are met and that FTB services are engaged in the MAPPA process.

## Areas for Development and Learning

In 2023/2024 the Safeguarding Adults Midwife facilitated an adult safeguarding maternity case study as part of the Saving Mothers and Babies Lives training for maternity services staff to improve knowledge and skills.

The Safeguarding team provide a programme of Bitesize learning events and sessions have included DA non- fatal strangulation and the MCA.

The BWC Learning Disabilities Clinical Educator has been engaging Experts by Experience in coproduction in areas such as identifying improvements in the hospital environment and accessible information including andeasly read hospital leaflets.

## Organisational Plans

BWC are planning to improve staff understanding of the application of the Mental Capacity Act (MCA) including MCA assessments, Best Interest Decisions and Consent. These have been identified as an area for improvement particularly in relation to young adults aged 18+ prior to transitioning to adult services. An audit is planned for July/August 2024 to understand staff application of the MCA.

BWC have commissioned a Bond Solon MCA training in 2024/2025 for key senior staff/ managers at BCH to inform increased awareness for young adults 18yrs + prior to transition to adult services.

## BSAB Focus

The transition period from child to adult services can be a difficult time for young adults with care and support needs. It would be helpful to focus some work on this age group.

## University Hospitals Birmingham NHS Foundation Trust (UHB)

### Key Achievements

- The Trust has robust governance in place in relation to Safeguarding, with a monthly Safeguarding Board.
- The Safeguarding Team at University Hospitals Birmingham (UHB) are site based across our 4 acute hospitals, and into community services. We provide an in-reach model of support to our clinical and non- clinical staff.
- Safeguarding training was reviewed to ensure it aligned with the Trust's Training Needs Analysis, ensuring compliance with the intercollegiate document for Children's and Adults Safeguarding.
- Think Family' across UHB continued to be embedded through safeguarding training.
- The Domestic Abuse agenda continues to be embedded throughout UHB. Two hospital Independent Domestic Violence Advocates (IDVAS) support patients and staff.
- The Neglect and Self neglect profile continues to be raised, and includes children, young people, and adults.
- A Named Nurse for Safeguarding Teenagers and Young Adults now supports both the Adult and Child agenda, to lead on Child Criminal Exploitation (CCE) and the transition of Child to Adulthood.
- We have continued to raise the profile, and importance of, completing Deprivation of Liberty Safeguards (DoLS) applications, when appropriate; we monitor by regular audit.
- We have continued to promote and embed the learning from Domestic Homicide Reviews / Safeguarding Adult Reviews (DHR's/SAR's).

### Making Safeguarding Personal

Outcomes have been evaluated by listening to, and engaging with, patients, carers and staff. Monthly feedback was sought and presented to the Trust's Safeguarding Board, including a programme of 'You said, we did'. The latter ensures good practice, and areas for improvement are sought, and that the feedback received allows practice to be regularly updated to achieve high quality patient experience. A programme of audit was undertaken to ensure compliance with the principles.



## Areas for Development and Learning

The Trust has a comprehensive and robust plan regarding safeguarding training at Levels 1 and 3, including Prevent. Safeguarding training is delivered to staff in accordance with the annual Training Needs Analysis (TNA). The content of all training sessions is reviewed annually. Training is delivered as below:

- Adult Safeguarding Training Levels 1 and 3 are delivered at Trust Induction for all new staff.
- Children Safeguarding Training Levels 1 and 3 are delivered at Trust Induction for all new staff with key staff receiving additional Level 3 training, specific to their area.
- Our specialist Level 3 training modules have been developed to enhance staff knowledge and skills, after completion of induction training.
- Updated training, Level 3 Adults and Children, Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS), can be accessed via Moodle training or Face to Face training sessions.
- Training sessions can also be accessed via the Safeguarding Children Partnership, and the Adult Safeguarding Boards.
- To recap learning for staff, 7-minute briefings were developed and available on the Trust's intranet site, and in all clinical areas.

## Organisational Plans

### Priorities for 2024-2025

At UHB the Trust's vision is that 'Safeguarding is everybody's Business and that everyone matters.

We will continue to raise the profiles of:

- Voice of the Adult.
- Domestic Abuse.
- Exploitation.
- Neglect, and Self-Neglect.
- Think Family.
- Early Help.

We will identify and mitigate our safeguarding risks.

As a learning organisation to promote and embed learning from local, regional and national reviews.

To deliver safeguarding education and training to our staff.

## BSAB Focus

Maturing the 'Early Help' initiative to include practical support to adults, for example, supporting the homeless community regarding access to, use of, Foodbanks/Benefits system.

# The Royal Orthopaedic NHS Foundation Trust

## Key Achievements

### Increase in reporting concerns, staff awareness and patient protection

In 2023-2024 the safeguarding team received 597 adult safeguarding notifications. The largest single category for adult safeguarding notifications received this year is for domestic abuse. The second highest notifications were categorised as risks identified. Risks identified generally means that several concerns or risks have been observed, disclosed, or identified. The largest age cohort of safeguarding cases reported were 75 years and over. This is most likely due to the vulnerabilities faced with the ageing population and care/support needs identified.

### Safeguarding Supervision

This has been embedded throughout the Trust. Safeguarding supervision is delivered face to face monthly, bi-monthly, or quarterly depending on the health practitioner's roles and responsibilities. Generally, supervision is delivered in groups. The safeguarding team use a variety of reflective cycles, it is dependent on the individual and safeguarding case and individuals' wellbeing (restorative). This year a safeguarding supervision audit demonstrated positive feedback, with 97% of staff stating they would recommend safeguarding supervision to a colleague. This has enabled staff to manage cases with confidence and in terms of making referrals and escalation of concerns. Also professional curiosity and proactive care for patients.

Compliance is monitored through the safeguarding committee bi-monthly.

### Auditing practice and policy

A total of 7 out of the 10 audits planned were undertaken during the year with recommendations, and progress being monitored at the safeguarding committee. These included referrals to adult social care, documentation and learning disabilities audit.

The MCA and DoLS audit this year undertaken by the independent trainer and supported by the Trust Mental Health & Dementia Practitioner. The purpose of the audit was to update on overall progress of the quality of mental capacity and deprivation of liberty activity.

The audits highlighted some areas of good practice shown by staff and provided assurance to committee members. However, further learning was required regarding the safeguarding documentation audit for adults which demonstrated that the adults voice, was largely not included within documentation around decision making when addressing safeguarding risks or concerns.

## Making Safeguarding Personal

Patient stories /experience at internal committee and also upwardly reported to senior executives. Staff notifications request information regarding the adult patient's voice. Patient experience have also shared at Board throughout the year.

Below example of MSP patient case:

**Patient T is unable to communicate verbally and deemed as a vulnerable adult with care and support needs in the community. Patient T who was admitted to the hospital for a planned surgery. During admission, staff and patients' family raised concerns regarding the care and support Patient T was receiving in the community by a care agency in their own home. The concerns were around financial abuse and neglect. The Safeguarding Nurses liaised with multiple external professionals and patients' family to gather an insight into Patients T's needs and wishes and completed an adult social care referral based on the risks and concerns voiced by those involved in Patient T's life. Adult Social Care launched a section 42 enquiry and Patient T was discharged to a place of safety where all care and support needs could be met.**

## Key Achievements

### Further development of the Safeguarding and Vulnerabilities Team in the Trust

Recruitment of staff to the Safeguarding team to enhance the care and service and providing support to staff and patients across the Trust.

### Collaborative working

We have worked collaboratively with our partner agencies to prevent abuse and neglect. The Adult's Board has supported us in terms of contacts and exposure to services and provider agencies through forums and learning events.

Progress made in the development of our internal database development working with IT department. The work continues with this for the service. The internal and external websites have been reviewed and updated, following feedback from users.

- Our Trust Safeguarding Executive Lead supporting the Safeguarding team both internally and externally. Providing input and challenge at local and system level.

## Making Safeguarding Personal

Audits and roadshows undertaken, seeking feedback and areas for suggested improvements. The Trust has undertaken quality and safety reviews in wards and departments. To provide greater insight into patients' direct care experience and staff understanding with regard to protecting vulnerable adults.

Also, through the best interest meetings / discussions evidencing the patients voice and wishes, that these are being heard. Using case scenarios to help share learning in learning in training and supervision with staff.

## Areas for Development and Learning

### Safeguarding Champions

- The Safeguarding Champions are required to attend at least two out of four quarterly safeguarding champions days annually. The Safeguarding Champions days focused on the themes delivered throughout the year which are; Neglect, Child Exploitation, Honour Based Abuse and Forced Marriage, Female Genital Mutilation, Anti-Slavery Networking, Self-Neglect and Hoarding, Mental Capacity Assessments and findings/learning from internal safeguarding audits. Safeguarding Champions are encouraged to take part in safeguarding audits within their own ward or departmental area.
- Each clinical department/area across the Trust has at least one Safeguarding Champion. The Safeguarding Champions days are planned throughout the year and external speakers deliver presentations to enhance learning.
- Currently there are 52 clinical and non-clinical Domestic Abuse Champions across the Trust. All Domestic Abuse Champions are required to attend at least one annual training session delivered by the senior named nurse who is the Domestic Abuse Lead.

## Areas for Development and Learning

The safeguarding team have continued to spread awareness across the Trust through the quarterly safeguarding purple paper, which provides all staff with internal, local, national safeguarding updates and training opportunities. Roadshows domestic abuse, adult safeguarding, and neglect.

The Safeguarding team work closely with external partners to reduce the risk of harm for patients and staff. These would include the Local Authorities, Police, ICB, Education, Primary Care Services, third sector organisations. The importance of continual learning and improving our care and practice delivered.

## Organisational Plans

### Safeguarding adult's priorities 2024-2025

- The voice of the adult (making safeguarding personal) to be included within care planning, risk assessments, safeguarding referrals, and documentation.
- Staff taking accountability with documentation in evidencing decision making, care/treatment and review using mental capacity assessment forms.
- Focus on the Safeguarding team's responsibilities with the implementation of the Domestic Abuse and Sexual safety charter.
- To improve overall Safeguarding Mandatory Training compliance, to help protect and support patients with care and support needs.
- Safeguarding team improving staff awareness around serious violence and local/national reporting/response responsibilities.

Embed new posts that the Trust has supported these include the role of the Domestic Abuse and Sexual Violence Advocate (DASVA) working on the front line to provide face to face support for victims, survivors, families, and staff which includes safety planning and advice in line with the Domestic Abuse Act (2021), Governments Strategy for tackling violence against women and girls (2021) and the NHS England Sexual Safety in Healthcare Charter (2023).

This post has been supported/funded by the Trust charity for 2 years.

## BSAB Focus

Self-neglect and hoarding and the work (who is there to help and support in Birmingham) also the work link/role of the Social Prescriber, not fully understood.

## West Midlands Police (WMP)

### Key Achievements

Birmingham Partnerships have a four strand structure, namely Early Help and Vulnerabilities, Crime and Anti-Social Behaviour, Schools and Young People and Licencing. There are several areas that these teams assist both internal and external partners focussing on Adult Safeguarding:

- The Early Help and Vulnerabilities Team process around 1000 referrals per month from front line response and Neighbourhood Officers requesting support for alcohol, drugs and mental health issues. The team then triage the information, check intelligence and signpost the request to the partner best placed to help the individual. These partners include Cranston and Remedi among many others. Cranston provide a detox and support service for people struggling with alcohol. The restorative justice element of crimes where mediation is a viable solution has been contracted out in its entirety to Remedi. However, the team check to see if the matter is relevant and if the information is correct.
- Birmingham has 5 early help officers that work within Birmingham Local Authority Partnerships, working alongside social service, Birmingham Children's Trust and EmpowerU, to deliver early intervention, prevention and diversion for families. The team will visit family addresses and discuss options with parents, children, schools and make informed decisions for the betterment of the family. Each HUB is responsible for a geography of Birmingham to ensure sufficient coverage and engagement.
- The Early Help Team have also established a care home forum across their five regions that bring together supported accommodation, housing providers that house children U18 to ensure that their legal requirements are being met. This is to facilitate best practice, Op Philomena principles and OFSTED compliance. Other LPAs will be following this example.
- The Crime and ASB team audit around 40 personal anti-social behaviour logs per week to ensure that the matters were crimed correctly, were triaged in terms of risk correctly and the correct action has been taken. Learning is cascaded from the team directly to officers to expedite learning and ensure victim contact. The number of audits was around 400 per week until the last two months, as previously all personal and disorder crimes were audited. Birmingham has around 40,000 ASB logs per year.
- The team also conduct around 5 ASB case reviews per month to assist Birmingham City Council in housing hearings to determine breaches or best outcomes where neighbours are in dispute. The team are seen as the subject matter experts in this field.
- The team hold a joint meeting with Birmingham City Council on a weekly basis to check targeted guardian patrol anti-social behaviour patrols are conducted, Home Office funding is checked and balanced, joint working is co-ordinated and actions are reviewed and updated.
- The Hate Crime Team have established 13 hate crime third party reporting centres across Birmingham to increase accessibility into policing from across our diverse communities. These are in existing community provisions, where the team train staff how to record and communicate incidents and intelligence into policing. An example is the Chinese Community Centre in Birmingham City Centre. Staff at the location have been trained and the hate crime team attend and hold a meeting with the community discuss safety, policing and other issues.

## Making Safeguarding Personal

The way the referral works is firstly a need is identified and then spoke about with the individual if under 18 or the person has Dementia/Alzheimer's their next of kin is spoken to so we can gain consent for the referral. Consent is required to enable the referral to be processed under GDPR. These referrals are then sent into the Vulnerability Officer by Referral Portal by either two email accounts from desktop computer or mobile phone by the officer or staff member dealing with the member of the public.

The referral is then assessed for data quality, information if needed added (such as house number, contact number or crime number) and sent to the relevant agency for support via email. The email is then kept in actioned for a year and the action referral is recorded on the spreadsheet name, address, reference number and the agency of where it was sent to along with the Vulnerability Officer who dealt with the referral.

Occasionally on request referrals that have been actioned are ask to be revisited to find out what have happened to them for homicide reviews which we can assist with. There has been dip sampling in the past, which has been carried out randomly by supervision normally 5 referrals are pulled out and assessed.

## Areas for Development and Learning

- With the new alignment of Birmingham's policing districts, it is uncertain at this time how the current structure of Birmingham Partnerships will manage / work moving ahead.
- Although information sharing agreements are reviewed regularly, early intervention strategies require clear protocols and governance.
- With a key partner in Birmingham City Council having a severe budget deficit effecting services and initiatives, Birmingham Partnerships continues to focus on its joint statutory obligations pending any further budgetary impact.

## Organisational Plans

There were plans for a Safeguarding Hub, but these are currently on hold to create an adult only referral portal. This would allow WMP to clearly assess vulnerable adults more accurately.

Right Care Right Person came in on the 5th February 2024, this saw a change in how WMP dealt with incidents and initial calls for service. When a call came in for service it asked the caller several questions about the incident to see whether WMP was the Right Service for the incident and whether all the necessary actions had been covered before it was to be handed across to WMP to continue with the enquiries.

Right Care, Right Person for example when a call for service comes in from a GP raising concerns for patient, they will be asked if they have visited them at their home address if they haven't seen them. They have all their details and could attend and make a home visit just like WMP. This would reduce the need for WMP attending the address for non-attendance of a missed appointment.

The impact of Right Care, Right Person means that some of the calls received are directed back to the caller with actions before WMP will engage, this does not mean we do not care, it means we need more information the caller needs to investigate and bring back, so we can do a more informed role.

## BSAB Focus

It would be useful if safeguarding social services linked in or were aligned in with WMP alongside either PPU or their Vulnerability Officers. This in turn would assist the wider world of safeguarding and provide a whole system approach to both victim and offender with people best trained and invested in outcomes. It would also make it easier for checks both sides and possibly even assist for joint visits in the same way as the Early Help Officers have joined in the Family Hubs for Vulnerable children. It could be recreated for those in later life.



## Birmingham City Council Adult Social Care (ASC)

Key Achievements	Making Safeguarding Personal
<ul style="list-style-type: none"><li>• The Adult Social Care Safeguarding Service has recruited Social Workers and Managers to respond to concerns about adult citizens with care and support needs who are at risk of or experiencing abuse and/or neglect.</li><li>• The Safeguarding Triage Team continues to provide an initial response to new referrals, ensuring that immediate action is taken where required, and that adults with or without care and support needs receive the right support at the right time.</li><li>• The Adult Social Care Safeguarding Service has continued to work collaboratively with other councils and external partners to prevent abuse and neglect where possible and promote recognition that safeguarding is everyone's business.</li></ul>	<p>Birmingham Adult Social Care gathers data and information from case audits, direct feedback from citizens, from our workforce, and from partner organisations, and learning from events such as Safeguarding Adult Reviews, to evaluate the outcomes of our key achievements. The application of Making Safeguarding Personal (MSP) principles, is one of the key indicators that we use to measure the quality and success of adult safeguarding activity. Some examples of the application of Making Safeguarding Personal (MSP) principles in Adult Social Care are:</p> <ul style="list-style-type: none"><li>• Adult Social Care received a referral for an adult with care and support needs who was in temporary accommodation following a hospital discharge. There were concerns of financial abuse in relation to benefits and in relation to visits by a home carer outside of the adult's support plan. The adult had care needs under the Care Act 2014 due to physical and mental health needs as well as alcohol dependency support needs. The social worker was persistent in attempts to hear the voice of the adult and what they wanted as their outcomes. The adult had been unaware of a fraudulent claim for benefit by an acquaintance which was able to be reported and stopped. The adult was able to be heard on the input from the care agency worker and voice their views that there were no concerns as to financial abuse by the carer. The Multi-Disciplinary team involving Rough Sleeper team workers, accommodation and care providers were able to look at alternative support to the adult. They were able to have care from their chosen provider and the risk of financial abuse was addressed.</li><li>• Adult Social Care received a referral for an adult living in their own home with concerns they were being financially abused by their friend/informal carer. Concerns were raised that the friend was financially abusing the adult and using the house for drug taking and bringing others to the property. The safeguarding social worker and community social worker worked with the family, police, community support agencies and advocacy to hear the concerns they were raising and to hear the voice of the adult and the outcomes they wanted. The adult's capacity was taken into account and a formal capacity assessment undertaken under the Mental Capacity Act 2007. The adult was assessed as lacking capacity in relation to the specific decision around their relationship. The social workers worked with the adult to balance the risks faced at home and their desire to remain with their cat. Protective options were explored resulting in a short-term care home being found for the adult that could meet their care and support needs and also take the cat. The friend no longer visited after the adult moved. The adult was supported to remain at the home long-term with their cat and protective measures put in place in relation to the management of their finances.</li></ul>



Key Achievements	Organisational Plans
<ul style="list-style-type: none"> <li>• Adult Social Care Commissioning Service and the Safeguarding Service have two specialist Safeguarding Commissioning Officer posts to streamline our response to care provider quality concerns.</li> <li>• Adult Social Care have continued to provide a representative to MARAC forums to ensure consideration of safeguarding issues for adults with care and support needs known to be facing the highest risk of domestic abuse.</li> </ul>	<ul style="list-style-type: none"> <li>• Areas for Development and Learning Adult Social Care continue to strive to work with adults in a timely manner within 2024-25 and have made great progress since April 2024 to date.</li> <li>• Adult Social Care has amended the structure of its Safeguarding Service as part of a pilot. The s42 Enquiry Team are located with Constituency Teams. The review of this will be a key activity to analyse the safeguarding outcomes for Birmingham citizens with care and support needs.</li> <li>• Adult Social Care will undertake a review of safeguarding as part of the s11 audit that will be due in Spring 2025.</li> <li>• All Adult Social Care employees continue to be required to undertake mandatory safeguarding e-learning and the learning and development offer to employees is under review.</li> <li>• Adult Social Care will continue to contribute to the work on the revision of the West Midlands Safeguarding Policy and Procedure with the Local Authorities in the West Midlands.</li> <li>• Adult Social Care will have a focused review on its' internal safeguarding policies and procedures.</li> </ul>

Areas for Development and Learning	BSAB Focus
<ul style="list-style-type: none"> <li>• Adult Social Care have supported learning within the BSAB partnership through facilitating Practitioner Forum events. Due to the success of the first session on Self-Neglect a second session was held. Focus was on all partners roles and responsibilities in utilising the Self-Neglect Pathway.</li> <li>• Adult Social Care have taken on board learning from the Care Quality Commission inspection that was undertaken as one of the authorities to be visited as part of the inspection pilot in August 2023, which resulted in an overall pilot rating of Good. There was learning for Safeguarding in relation to communicating outcomes of referrals and addressing backlogs. Focused work has continued to address backlogs and work with partners including a Mental Health hospital. The Hospital has given feedback that they weren't receiving updates on a number of their referrals. Through regular meetings and improved communication with a Safeguarding Lead, feedback has since been positive.</li> <li>• The Safeguarding Service have been able to offer a number of presentations to, and links with, partner organisations as to the function of the Citywide Safeguarding Service, referral processes for adults with care and support needs where there are safeguarding concerns and the Care Act 2014 s42 Safeguarding Enquiry threshold. These have included Domestic Abuse Officers from West Midlands Police.</li> </ul>	<p>Support from BSAB to improve the way agencies work together to safeguard adults with care and support needs, particularly in relation to fostering shared understanding of the criteria for statutory safeguarding, emphasising and supporting early intervention and prevention, and promoting alternative pathways to positive risk enablement and safer communities, such as the self-neglect pathway.</p>

## Birmingham City Council Housing

### Key Achievements

Birmingham City Housing Department continues to strengthen its response to safeguarding the importance of early intervention, offering the correct services to our customers, and ensuring staff are trained and have the correct knowledge.

City Housing is an active member of Birmingham City Corporate Safeguarding board strengthening partnerships and embedding shared learning across the service.

Domestic abuse has a devastating, long-lasting impact upon the safety, health and wider life chances of women, children, and families. It is a leading cause of homelessness. City Housing have written a new domestic abuse tenants policy outlining how city housing will respond to victims and survivors.

Strong partnerships are paramount and 405 intervention measures involving partner organisations were carried out.

Housing Solutions met its prevention target for the year and ensured that majority of the activities with homeless households were dealt with at prevention stage.

Eyes on pilot and Handsworth Library pilot were launched to ensure greater visibility and better understanding of household approaching for Temporary Accommodation and housing assistance. Both of those initiatives enabling staff to identify additional support needs, including safeguarding concerns.

Memorandum of understanding between Housing and Public Health enabled additional resources to be directed to identify additional needs of vulnerable adults who sleep rough and improve health outcomes for children in Temporary Accommodation.

A representative from Housing chaired 'children in Temporary Accommodation' audit to ensure collaboration; actions fed into work within Temporary accommodation and Birmingham Children's trust.

Collaborative work between Temporary and Early Help has continued; highlights being introduction of a Food Truck for families placed in B&Bs without cooking facilities, daily lists of all children in Temporary Accommodation is shared and families contacted by Early Help team and drop-ins made part of monthly schedules in hotels to bring in partners.

### Making Safeguarding Personal

Key learning has been captured and shared within our Safeguarding board. Quarterly safeguarding updates are shared across senior leaders and promoted through-out the service area. Customer focus groups have been utilised to quantify learning.

Internal audits and lessons learnt have been captured and shared across the department, working with partners and front line staff to capture service improvements.

## Key Achievements

City Housing recognises the need for services to focus on customers' needs by creating a new Vulnerability Policy which has been implemented across City Housing Management, recognising and tailoring our response to tenants who have vulnerabilities that may impact how a service is delivered.

Genuine learning evidenced at senior level within Housing Solutions and Support Services following DHR and serious case reviews.

Data and Insight has been utilised to proactively visit our most vulnerable households that would not normally engage with the service. This has identified issues such as hoarding, financial support and safeguarding concerns.

As part of the Supported Exempt Accommodation partnership arrangements the Council together with BVSC have developed a SEA Quality Standards Accreditation Scheme – the Charter of Rights is an integral element of the assessment. 32 providers have been accredited with a Quality Standard of Gold (6), Silver (5) or Bronze (21) These providers are included on the Councils Preferred Provider List as an approved standard of provision within the city

[Providers with a Quality Standard award | Supported exempt accommodation | Birmingham City Council](#)

The Multi-Disciplinary Team of specialist officers include that of Social Workers who conduct an initial assessment as to whether the support provided by providers is in keeping with the HB regulations of 'more than minimal'. An integral part of the SWs intervention is to provide support review recommendations using a strength-based approach, to plan and identify a person focused plan of support particularly for those with more complex needs.

The partnership has inspected 3,284 properties.

2534 Support reviews and 101 Safeguarding reviews have been undertaken

## Organisational Plans

### Key areas of focus:

To continue to strengthen communication ensuring that key learning is shared across the service and embedded within practices.

A new training and development team have joined City Housing and will be developing a robust training offer to ensure that staff have the skills and attributes

Work is currently being undertaken to develop an integrated view of citizen, allowing staff to see all interventions and interactions between citizen and BCC services,

Housing Management are implementing a new service redesign ensuring that customers have a key point of contact and services are delivered before crisis occur, a key part of the offer will be to develop all staff to have a universal housing offer with much more local focus on the community and customers.

## Key Achievements

### New Provider Gateway

New providers are subject to a visit by the partnership to assess the support and review the service provided as part of the Exempt Status Application Process. To date 45 Provider applications – 20 Agreed, 18 refused, 7 outstanding since April 2022. This does not include applications rejected without a visit as providers are unable to evidence the required criteria for exempt status.

The partnership also undertakes risk-based reviews of claims as part of the 2-6 months benefit review. (visits will be conducted where support concerns are identified)

- In total, 39,334 2–6 months desktop reviews have taken place since April 2022, 2,815 claims cancelled due to CSS concerns, 19,095 cancelled/vacated.
- In total £7.8m in HB overpayments have been saved since 2020.

## Organisational Plans

### Key areas of focus:

To continue to strengthen communication ensuring that key learning is shared across the service and embedded within practices.

A new Training and Development Team have joined City Housing and will be developing a robust training offer to ensure that staff have the skills and attributes

Work is currently being undertaken to develop an integrated view of citizen, allowing staff to see all interventions and interactions between citizen and BCC services,

Housing Management are implementing a new service redesign ensuring that customers have a key point of contact and services are delivered before crisis occur, a key part of the offer will be to develop all staff to have a universal housing offer with much more local focus on the community and customers.

## BSAB Focus

Hoarding and Self Neglect are areas of concern for our service area.

# 8. Making Safeguarding Personal

The Care Act 2014 emphasises a personalised approach to adult safeguarding that is led by the individual not by the process. This approach is called Making Safeguarding Personal (MSP) and aims to make safeguarding more person centred and outcome focused and moves away from process driven approaches to safeguarding.

We have continued to seek assurances from our partners on how they are **“Making Safeguarding Personal”** in their organisations and how MSP has continued to be implemented in their organisations. Below are some examples of how we do this:

## Citizens Story

We start every Safeguarding Adults Board Executive Meeting with a citizen story to ground and focus the board members to the primary reason we all meet.



## Learning Events

Our learning events have focussed on the adult at risk being at the centre of the support and in control of what is happening around them and their chosen outcomes to be achieved.



## Self-Neglect Guidance

This guidance was refreshed with multi-agency collaboration from partners to ensure and promote good practices.



## Risk Enablement

This was developed with partners to achieve a balance between protection and autonomy that is right for the adult in each case.



We asked partner agencies to share how they have worked with an adult to ensure Making Safeguarding Personal (MSP) was at the heart of their work. Here are examples from BCHC (Birmingham Community Health Care and Community Trust) and ASC (Birmingham City Council's Adult Social Care).



## BCHC NHS - Case Study 1

**The District Nurse community team received a referral for a young man aged 24 in relation to the need for District Nurses to support with medication.**

The referral indicated liver disease, acites, jaundice and the coughing up of blood. It was indicated by the patient that he had 4 months to live. The handover report highlighted alcohol misuse and much depended on the alcohol consumption linked to the prognosis, if alcohol misuse continued this would result in death quite quickly.

However if treatment was provided and accepted the situation may change. The young man was deemed to have mental capacity to make decisions. He was also linked to hospice support and GP services however changes in GP practice were evident which impacted on consistency. The concerns reported by the young man linked to pain which appeared in turn to link to periods of alcohol misuse. There were periods of abstinence from alcohol misuse coupled with periods of binge drinking which exacerbated concerns and problems were magnified through the misuse of medications including anticipatory medications.

The information also indicated a lack of consistent allocation of practitioners from different agencies making relationship development challenging.

The Trust safeguarding team were contacted by the District Nurses where issues were discussed and it was advised that communication with the GP & Hospice team were needed as a co-ordinated approach was important, a multidisciplinary approach to care was indicated. It was noted that concerns about medication misuse and suicidal ideation

needed to be explored and the importance of sharing information including information regarding the use of legal powers to safeguard highly vulnerable drinkers. A safeguarding alert was raised for self-neglect and the self-neglect risk assessment noted, the case was also escalated to the Integrated Care Board as multiple health services had input spasmodically both planned and reactive however in spite of the input the problems did not subside. A meeting was held with the young man, his parents, GP, Social Prescriber, District Nurses and BCHC Safeguarding representative where discussion on treatment, risks, capacity were explored. The meeting highlighted a young man who understood the concerns that he was faced with however the only input he would accept from the GP service was input from the Social Prescriber to support housing concerns.

After the young mans death his mother was keen that services recognise that there can be lessons to learn as she noted he had his whole life in front of him. The family noted he was a funny, clever young man and was loved so very much by his family. After his death it was noted by the family that sadly the young man has suffered a serious traumatic event when in school which started the binge drinking many years earlier. The mother noted that, along with her husband, they had informed healthcare professionals of the problem relating to mental health and felt that other families are going through similar problems. They noted that their son fell through gaps in services.

## BCHC NHS - Case Study 1 (continued)

This citizen story is a challenging one which was presented and discussed at a Birmingham Safeguarding Adults Board meeting where the challenges were explored with highlighted a) the need for consistent communication sharing, b) listening to the persons story, c) considering the role of safeguarding ie exploring the potential area of exploitation where individuals may be exploited in terms of alcohol or substance misuse, d) considering the Mental Capacity Act and how addictions impact on an individual's experiences, finally the Board highlighted how services needed to be trauma informed as unless all work links to a Trauma Informed Practice Approach, then care is always reactive which can leave early life traumas untreated.



## Adult Social Care - Case Study 2



The Adult Social Care Safeguarding Team received a referral from a college. The referral was about an adult female aged 23, who has a diagnosed learning disability, ADHD and Autism.

The adult had attended her funded day opportunities at college, as she attends regular days every week, and was in pain and distress. She alleged to have been sexually assaulted by a family member. A Safeguarding Concern was reported and the incident was raised with the police. It was agreed that the police would take the lead in the investigation due to the concerns of a criminal nature. There was partnership working between the college, community and safeguarding social workers and the police to ensure the adult was safe and her desired outcomes were met. The adult did not feel safe to return home and emergency accommodation was sought for her as a proportionate response to the issues raised to prevent the risk of further alleged abuse. The adult had care and support needs as defined under the Care Act (2014), was at risk of abuse, and was potentially unable to protect herself from abuse as a result of her care and support needs, so an Enquiry was undertaken by Adult Social Care. A Mental Capacity Assessment was undertaken under the Mental Capacity Act (2005) to assess if the adult had capacity in relation to the safeguarding. It was assessed that she lacked capacity and an Independent Advocate was commissioned by the Local Authority to ensure that she was empowered and had access to independent advice and support throughout the safeguarding process.

The adult was supported to discuss her situation and a plan to safeguard the adult and achieve the outcomes she desired from the Enquiry, which were ultimately, to move into supported living accommodation. The social workers worked with the adult and her trusted support worker from the college whilst supporting a police video interview and the safeguarding Enquiry. The adult had a s9 Care Act assessment to look at her care and support needs and how these could be met. The adult was enabled to move from the emergency residential accommodation to meet her desired outcome of moving to supported accommodation, whilst also continuing to attend the college. The adult was provided with victim support. This was part of her Safeguarding Plan which was put in place to monitor her safety. The Plan was reviewed and closed as the risk had been addressed but there is on-going community social work involvement.

# 9. What is a Safeguarding Adult Review (SAR)?

A Safeguarding Adult Review takes place when agencies who worked with an adult who suffered abuse or neglect, come together to find out how they could have done things differently to prevent harm or a death.

A SAR does not seek to blame anyone; it tries to find out what can be changed so that harm is less likely to happen in the future in the way it did to other people. The law says BSAB must arrange a SAR when:

- **There is reasonable cause for concern about how BSAB and the wider partnership in Birmingham have worked together to safeguard the adult; AND**
- **The adult died and BSAB suspects the death resulted from abuse or neglect; OR**
- **The adult is alive and BSAB suspects the adult has experienced abuse or neglect.**

SARs are overseen by BSAB's Safeguarding Adult Reviews subgroup, made up of representatives from statutory partner organisations and chaired by Birmingham and Solihull Integrated Care System.

In 2023-2024 BSAB received 2 SAR referrals which were reviewed by the SAR subgroup. These referrals did not meet the SAR criteria, however, one of the SAR highlighted single agency learning which will be shared across the partnership, and disseminated to all stakeholders.

Two Local Authorities Coventry and Sandwell undertook SAR's which identified Birmingham City Council as a participant and learning from these will be shared.





# 10. Assurance Report 2023-2024

The Board uses different data and intelligence from across the partnership to give both a fuller picture and rounded view of safeguarding in Birmingham, this information is then used to identify key risks and areas where greater focus may be required.

Our Assurance Model looks like this:

## BSAB Assurance overview



### Partners

What partner agencies told us in partnership meetings and in their annual statements.



### Citizens Voice

What the people of Birmingham told us about their experiences.



### Reports

Executive Board and Subgroup reports on a range of themes.



### Data and Intelligence

What we know from the data we collect and interpret.

# Assurance Report 2023-2024

## We have sought Assurance on the following:

We have continued to seek robust assurances from partners on their activity with each other in ensuring partners are supportively engaging with each other and citizens to protect adults with care and support needs.

### Assurance was received on:

- CQC - updates on Reforms of Adults Social Care.
- ASC update on safeguarding risk and progress/actions being taken.
- Safeguarding data, dashboard and Power Bi demographics report.
- Early intervention and prevention pathway in Birmingham.
- ASC CQC pilot care quality inspection.
- ASC commissioning - Integrated quality assurance framework.
- Homeless Deaths - review and homeless persons mortality review.
- Adult Mental Health Memorandum of Understanding Section 117 aftercare.
- SAR response update learning from Sandwell SAR.
- Regulation 28 report to Prevent Further Deaths Report.
- HMICFRS - update on Police action plan to address recommendations.

## What did the Assurance tell us?

- ASC gave us assurances on plans for addressing front line issues.
- We received data to inform us of the enquires operational staff were managing and highlighted areas of future focus.
- ASC Commissioning shared the interventions they were taking to make sure the quality of care within the provider market is both monitored and maintained.
- We were given an updated on the S117 aftercare and assurances of regular reviews.
- ASC gave assurances of the learning from recent SARs and how this was being incorporated into learning and development programmes.
- West Midland Police gave assurances on the actions being taken to respond to the recent inspection report and progress on recommendations.

# 11. How do we support learning, development, engagement, and information sharing?

## Multi Agency Practitioner Forums and Events:

Practitioner events were held 3 times in 2023/2024 where learning was shared and opportunities to explore cases in detail. Briefing events were led by partners and/or specialist, These included:

- Trauma Informed Conference – led by BSAB in collaboration with Trauma Informed Practices coalition.
- Briefing event on Self Neglect and Information Sharing-Led by Adult Social Care.
- Board Development Reflective Session – Led by BSAB looking to develop a ongoing programme for Board Members.
- Safeguarding Leaders Assembly- Led by Children’s Trust Partnership focus on working together and the impact of Domestic Abuse on families.



## Communication/Engagement:

We have been active in disseminating information using various communication tools.

- The Chairs report is shared with all partners and includes regional and national updates.
- We have engaged with our partners and citizens including where we have carried out reviews.
- We have increased our engagement with other boards and partnerships.
- We have held development sessions to look at what we have learned, what has gone well, what needs to be improved and what our future priorities will be going forward.



# 12. Future Priorities 2024-2025

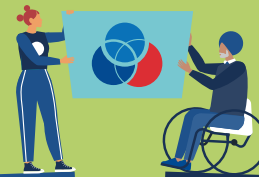
## STRATEGIC PRIORITY 1 Communication and Involvement

We will enhance our communication strategies by implementing regular feedback loops and ensuring all voices are heard.



## STRATEGIC PRIORITY 2 Prevention and Early Intervention

We will prioritize early intervention and provide timely support to prevent escalation of problems.



## STRATEGIC PRIORITY 3: Making Safeguarding Personal

We will actively involve individuals in decision making process and tailoring our approaches to meet their unique needs.



## STRATEGIC PRIORITY 4: Learning through Development and Assurance

We will promote shared learning ensuring lessons learned are integrated into our processes.



## STRATEGIC PRIORITY 5: Systems, Processes and Performance

We will continuously evaluate and optimise our system process to ensure they are efficient, effective and align with our vision.



# 13. Appendices

## Appendix 1 - BSAB Executive Attendance at Board Meetings 2023/2024

The below table shows attendance of each group to meetings that took place, a blank indicates an instance of non attendance.

Number of meetings per Partner									
4	3	2	4	3	2	4	4	3	3
Birmingham City Council - Adult Social Care	Birmingham City Council - Housing	Birmingham Healthwatch	Birmingham and Solihull Integrated Care System	West Midlands Police	Birmingham and Solihull Mental Health Trust	Birmingham Community Heath Care Foundation Trust	West Midlands Fire Service	Women Acting in Today's Society	Public Health



## Appendix 2 – Partner Feedback

### “ Partner 1: BSol ICB

NHS Birmingham and Solihull remain committed to working with Birmingham Safeguarding Adults Board and in partnership with key agencies and other stakeholders. As a partner we have a strong working relationship with Dr Carolyn Kus (Independent Chair of BSAB) and other members of the Board which continues to grow in strength. We look forward to continuing the important work of the Board in creating a safe and healthy community for adults across Birmingham to ensure our vulnerable citizens can live without fear, harm and neglect.

**Diane Rhoden** – Director of Nursing – Safeguarding, Children in Care and Child Death Review

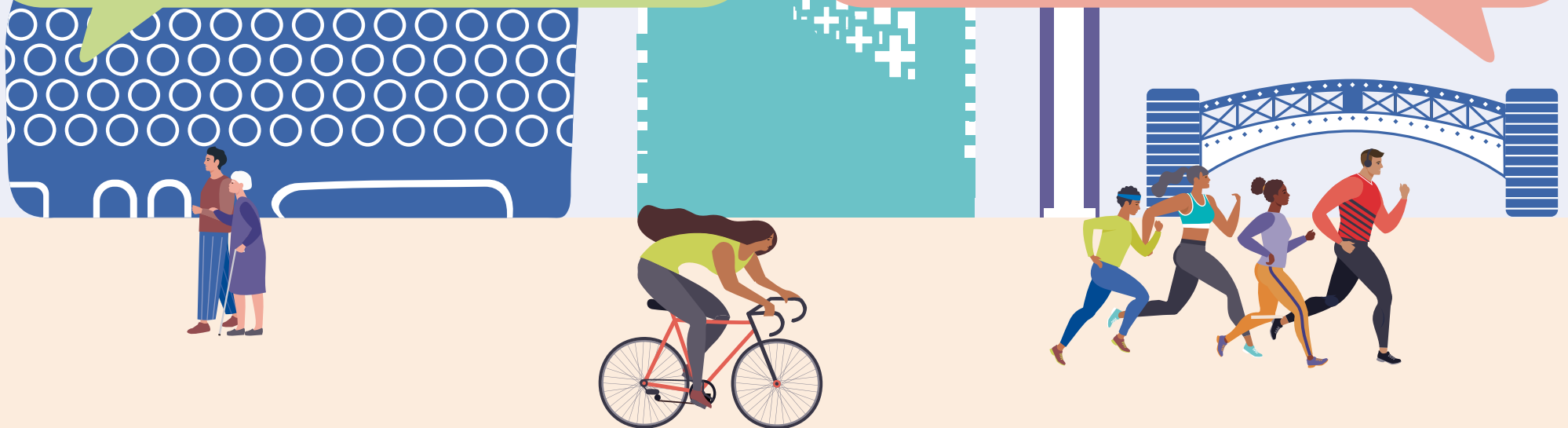
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### “ Partner 2: Healthwatch

Healthwatch Birmingham is proud to be a member of the Board and subgroups, and celebrate the achievements outlined in this report. Our role of listening to the public's experiences of Health and Social Care give us a unique perspective for the Board. Our ability to hear quality and safety issues for adults with care and support needs across local services is an important role. We look forward to working with the Board in the year ahead to continue to hear the experiences of individuals and support the Board in using this insight to drive improvement for Birmingham residents.

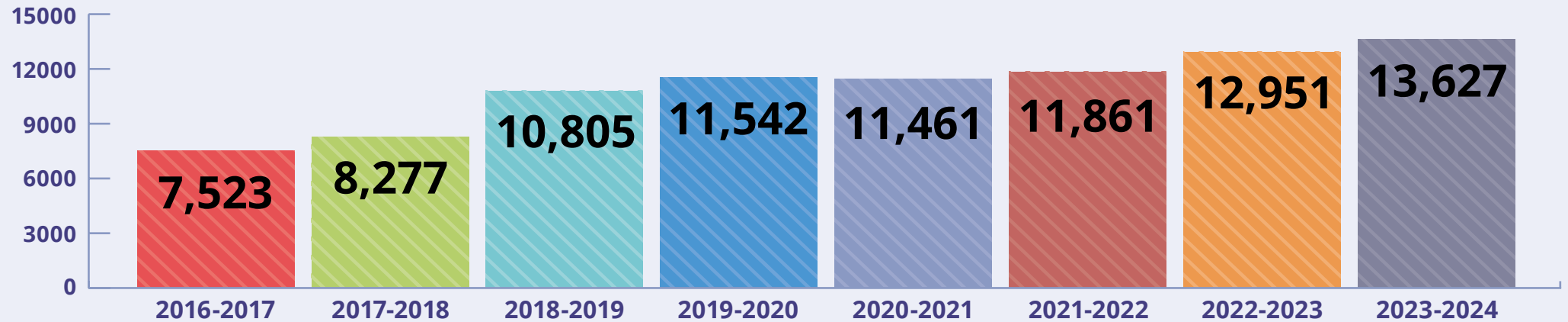
**Andy Cave** – CEO Healthwatch – Birmingham

”

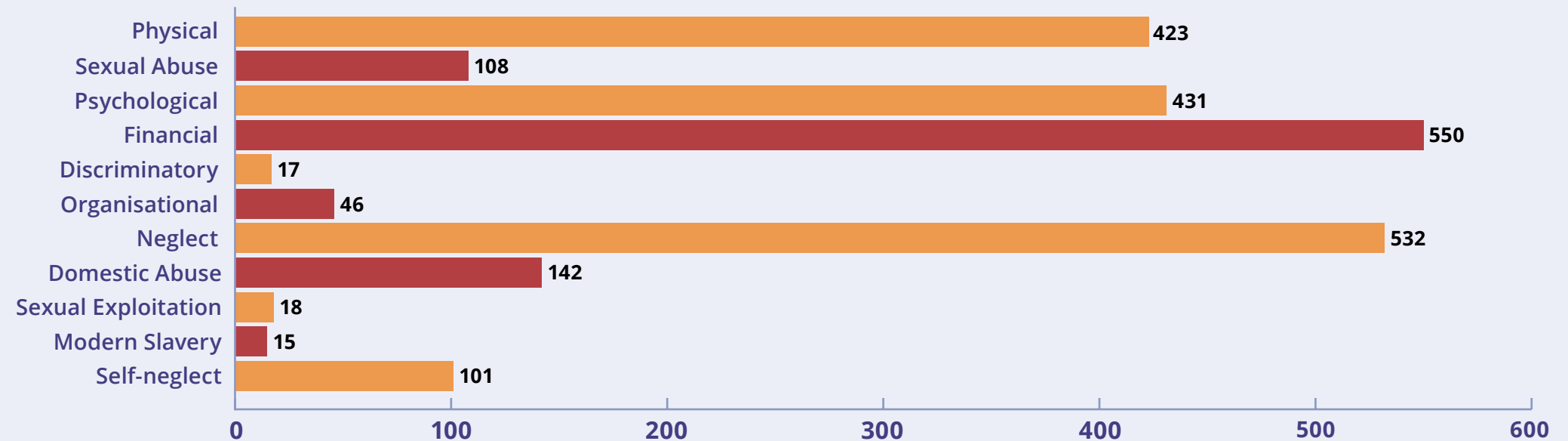


## Appendix 3 - Safeguarding Adults Data - Care Act 2014 - Section 42 (1 of 3)

Adult Safeguarding Concerns reported to Birmingham City Council each year from 2017-2024

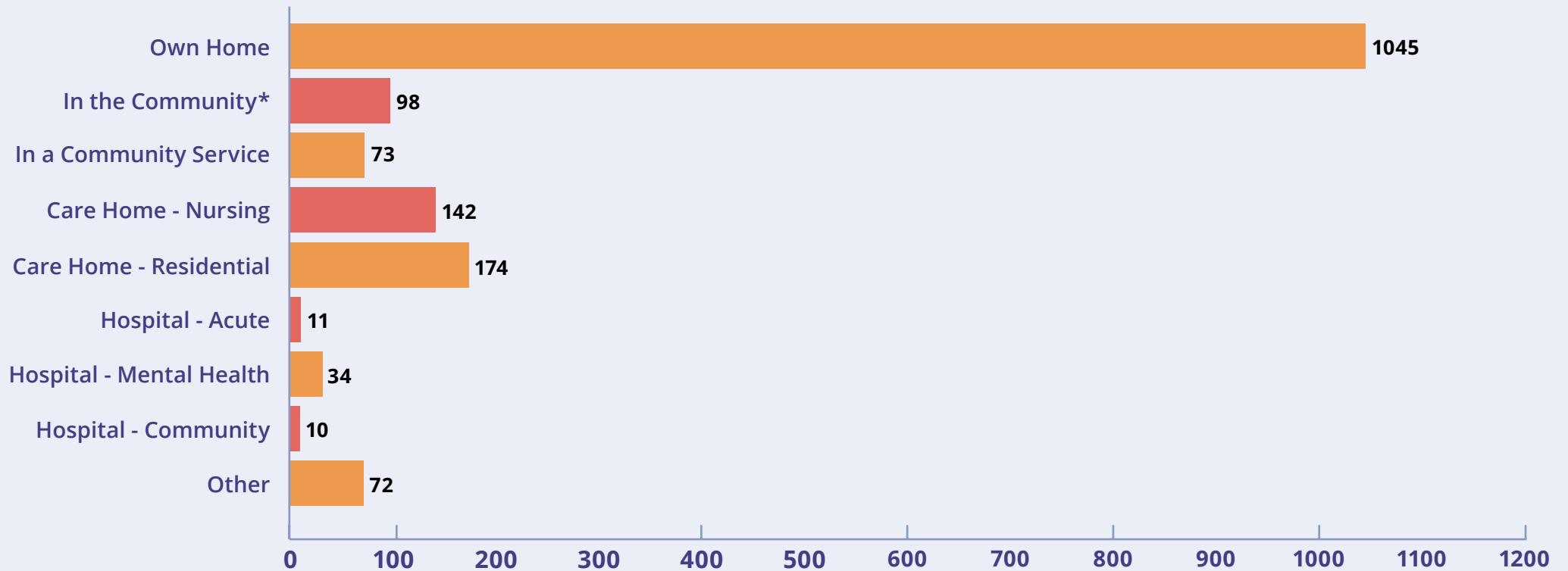


### Types of abuse for all Enquiries 2023-24



## Appendix 3 - Safeguarding Adults Data (2 of 3)

### Location of alleged abuse or neglect in concluded Enquiries 2022-2023



\*(Excluding Community Services)



## Appendix 3 - Safeguarding Adults Data (3 of 3)

### How people felt about whether their Enquiry had achieved what they wanted

<b>Fully achieved</b>	<b>72%</b>
Partially achieved	21.4%
Not achieved	6.6%
Not recorded	0%

### Proportion of people who were asked the outcome they wanted for their concluded Enquiry in 2023-2024

% of people who told us what they wanted to achieve	<b>74.5%</b>
% of people who were asked but did not say what they wanted to achieve	7.8%
% of people not asked	16.7%
Not Recorded	1%

### How people felt after their Enquiry

Did the person feel involved?	<b>98.6%</b>
Did the person feel listened to?	98.1%
Did you understand why people did what they did?	97.5%
Do they feel safer as a result?	94.7%
Do they feel happier as a result?	93.2%



# 14. Glossary

**Adverse Childhood Experiences (ACEs)** – the stressful or traumatic events in childhood that can affect people as adults.

**Anti-Social Behaviour Case Reviews** – right for victims to request a review where they believe their report of anti-social behaviour problems has not been properly addressed.

**Care Act 2014** – the law that sets out how adult social care in England should be provided:

- s42 the section under the legislation that sets out when a Local Authority has a duty to undertake, or cause others to undertake, a safeguarding Enquiry if an adult with care and support needs may be at risk of, or is experiencing, abuse or neglect and as a result of those needs is unable to take steps to protect themselves.
- s44 the section under the legislation that sets out when a Safeguarding Adults Board should consider when Safeguarding Adult Reviews should be undertaken because the criteria have been met or there is value in doing so.

**Care Quality Commission** – the independent regulator of health and social care in England.

**Child Safeguarding Practice Reviews** – an independent review where a child has been seriously harmed or has died and abuse or neglect is known or suspected.

**Community Safety Partnership** – statutory partnership to reduce crime, fear of crime, anti-social behaviour, alcohol and drug misuse and reducing offending.

**Domestic Abuse, Stalking and 'Honour'-based violence (DASH)** – risk assessment tool in relation to the risk of domestic abuse used to support referrals to MARAC. These can have specific risk areas such as the S-DASH with questions focusing on the risks of stalking and harassment.

**Deprivation of Liberty Safeguards (DoLS)** – procedure to protect the rights of adults in care homes or hospitals who cannot consent to their care and treatment arrangements under the Mental Capacity Act 2005.

**Domestic Abuse Housing Alliance** – national partnership supporting housing providers response to domestic abuse.

**Domestic Homicide Reviews** – enable lessons to be established where a person was killed as a result of domestic violence and abuse.

**Early Help HUBs** – a resource for practitioners working with children and families to find services that can help to support.

**Exempt Accommodation** – supported housing that is exempt from certain Housing Benefit provisions e.g. a resettlement place or certain accommodation providing care, support or supervision.

**Forced Marriage** – a marriage where one or both parties do not or cannot consent to the marriage and pressure or abuse is used to force them into the marriage.

**Forward Thinking Birmingham** – partnership of organisations offering mental health support, care and treatment for under 25s in Birmingham.

**Health and Wellbeing Board** – sets strategic direction to improve health and wellbeing of people locally.

**‘Honour’ Based Violence** – abuse that occurs when perpetrators perceive that the victim has shamed the family and/or community by breaking an ‘honour’ code.

**Independent Domestic Violence Advocate** – works with the victim of domestic violence and seeks to empower them.

**Independent Management Review** – to detail, analyse and reflect on actions, decisions, missed opportunities and areas of good practice within an individual organisation.

**Integrated Care Board** – NHS organisation responsible for developing a plan for meeting health needs, managing NHS budgets and arranging health care in a geographical location.

**Integrated Care System** – partnership between organisations that meet health and social care needs.

**LeDeR** – learning disabilities mortality review to identify learning where a person with a learning disability and autism has died.

**Liberty Protection Safeguards** – the planned legislation that will replace DoLS.

**Multi Agency Public Protection Arrangements** – management of violent and sexual offenders.

**Multi Agency Risk Assessment Conference** – meeting to share information of the highest risk domestic abuse cases.

**Offensive Weapons Homicide Review** – requirement for police, Local Authorities and local health boards in England and Wales to review deaths of over 18s involving, or likely to have involved, an offensive weapon.

**Predatory Marriage** – a forced marriage where the individuals’ mental capacity to marry is in doubt or is vulnerable to undue influence.

**Right Help Right Time assessment** – guidance for everyone working with children and families in Birmingham.

**S11 audit – under Children Act 2004** – duty on key organisations to self-assess the extent to which they meet the safeguarding requirements and standards to safeguard and promote the welfare of children.

**Serious Incident Review** – to identify, investigate and learn from serious incidents.

**Serious Violence Duty** – councils and local services to work together to share information and target interventions to prevent and reduce serious violence.

**7 Minute Briefing** – a tool for learning based on research suggesting seven minutes is the ideal timespan in which to concentrate and learn.

**Think Family Agenda** – a way of working that recognises and promotes the importance of a whole-family approach.

**Violence Reduction Unit** – a partnership organisation that aims to reduce violent crime across the West Midlands.



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[www.bsab.org](http://www.bsab.org)

