



Gloucestershire
Safeguarding Adults
Board

Gloucestershire Safeguarding Adults Board (GSAB)

Annual Report 2023/24

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Welcome from the GSAB Chair

Welcome to the Gloucestershire Safeguarding Adults Board Annual Report for 2023-24

Welcome to my last annual report as the Independent Chair of the Gloucestershire Safeguarding Adults Board (SAB), the production of which is one of the statutory requirements of the Care Act 2014, this covers the period April 2023 to March 2024.

The report sets out what we have done in Gloucestershire in the last 12 months to help and protect adults at risk of abuse and neglect, during the second year of our three-year Strategic Plan 2022-2025.

We are now looking ahead to what is going to be a busy final year, towards the end of which we will be looking for a new Independent Chair to establish a new Strategic Plan and to set the priorities for the partnership moving forward into 2025.

In 2023, the Gloucestershire Safeguarding Adults Team introduced the Safeguarding Adults Single Point of Access (SPA) for professionals to report neglect and/or abuse. The SPA is resourced with dedicated Safeguarding professionals and is currently receiving some 90% of all referrals.

This means that high risk concerns are dealt with promptly and steps taken to safeguard individuals. Also, the quality of the referrals is set to improve, as the team can now provide feedback to the referrer, and this in turn will lead to better quality data, which will help determine better outcomes for individuals at risk.

We have also finally been able to gain access to quality Safeguarding Adult data after a couple of difficult years. The Board now has a Performance and Data Report available for each meeting that enables us to identify patterns and trends and on which we can level partnership data to bring about better outcomes.

We have also reintroduced the requirement for the Statutory partners, including the Local Authority, to evidence their progress and areas of concern by way of a Highlight Report that is provided to Board members who can then hold agencies to account at the Board meeting. A report is also produced by the Independent Chair.

As a Board we have also been preparing for the forthcoming inaugural Care Quality Commission Assessment of Gloucestershire Adult Social Care in 2024, that will include safeguarding. We have contributed to the self-assessment collection and taken part in a peer review process that has enabled us to gain a greater understanding of our strengths and areas for improvement.

During 2023/24 there were 2693 concerns (compared to 2227 in 22/23) raised of potential abuse and neglect, an average of 224 (compared to 186 in 22/23) per month, which is a rise of 20% compared to the previous year.

A significant and critical part of the Safeguarding Adults Board role relates to learning and development, through the work of the Workforce Development Group and Safeguarding Adults Review Subgroup. They are responsible, on behalf of the Board, in supporting improvements in professional practice and making sure that the recommendations from reviews, both local and National, become embedded in local practice.

Our Workforce Development Group oversaw the take-up of 17,935 (compared to 16,535 last year) individuals undertaking GSAB approved Safeguarding and Mental Capacity Act courses.

One new SAR has been commissioned (F), one is ongoing (E), and one has concluded; with one Rapid Review completed.

As we move into the final year of our strategic plan there is still further work to be done to enhance our quality assurance and data analysis from across the partnership, to build on the data provided by the local authority.

The outcome of the forthcoming inaugural Care Quality Commission Assessment of Gloucestershire Adult Social Care will provide us with further opportunities to benchmark where we are, and what we need to do, to bring about better outcomes for some of the most vulnerable individuals in the county. This will provide the new chair of the Board with rich information and a clear direction of travel.

Some of the work delivered by the Board and its subgroups during this period is outlined below:

- Reviewing the findings from the Thematic Statutory Reviews, looking at SARs, Children's Reviews and Domestic Homicide Reviews
- This year two Roadshows were held for professionals highlighting the learning from safeguarding adults reviews, children's reviews and domestic homicide reviews
- Production of a new GSAB Quarterly Report, using Power BI, as the reporting tool
- Producing and disseminating four issues of the GSAB Quarterly Newsletter, to over four thousand subscribers covering a variety of themes
- A Train the Trainer CPD Event was held in September, with topics including fraud, hoarding, Deprivation of Liberty Safeguards (DoLS) and the GCC Single Point of Access (SPA) Team
- Our Multi-agency Audit Group has undertaken a programme of multi-agency audits on the following topics: Continuing Healthcare, Self-Neglect, Homelessness and Making Safeguarding Personal

As always, I would like to finish by extending my thanks and appreciation to my Board Business Manager, the current Board, and members of our various subgroups, for their continued support and commitment to developing and promoting the work of protecting adults.

I would also like to acknowledge the work and commitment of our front-line practitioners, for their dedication and professionalism in these ever-challenging times.

Finally, it has been a real privilege to have served as Independent Chair of the Board for the past 10 years. I have had the pleasure of working with many dedicated professionals, both past and present.

Together, we have made steady progress in promoting adult safeguarding across the county, however, there is still much for the Board and my successor to undertake, to protect some of the most vulnerable adults in our community from becoming victims of abuse and neglect.

A handwritten signature in black ink, appearing to read 'P. Yeatman'.

Paul Yeatman

Independent Chair
Gloucestershire Safeguarding Adults Board

This is Gloucestershire

The 2021 Census showed that Gloucestershire's population was 645,076 in 2021. This is an increase of 8.1%% between 2011-21, which is higher than the growth rate of 6.3% for England and Wales.

Gloucester continues to have the largest population with 132,416 people and the Forest of Dean has the smallest at 87,004. Between 2021-22, Tewkesbury had the most population growth at 15.8% followed by Cotswold with a 9.6% increase. Cheltenham saw the lowest rate of growth with an increase of 2.7% or around 3,000 people.

The overall gender distribution for Gloucestershire is 48.9% males and 51.1% females, in line with the gender split seen at a national and regional level.

In 2021, 93.1% (600,314 people) of Gloucestershire's population identified as "White". Gloucestershire is less diverse than the national average, with 81.7% of residents across England and Wales identifying as "White", however it was in line with the regional average where 93.1% of residents identified as "White". All districts in Gloucestershire had a higher proportion of residents identifying as "White" than nationally. The urban districts of Gloucester and Cheltenham (84.9% and 91.4%) had the lowest proportion of "White" residents, while the Forest of Dean had the highest (97.5%).

In 2021, an estimated 517,644 adults aged 18 and over lived in Gloucestershire, of these around 139,810 people were over-65s. The proportion of working-age (16-64) is 60.84%; this is lower than the overall working-age proportion in England and Wales (62.93%) but slightly higher than in the South West (60.73%). The proportion of people over the age of 65 is higher in Gloucestershire (21.6%) than in England and Wales (18.66%) but slightly lower than in the South West (22.34%).

In the 12-months to May 2020, around 12,100 adults and older people were receiving social care services funded by Gloucestershire County Council, including about 6,200 who received long-term care such as domiciliary care, residential care and nursing care. There were also around 1,400 adults in Gloucestershire receiving council-funded services as a carer in the same period.

Gloucestershire has a larger proportion of older population (age 65+) than nationally. Its older population is forecast to rise at a faster pace than nationally in the next 25 years, from 135,000 to 205,900 people between 2018 and 2043.

There were around 20,200 informal carers aged 65+ in Gloucestershire in 2020, this is expected to increase to 25,100 in 2030.

Studies suggest that the level of unmet social care need is higher among older people on low incomes than those on higher incomes. In Gloucestershire, 8 neighbourhood areas were ranked among the national top 10% income deprivations affecting older people.

From Older People in Gloucestershire Prevalence of Needs Report (link below)
https://www.gloucestershire.gov.uk/media/basfqyln/op_prevalance_of_need_2020_final.pdf

What is Safeguarding?

**The Care Act 2014 Statutory Guidance confirms that
“Safeguarding means protecting an adult’s right to live in safety, free from abuse and neglect” (14.7)**

It is about people and organisations working together to prevent and stop both the risks and experiences of abuse or neglect, whilst at the same time making sure that the adult’s wellbeing is promoted including, where appropriate, having regard for their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear, or unrealistic about their personal circumstances.

Abuse and neglect can take various forms including: **Physical abuse, Modern slavery, Domestic abuse, Discriminatory abuse, Sexual abuse, Organisational or institutional abuse, Psychological or emotional abuse, Neglect and acts of omission, Financial or material abuse and Self-neglect.**

More information on these can be found in Appendix One.

The Care Act 2014 requires partner agencies and services to work together to protect adults at risk of abuse and neglect. Joined up safeguarding processes and practice ensure that:

- ❖ Joint working prevents, reduces or delays the risk of harm to the adult
- ❖ Safeguarding concerns are identified and reported to support the adult
- ❖ Those who have a statutory duty to enquire, act in a timely, person centred and co-ordinated way

Under Section 42 of the Care Act, the local authority has a responsibility to undertake an enquiry where there is a concern that an adult with care and support needs is unable to protect themselves when experiencing or at risk of abuse or neglect. If the criteria in Section 42 (1) are met, then the local authority must conduct an Enquiry and decide on any action under Section 42 (2).

Any enquiry should include an attempt to gain the views of the adult at risk as to what is important to them and what they would like to happen, providing any necessary support, such as an advocate. This is called Making Safeguarding Personal. If the adult at risk has the capacity to make a decision, their wishes must be respected. However, this view must be balanced with an assessment of the risks and an agreement reached as to how these risks will be monitored and managed.

The Care Act says: Local authorities should not limit their view of what constitutes abuse or neglect, as they can take many forms and the circumstances of the individual case should always be considered.

What are the six principles of Safeguarding?

Empowerment

People being supported and encouraged to make their own decisions and informed consent

Prevention

It is better to take action before harm occurs

Proportionality

The least intrusive response appropriate to the risk presented

Protection

Support and representation for those in greatest need

Partnership

Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.

Accountability

Accountability and transparency in safeguarding practice

Deprivation of Liberty Safeguards (DoLS)

If a person needs protective measures to be put in place to keep them safe and is assessed as lacking capacity to make decisions about that particular area, either the local authority or the Court of Protection, depending on the circumstances, can authorise a Deprivation of Liberty Safeguards (DoLS). This gives a legal authority to restrict a person's liberty in a specified way in order to keep them safe. There are strict criteria as to what is appropriate when putting such measures in place.

Safeguarding Adults Board (SAB)

The Care Act 2014 Statutory Guidance confirms that “the main objective of a SAB is to assure itself that local safeguarding arrangements and partners act to help and protect adults in its area” who meet the safeguarding criteria (chapter 14.133).

Role and Purpose

The Care Act 2014 introduced Safeguarding Adults Boards (SAB) and gave them the responsibility to seek assurance that there are effective local safeguarding arrangements. The overarching purpose of a SAB is to help and safeguard adults with care and support needs. It does this by:

- Assuring itself that local safeguarding arrangements are in place as defined by the Care Act 2014 and statutory guidance
- Assuring itself that safeguarding practice is person-centred and outcome-focused
- Working collaboratively to prevent abuse and neglect where possible
- Ensuring agencies and individuals give timely and proportionate responses when abuse or neglect have occurred
- Assuring itself that safeguarding practice is continuously improving and enhancing the quality of life of adults in its area

Under the Care Act a SAB is required to:

To publish an Annual Report

To publish a Strategic Plan

To commission Safeguarding Adult Reviews

To hold partner agencies accountable for how they work together to protect adults from abuse and neglect

How to report a safeguarding concern

A safeguarding concern is raised where there is reasonable cause to suspect that an adult who has, or may have, needs for care and support is at risk of, or experiencing, abuse or neglect. Care Act 2014 Section 42 (1) (a) and (b).

If you are concerned that you or another adult is being abused or neglected, please report it. Some adults are particularly vulnerable to be hurt or abused because they have a disability, illness, or impairment and need help and support. Depending on others can sometimes make them vulnerable and at risk of abuse, very often from people they know. This isn't always intentional... but it is still abuse.

Helpful Information

- Why you are concerned
- The name, age and address of the adult at risk
- If anyone lives with them
- If they are getting help from any organisation
- Who may be carrying out the abuse

Don't delay in reporting the abuse, even if you're not sure about some of these details.

Contact the Adult Help Desk

- Telephone 01452 426868
- 8am to 5pm Monday to Friday
- Or when out of hours call the Emergency Duty Team on 01452 614194
- You can also email: socialcare.enq@gloucestershire.gov.uk

Professionals Only

Professionals reporting safeguarding concerns about an adult with care and support needs should complete a Safeguarding Adults Referral Form (link below)

<https://www.gloucestershire.gov.uk/gsab/contact-us/>

Single Point of Access (SPA) Team

The GCC Safeguarding Adults Single Point of Access (SPA) Team went live in August 2023. This is a new service for professionals to report neglect and/or abuse. Referrals now go directly to the GCC Safeguarding Adults Team and are screened by a dedicated team of three Screening Officers and a Safeguarding Practitioner. They decide if the concern needs to be passed to the Safeguarding Adults Team for a decision about whether a S42 enquiry is needed, or if an alternative route is indicated.

Care providers are the largest group of referrers, followed by the Police and then Health partners.

Feedback from users has been very positive; referrers are finding it simple to use and they are happy with the guaranteed feedback on what has happened to their referral; this was not available prior to the implementation of the SPA.

The SPA has led to an increase of 31% in the number of safeguarding concerns reaching the Safeguarding team. Whilst this is positive, it does mean that there is a higher volume of work.

Risk mitigations are in place to ensure that high risk safeguarding concerns are dealt with promptly, with a decision made on the same day where possible. Older cases are more likely to be ones where the criteria for a s42 enquiry are not met and signposting is instead required.

To address this issue, recruitment is underway for three new Safeguarding Support Officer posts. They will replace the two Practitioners who were promoted to Team Managers at the end of December 2023. These posts will provide additional support for the SPA and the Referral Centre, give the Practitioners more time to undertake development, improvement, Making Safeguarding Personal work and help to reduce the waiting times for concerns to be processed.

As the portal has become embedded, there has been an increase in the use of the portal to make referrals which are not safeguarding e.g. some requests for care needs assessments are being reported through the portal rather than the GCC Adult Helpdesk.

The Portal has helped to identify trends and common themes, which has enabled effective information sharing with commissioning teams and partners.

Professionals can use the following link to access the portal and make a referral:

<https://forms.gloucestershire.gov.uk/AdultSocialCareReferral>

Concerns being raised by the public continue to be dealt with by the GCC Adult Helpdesk.

Safeguarding activity in Gloucestershire

The data below covers the period 1st April 2023 to 31st March 2024.

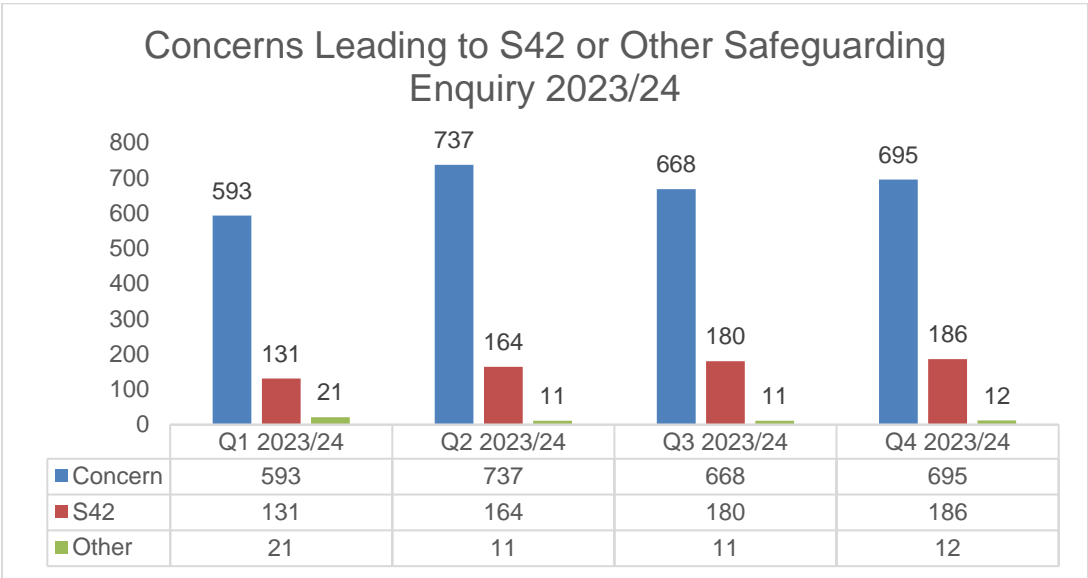
The number of Safeguarding concerns raised on behalf of adults at risk was **2,693**.

Of the **2,693** concerns, **661** went on to become Section 42 enquiries and **55** became ‘Other’ enquiries, making a total of **716**.

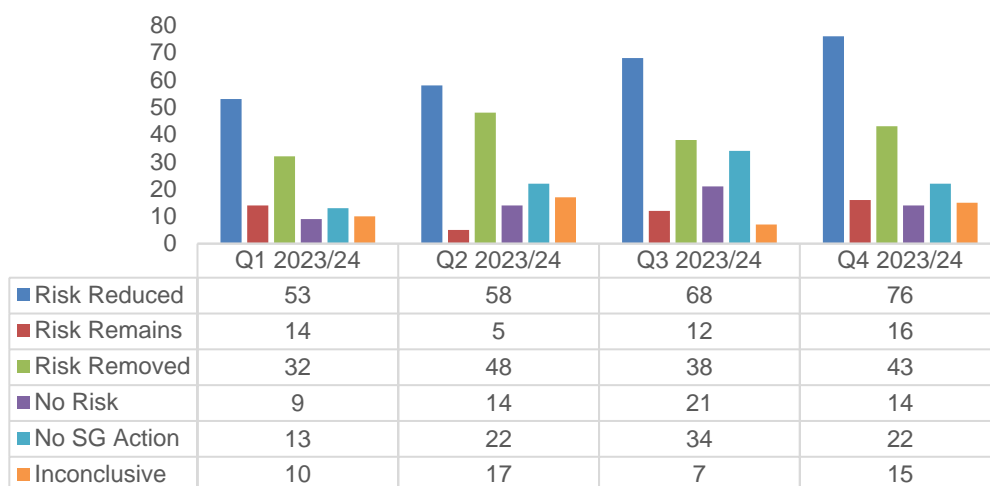
‘Other’ relates to enquiries that have not met the criteria for a statutory enquiry, however some form of safeguarding enquiry is deemed to be required, for example, the person is at risk of abuse and has support needs, but not care needs.

Safeguarding Activity 2023/24

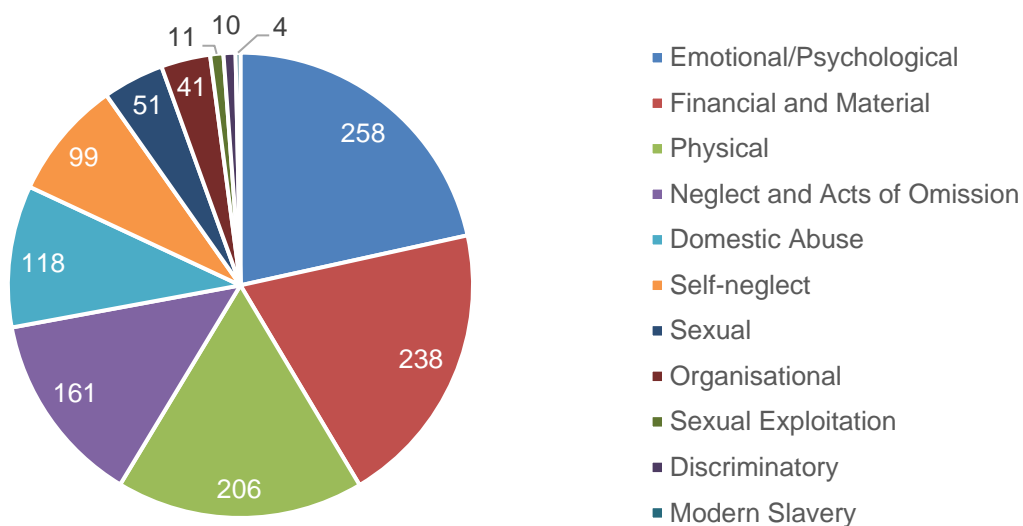
LA	Safeguarding Concerns	Section 42 Safeguarding Enquiries	Other Safeguarding Enquiries	Total Enquiries
Gloucestershire	2,693	661	55	716



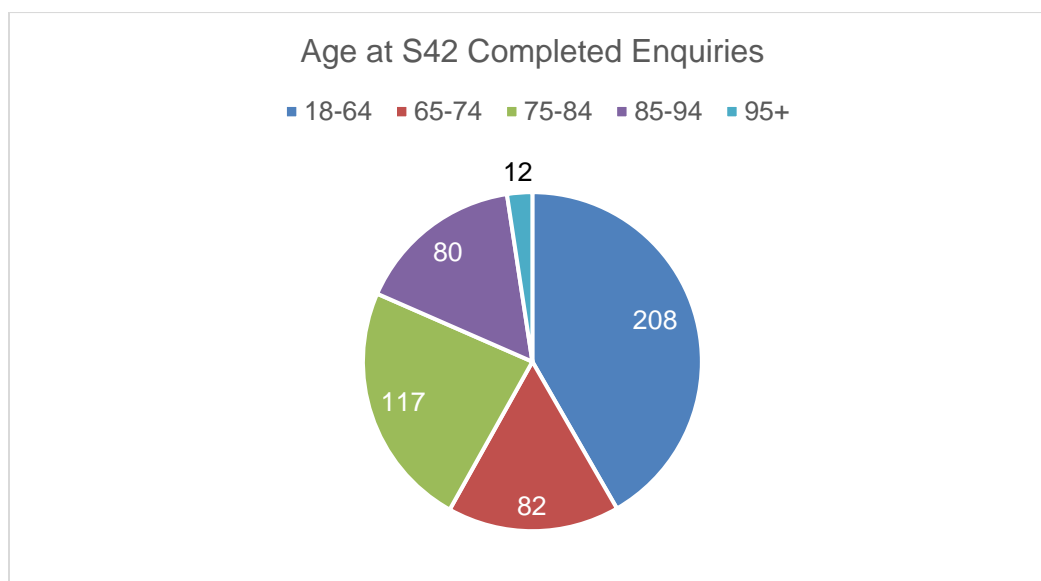
Closed Section 42 Enquiries and Outcome



Abuse Types Closed S42 Enquiries



Abuse Type (Safeguarding Information Form)	Closed Episodes	% of Closed Episodes
Emotional/Psychological	258	39%
Financial and Material	238	36%
Physical	206	31%
Neglect and Acts of Omission	161	24%
Domestic Abuse	118	18%
Self-neglect	99	15%
Sexual	51	8%
Organisational	41	6%
Sexual Exploitation	11	2%
Discriminatory	10	2%
Modern Slavery	4	1%



Age	Number	Percentage
18-64	208	43%
65-74	82	16%
75-84	117	23%
85-94	80	16%
95+	12	2%
Total	499	100%

There has been an increase in the number of concerns this year compared to last year, when 2,227 concerns were received. The percentage of concerns proceeding for a section 42 enquiry has also slightly increased, from 24% to 25%. This is due to the introduction of the Single Point of Access Team, which has led to an increase in the number of concerns received, as all contacts from professionals are now screened by workers within the Safeguarding Adults Team.

The types of abuse are very similar when compared to 2022/23. Last year, Self-Neglect was included within the category of Neglect and Acts of Omission, this year it is a separate category.

As our access to data improves, we hope to provide more qualitative information about people's experience of the safeguarding process which will be used to try to ensure safeguarding enquiries are carried out in a person-centred way.

GSAB Strategic Plan 2022-25

The Board's Strategic Plan covers a three-year period, as recommended by the Care Act Statutory Guidance. The plan covers the period 2022-25. Consultation on the content of the plan was conducted by Healthwatch. The priorities of the Strategic Plan are undertaken by the various GSAB Subgroups and partner agencies.

GSAB's Three Key Strategic Priorities

- To increase awareness and understanding of Adult Safeguarding among professionals and the public in Gloucestershire
- Prevention and Responding to Reports of Abuse and Neglect
- Learning and Continuous Improvement

Key achievements and work against the Strategic Plan are detailed throughout this report, but some examples include:

- ❖ The scope of the Annual GSAB Roadshows was expanded to include members of the public
- ❖ The GSAB website was updated to include the new 'Information Zone'
- ❖ The GCC Single Point of Access (SPA) for professionals to raise Adult Safeguarding Referrals went live
- ❖ A Hoarding Forum, set up by the Fire Service for both professionals and those that hoard, has continued to grow and expand across the county
- ❖ A Train the Trainer CPD Event was held in September, with topics including fraud, hoarding, Deprivation Liberty Safeguards (DoLS) and the GCC Single Point of Access (SPA) Team
- ❖ The GSAB Self-Assessment Audit for partner agencies, including the Voluntary and Community Sector (VCS) was completed, with an assurance session undertaken for statutory partners
- ❖ Production of a new GSAB Quarterly Report, using Power BI, as the reporting tool
- ❖ Producing and disseminating four issues of the GSAB Quarterly Newsletter to over 4,000 subscribers, covering a variety of themes
- ❖ Reviewing the findings from the Thematic Statutory Reviews, looking at SARs, Children's Reviews and Domestic Homicide Reviews



Case Study (Names and some of the details have been changed to protect confidentiality)

Gerald – Right to Private Life vs. Risk of Exploitation

Background:

Gerald is an elderly man living alone, he took on a private carer to assist him after struggling with daily tasks. Concerns arose when Gerald started withdrawing large sums of cash, altering his will, and paying for non-care-related expenses such as holidays for the carer and her friend. Friends and professionals suspected that Gerald was being exploited due to his loneliness and generosity.

Actions Taken:

Initial Enquiries and Consent - Given the number of concerned individuals (friends, GP, solicitor) and the potential risk, proportionate enquiries were initiated. These included conversations with Gerald in the first instance to understand his perspective.

Assessments revealed no cognitive impairment or other factors affecting Gerald's decision-making ability. Gerald explained that he felt lonely since his wife's passing and considered the carers as companions who improved his quality of life. The enquiry ceased at his request based on Gerald's clear reasoning and ability to make reasonable decisions.

However, concerns persisted regarding exploitation by the informal carers. Friends worried that Gerald had been saying that he might marry the carer and had made an appointment to change his will. Friends' attempts to visit Gerald were impeded by the carers, raising further suspicions.

Despite Gerald's insistence that he was content with the carers, adult social care professionals continued to work with him but focused on building a relationship while acknowledging his views. They provided timely and relevant information which helped Gerald understand his options more openly. By reducing reliance on the source of risk (the carers), Gerald was able to gain a sense of what he needed, which was proportionate to his need and to his finances. Eventually, the carer left the property after Gerald started to take on new activities and became less reliant on the carer.

Learning Points:

Consideration of consent and risk: Initial enquiries considered Gerald's views, but as concerns persisted, further sensitive and proportionate responses were necessary.

Mental Capacity and the right to make “unwise decisions”: Gerald's need for companionship overrode any qualms he might have had about exploitation, his decision-making ability remained intact, and the information provided by adult social care and friends helped him to make an informed decision. However, in line with the Mental Capacity Act 2005, as a capacitated adult, Gerald had the right to make decisions other people may have considered to be unwise and this must be respected by professionals, however concerned they may be. Public bodies have a positive obligation under Article 8 of the European Convention on Human Rights to have respect for the right to private and family life.

Safeguarding measures must therefore strike a balance between protection and respecting an individual's autonomy and wishes.

Learning from our Safeguarding Adults Reviews

A key statutory duty of the SAB is to carry out Safeguarding Adult Reviews (SARs) as appropriate under Section 44 of the Care Act.

The Safeguarding Adults Review (SAR) subgroup is responsible for deciding whether a SAR referral meets the criteria for a S44 Review under the Care Act (2014). Decision making on each referral follows the identification of relevant agencies, information gathering and subsequent analysis. As SARs are progressed, the group works together on all proposed recommendations, ensuring that key learning is cascaded.

Safeguarding Adult Reviews (SARs)



For the year 2023/24, one new SAR has been commissioned (F), one is ongoing (E), and one has concluded; with one Rapid Review completed. Both the concluded SAR and the Rapid Review have not been published, as in both the person involved is identifiable, but learning briefs have been produced and the recommendations are being taken forward by all of the agencies involved. We continue to see complex needs as the overarching theme in our current reviews and referrals, with self-neglect, mental ill health, drug and alcohol use and sometimes homelessness evident.

New SAR – F

A new review has been commissioned to look at the case of a care leaver who had a mild learning difficulty and complex emotional needs, along with chronic health problems. An independent reviewer is currently being sought.

Ongoing SAR – E

A referral was raised by a member of the public. E was murdered and there were also concerns about self-neglect. Several learning events have taken place and the reviewer is currently writing the report.

Rapid Review – A

A Rapid Review has been conducted for A, who experienced neglect in her own home. The learning from this includes: how the GCC Adult Helpdesk shares information, the Police to review the VIST process for cases containing both adult and child information, to ensure they are passed to both services where appropriate, and GCC Adult Social Care to consider the approach to carer support to ensure that it includes a focus on the person being cared for.

Overview of SAR Referrals Received 2023/24

The table below shows an overview of the SAR referrals made to GSAB, capturing the breadth of referral sources as well as the time period when referrals were made.

	Q1	Q2	Q3	Q4
Referrals Received	K Z		C A M A2	F A/A
Referral Source	Gloucestershire Constabulary Strategic Housing Partnership		LeDeR GCC Adult Safeguarding x 3	GCC Childrens Services Gloucestershire Constabulary
SAR Undertaken	-	-	1	1
Name	-	-	A – Rapid Review	F
Learning Event	-	-	0	0
Comments	-	-	One was a LeDeR Review. Two referred for a Domestic Homicide Review	

SAR Referrals 2023/2024:

K – A case for concern was raised (Q1) by Gloucestershire Constabulary following the death of a young person placed by Somerset. This did not meet the criteria for a SAR. The provider has carried out a full investigation and the recommendations are being monitored by Somerset.

Z – A referral was made (Q1) by the Strategic Housing Partnership following a homeless death. This did not meet the criteria for a SAR.

C – A referral was made (Q3) following a Learning Disability Mortality Review (LeDeR). The LeDeR Report was scrutinised by the SAR subgroup and it was felt no additional learning could be obtained if a SAR was conducted.

M/A2 – Two referrals were made (Q3) for two separate domestic abuse deaths. These did not meet the criteria for a SAR but were referred for a decision regarding a Domestic Homicide Review.

A/A – A case for concern was raised (Q4) following two deaths, both had existing long term health conditions and one had been in hospital previously. There were no issues with how agencies worked together and this did not meet the criteria for a SAR.

Published SARs

SAR reports can be found at: <http://www.gloucestershire.gov.uk/gsab/>

Fire Safety Development

Purpose:

The aim of the subgroup is to reduce the risk of serious fires in the home, as these disproportionately affect older adults, people with a disability or care and support needs, those in overcrowded homes and living in areas of deprivation. The work of this group is focused on improving the awareness of fire risks, communicating that to a wider workforce, identifying people who may be at risk of fire and analysing trends in serious fires or fatal fires to make changes to the way we work or share information and reduce the likelihood of future fires.

The members of the Fire Safety Development subgroup have led to significant improvements to home fire safety across Gloucestershire in the past few years. The representatives provide expertise in Health and Social Care, Housing, Homelessness, Dementia, Care Providers and Policing. Their collaborative efforts to share information and resources to support people who may be at risk of serious injury from fire has seen an increase in the quality of referrals into Gloucestershire Fire and Rescue Service and a creative approach from all agencies to reducing risk. These Safeguarding improvements were recognised in the 2023 inspection of Gloucestershire Fire and Rescue Service.

Main Achievements:

Cost of Living Crisis

The work from 2022 to support people living in cold homes or concerned about the cost of cooking was extended into 2023, by providing electric blankets, slow cookers and heated throws. The items helped reduce fire risk by enabling people to stay warm safely. Cooking continues to be the ignition source for almost half of accidental dwelling fires nationally so enabling people to cook more safely helps reduce fire risk. This project was supported by Adult Social Care, local charities and social prescribers who distributed the items to people who needed them, and where consent was given, residents were offered a Safe and Well home fire safety visit.

Fire Fatalities

A formal role of the subgroup is to monitor any serious fire incidents resulting in injury or fatality and to consider whether there needs to be a Safeguarding Adult Review referral (SAR) or a learning event for the incident.

In 2023/24 there were three fire fatalities discussed. Although information sharing has improved across all agencies, there are still cases where people who are at risk of being injured in a serious fire are known to some agencies but not referred to the Fire Service. Communication will be a key area of work for the next year, to share information consistently, including the analysis of serious and fatal fires, and to continue to raise awareness of fire risk factors across all organisations.

Hoarding

Hoarding support groups have continued to grow, with several Adult Social Care Enablement Team social workers now trained to support people who hoard. The groups have now launched in Cheltenham and Gloucester and additional support is being provided to people who feel able to reduce their clutter. There is a clutter rating app and a clutter rating of 4 or above presents several risks; of having a fire, being unable to escape from the property safely and the fire load causing injury to firefighters in tackling the fire.

Awareness and Campaigns

The subgroup has shared campaigns and events throughout the year and all organisations invited a member of the Fire and Rescue Service to share risk information and advice with their teams at learning events or meetings. This has been pivotal in learning from recent Safeguarding Adult Reviews.

Key Actions for 2024/25:

The subgroup will continue to support the GSAB Strategic Plan and the following areas will be the main focus of our time and resources:

- To understand how fire risk can be mitigated for people with known risk factors.
- To embed fire safety work with the homeless nursing team
- To use the analysis of serious fire incidents, including those where injury was avoided, to prevent future incidents.
- To embed learning from SARs across all organisations.
- To ensure that the activity of the subgroup meets the objectives and actions of the GSAB Strategic Plan.

Case Study (Names and some of the details have been changed to protect confidentiality)

Willow is a 20 year old female who was in foster care for most of her childhood and has experienced abuse and trauma.

Willow had a diagnosis of Emotionally Unstable Personality Disorder, was open to Mental Health Services but did not engage. Willow struggles to engage with all professionals due to her experiences in childhood and has a deep mistrust for the police or any statutory organisation.

On leaving care Willow struggled to maintain a tenancy for a home and spent time street homeless and sofa surfing. Willow began associating with individuals who supplied her with drugs and alcohol. Her lifestyle became more chaotic and professionals believed her to be in an abusive relationship with a male who was known to the police and thought to be involved in human trafficking.

The safeguarding team received a referral from the police who believed that Willow was the victim of human trafficking and was being taken to different locations around the country by a sex trafficking gang. Willow had been observed to have physical injuries including strangulation marks to her neck.

Willow did not support a police investigation and it was thought this was due to her being scared of the repercussions this may have.

The safeguarding practitioner who was allocated to the case recognised that Willow had an appearance of care and support needs due to her being a care leaver and a mental health diagnosis. Willow was experiencing and at risk of domestic abuse from her partner and also physical and sexual abuse by unknown males and because of her needs was unable to protect herself. Therefore, the referral proceeded for further enquiry under section 42 of the Care Act 2014.

The practitioner identified the other agencies who were involved in trying to support Willow (housing, police, Gloucestershire Health and Care Trust, Gloucestershire Domestic Abuse Support Service, Young Gloucestershire and the 18-25 year old team) and contacted the named professionals to gather more information and background as Willow had not been known to Adult Social Care previously.

A safeguarding meeting was held to enable professionals to share information, discuss the risks and agree further actions. The practitioner considered inviting Willow to the meeting but decided that this may increase the risks to Willow. Her views and wishes were sought prior to the meeting and shared on her behalf.

Willow stated that she wanted to feel safe and get away from the gang but wanted to remain with her partner as he supplied her with drugs and money. Willow disclosed how she was groomed from a young age and then taken around the country to have sex with multiple males. Willow was scared of what would happen to her if she agreed to report the situation to the police as she had been physically harmed and threatened with a knife when she had previously tried to get away or refused to go with the individual.

The outcome of the meeting was professionals to continue working with Willow and focus on building a trusting relationship with her. A police flag was put on Willow's address and regular contact would be attempted by the social worker to check on Willow's welfare.

The safeguarding enquiry remained open as the risks to Willow were considered to still be high and ongoing. Further review meetings were held to share updates and consider any further actions.

Willow continued to have contact with the source of risk and the view of professionals was that Willow would be drawn to relationships that are abusive due to the trauma she experienced during childhood and the abuse she has experienced as an adult.

Outcomes

Willow advised her social worker that she no longer wanted to be involved with the source of risk and wished to get away from the gang. Willow was accommodated in a safe house and was assessed by adult social care. Willow was deemed to have no eligible care needs at the time but it was recognised that a referral to adult social care would be needed when the 18-25 team involvement would be ending.

GDASS – provided advice and safety planning to Willow. Willow demonstrated a good understanding of how to keep herself safe and appeared to be aware of the risks involved of having contact with the source of risk.

Housing – the locks were changed to the property, the front door was reinforced and CCTV was installed.

Police – a marker was placed on the address. Willow was given a panic alarm and a mobile phone with a button that when pressed went straight to the police.

The social worker remained involved and Willow received mental health support from Young Gloucestershire.

Conclusion

The safeguarding enquiry was closed although the risks to Willow remained but were reduced. The work undertaken on this case demonstrates effective multiagency working which was co-ordinated by the safeguarding practitioner.

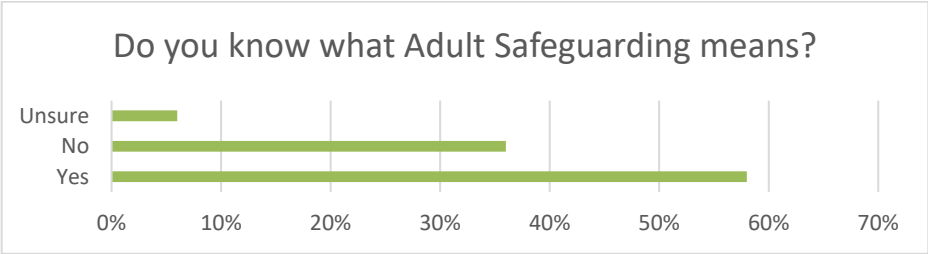
This case highlights the difficulty faced by professionals in supporting someone who has experienced trauma and abuse during childhood. Willow was vulnerable to exploitation due to her adverse childhood experiences and on leaving care lacked the ability to recognise unsafe relationships and did not have the skills to keep herself safe. Willow's view of professionals and the police was that they made situations worse for her, not better, which meant she had a deep mistrust of services and her engagement was sporadic or non-existent. This case highlights that despite a person having an understanding of risk and knowledge of how to keep safe, they may lack the ability or skills to put it into practice when faced with the situation.

It is important to recognise that an adult care leaver with childhood trauma makes them a vulnerable group of people in society. They have not experienced a stable, nurturing environment and therefore have low expectations in terms of their future relationships and experiences. It appears that abusive and exploitive relationships will play a part in their adult lives. There has been an improvement in how agencies and professionals recognise and respond to concerns regarding care leavers and it seems early intervention and support will be crucial going forward in preventing vulnerable care leavers from being targeted and exploited.

Communication & Engagement

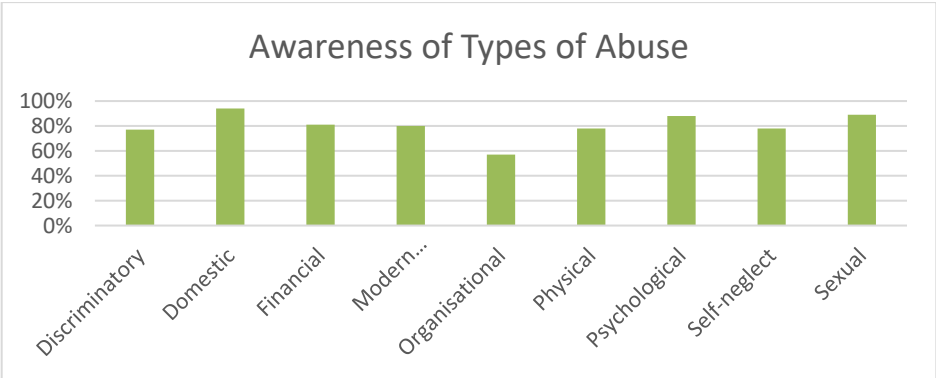
GSAB Roadshows 2024

The NHS Information Bus was used to engage with the public on the topic of Adult Safeguarding. The following locations were visited between April and July 2023, Tewkesbury, Gloucester, Cirencester, Cheltenham and Lydney. A questionnaire was produced to gain feedback and 226 were completed. Below are some of the answers to the questions:



The main reasons for not reporting suspected abuse were given as follows:

- Would not want to get involved
- Wouldn't know who to report it to
- Scared of the consequences (for the person reporting)



46% of those who were asked had heard of all the different types of abuse and 2% had heard of none of them. Domestic abuse was the most known type of abuse and Organisational the least known.

Safeguarding Training

Training figures (found in supporting documents) highlight the take up of GSAB training and e-learning by partners during the year. In summary, **17,935** Gloucestershire staff (and volunteers) undertook GSAB approved Adult Safeguarding and MCA courses.

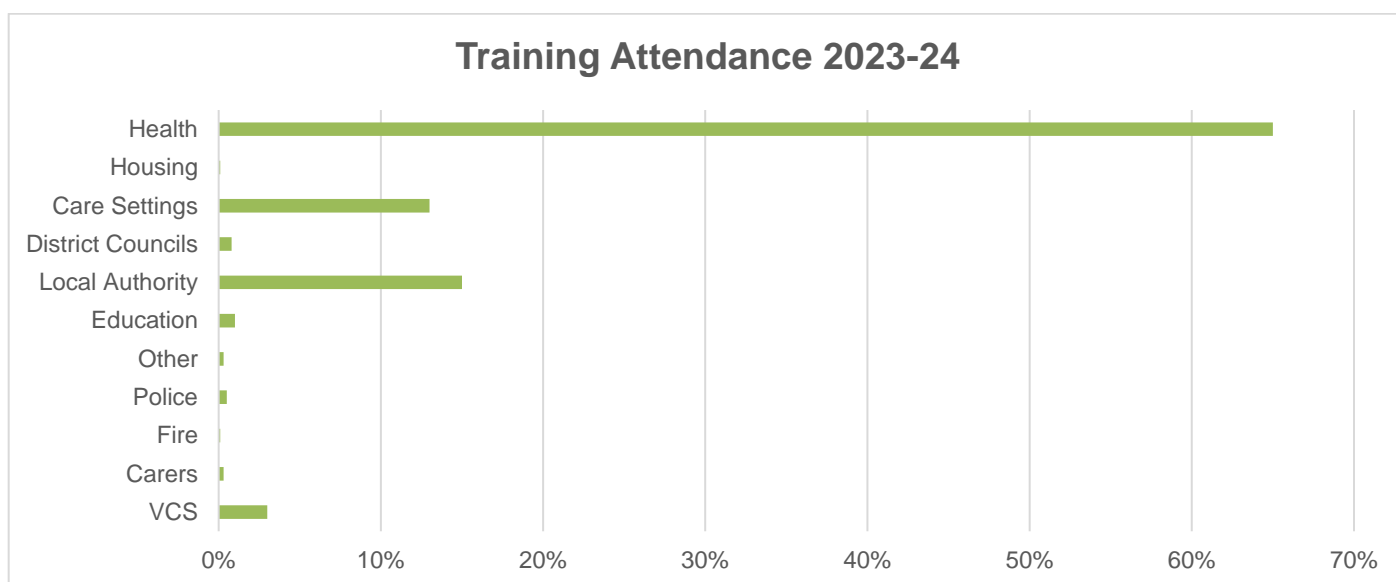
Also reflected in the training figures are the start of a successful refresher programme for Mental Capacity Act Level 3, Safeguarding Level 3, and Safeguarding Level 4. These courses are currently bespoke for GCC Adult Social Care staff, but it is likely that they will be rolled out for multi-agency managers from April 2024.

Safeguarding Training Levels

Level 1 - Is an E-Learning module that provides an introduction to Safeguarding Adults

Level 2 - For all frontline staff that have direct contact with adults with care and support needs

Level 3 - Recommended for those with organisational responsibility for reporting and responding to safeguarding concerns.



Train the Trainer

Two annual Adult Safeguarding Train the Trainer workshops for new level 2 trainers were held in 2023. This enabled 13 participants to complete the accreditation process and join the GSAB Approved Trainer Network. There are currently 46 active approved safeguarding trainers.

This year's annual CPD day took place in September. Presentations were given on a range of topics including GCC Safeguarding Adults in Gloucestershire, GFRS Risk Analysis for Gloucestershire, the Hoarding Forum, a Multi-Agency Approach to Fraud and the GCC Single Point of Access Team. The day provided an opportunity for GSAB trainers to share best practice trainer tips and receive an update on safeguarding adults within Gloucestershire. All participants rated the event highly.

The key areas of focus for Workforce Development in 2024/25 will be continuous improvement in learning and development and increasing awareness of Adult Safeguarding among professionals and the public in Gloucestershire.

2023/24 Training Figures can be found in [supporting documents](#).



Looking Ahead

We are entering an exciting and significant period of opportunity for the GSAB, since it was placed on a statutory footing on 1st April 2015.

We have commenced the final year of our latest 3-year Strategic Plan 2022-2025 and during this year we welcome the first Care Quality Commission Assessment of Gloucestershire Adult Social Care, that will include safeguarding.

Also, during this coming year, significant growth within the Gloucestershire County Council Safeguarding Team will enable the commencement of a sustainable audit process by which we can capture the first-hand accounts from individuals who have been safeguarded, to better understand what difference we have made in keeping them safe and to meet their individual needs. This will also help us understand where we can make changes that lead to improved outcomes for individuals in the future.

At the same time the Board is seeking some growth that will enable the establishment of a new post, which will have a key role to play in establishing a Performance and Quality Assurance regime that is fit for purpose and supports the drive towards better outcomes for adults who are at risk of abuse and neglect.

To help us, by August 2024, we will also have a years' worth of rich data available to us from the Single Point of Access (SPA) for professionals, that currently captures some 90% of all concerns raised by professionals.

This all provides us with a unique opportunity to take stock and consider our future priorities and the direction that the Board and its partners seek to take.

Financial Summary

Funding Contributions

The Board is pleased to confirm that Gloucestershire Constabulary and NHS Gloucestershire ICB (on behalf of Gloucestershire Health and Care NHSFT and Gloucestershire Hospitals NHSFT) have agreed to continue their financial contribution to the Gloucestershire Safeguarding Adults Board.

CORE BUDGET INCOME AND EXPENDITURE 2023-24

Partner Contributions	Amount
NHS Gloucestershire ICB	38,877
Gloucestershire Constabulary	20,440

GSAB Business and Activity Costs	Expenditure 2023/24
Independent Chair	20,000
Other Staffing (Includes 100% GSAB Business Manager and 100% Administrator)	98,929
Workforce Development	30,000
Safeguarding Adult Reviews (SARs)	10,000
Comms and Publicity	1,078
Total	160,007

These contributions help with the costs associated with the running of the Board, including its Independent Chair, the Gloucestershire County Council Head of Safeguarding Adults post, costs in conducting Safeguarding Adults Reviews, Communication & Publicity and delivering on the Board's Workforce Development and Training Pathway.

Other partners have contributed with their time and commitment to the Board's work.

All documents and supporting reports referred to in this annual report can also be found on the GSAB website, [supporting documentation](#).

Special thanks are reserved for all agencies who have contributed to this report and the achievements of the Gloucestershire Safeguarding Adults Board over the last year.



Appendix One

What is abuse and neglect?

Abuse and neglect can happen to anyone, whatever their circumstances and can be carried out by anyone. This could be family, friends, neighbours, paid staff, carers, or volunteers. It could also be strangers.

Types of Abuse	Behaviours Include
Physical	Hitting, slapping, pushing, kicking, misuse of medication, restraint, or inappropriate sanctions.
Sexual	Rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.
Psychological	Emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.
Financial or Material	Theft, fraud, exploitation, pressure in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions, or benefits.
Neglect and Acts of Omission	Ignoring medical or physical care needs, failing to provide access to appropriate health, social care, welfare benefits or educational services, withholding the necessities of life such as medication, adequate nutrition and heating.

Types of Abuse	Behaviours Include
Discriminatory	Racism, sexism, or acts based on an adult's disability, age or sexual orientation or other protected characteristics. It also includes other forms of harassment, slurs, or similar treatment such as disability hate crime.
Domestic Abuse	Psychological, physical, sexual, financial, emotional abuse and so called 'honour' based violence by those who are or have been intimate partners or family members.
Organisational Abuse	Neglect and poor care practice within a care setting such as a hospital or care home or in relation to care provided in someone's own home ranging from one off incidents to on-going ill-treatment. It can be neglect or poor practice as a result of the structure, policies, processes, or practices.
Modern Slavery	Encompassing slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive, and force individuals into a life of abuse, servitude, and inhumane treatment.
Self-Neglect	Covers a wide range of behaviour including neglecting to care for one's personal hygiene, health or surroundings and behaviour such as hoarding.

Appendix Two

GSAB Membership:

Cabinet Member for Adult Social Care
Care Quality Commission (CQC)
Cheltenham Borough Homes
Department of Work and Pensions (DWP)
District Councils
Gloucester City Homes
Gloucestershire Action for Refugees and Asylum Seekers (GARAS)
Gloucestershire Care Providers Association (GCPA)
Gloucestershire Carers Hub
Gloucestershire County Council
Gloucestershire Diocese
Gloucestershire Fire and Rescue Service (GFRS)
Gloucestershire Health and Care NHS Foundation Trust (GHC)
Gloucestershire Hospitals NHS Foundation Trust (GHT)
Healthwatch
Inclusion Gloucestershire
Kingfisher Treasure Seekers
NHS England
NHS Gloucestershire (Integrated Care Board)
POhWER Advocacy Service
Police
Probation Service
South West Ambulance Service Trust (SWAST)
Trading Standards
VCS Alliance
Young Gloucestershire

Support to the GSAB:
GSAB Business Manager