



East Sussex Safeguarding Adults Board

Annual Report

2022 to 2023

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Foreword by the East Sussex Safeguarding Adults Board Interim Independent Chair

I am delighted to have joined the East Sussex Safeguarding Adults Board as interim Chair from June 2023.

I have been struck immediately with passion and commitment of everyone involved, and the drive of the Board members to make a real difference for the residents and those in contact with services, as they remain at the heart of all our work. I feel it's a privilege and am proud to be leading this Board for the next six months. All Board members have impressed me with an eagerness to continue to learn about what works well, and to discuss and develop what we can mutually, and build on this together.

Already, I am aware of the level of work the Safeguarding Adults Review (SAR) subgroup coordinate on behalf of the board; the outcomes from our Performance and Quality and Assurance Group and the safeguarding policies and procedures development being led by our joint Policy and Procedures Review subgroup.

Our work is set out in the [Strategic Plan 2021 - 2024](#), which has already been added to in the past year, by introducing a quality assurance framework for our SARs, jointly working with the Boards of West Sussex and Brighton and Hove, to improve the lives of vulnerable people and guests in this country, with accommodation and resettling issues; developing our policies and procedures to ensure independence in our review processes; and working to learn from our partners, how improvement is actually embedded into our safeguarding practices.

I hope that as you go through this Report, you learn more about the sheer scope and importance of our activity for the people in our County. I think you will find, it is readable, comprehensive, and thorough, clearly reflecting the huge amount of work that takes place every day, by many people across our County, who safeguard others, who have care and support needs.

I look forward to the months ahead, to continuing to take our Board forward, and to supporting our membership in the challenges they face us, whilst enabling others to live lives, free from abuse and neglect.

Seona Douglas

Independent Chair, East Sussex Safeguarding Adults Board



Our role and purpose

The East Sussex Safeguarding Adults Board (SAB) is a multi-agency statutory partnership which provides leadership and strategic oversight of adult safeguarding work across East Sussex.

The work of the SAB is underpinned by the Care Act 2014, which sets out that we are required to:

- Develop and publish a Strategic Plan setting out how we will meet our objectives and how our partner agencies will contribute to these objectives.
- Arrange for Safeguarding Adults Reviews (SARs) to be undertaken when the criteria under section 44 of the Care Act are considered to have been met.
- Publish an annual report detailing how effective our work has been over the past 12 months.

The East Sussex SAB is led by our Independent Chair, and supported by a SAB Development Manager, a Board Support Coordinator and a part-time Administrator.

The Board meets at least four times a year and is supported by a range of subgroups which are crucial in ensuring that the priorities set out in the Strategic Plan are delivered. These subgroups ensure that the work of the Board really makes a difference to local safeguarding practice, and to the outcomes adults and their carers wish to achieve.

Our Vision

Our vision is for all agencies to work together and effectively build resilience and empower communities in responding to abuse, neglect, and exploitation, and to widely promote the message that safeguarding is everybody's business in that:

- **Abuse is not tolerated**
- **People know what to do if abuse happens**
- **People and organisations are proactive in working together to respond effectively to abuse**

Our Purpose

It is important to note that the SAB is not involved in operational practice. Our overarching purpose is to ensure that agencies work in partnership to deliver joined-up services that safeguard adults with care and support needs from abuse, neglect, and exploitation. We do this by:

- Gaining assurance that local safeguarding arrangements are in place as defined by the Care Act and its statutory guidance.
- Working collaboratively to prevent abuse and neglect, where possible.
- Ensuring partner agencies are effective when abuse and neglect has occurred and give timely and proportionate responses.
- Gaining assurance that the principles of Making Safeguarding Personal (MSP) are central to safeguarding, and practice is person-centred, and outcome focused.
- Striving for continuous improvement in safeguarding practice and supporting partner agencies to embed learning from local and national SARs, other learning reviews and multi-agency audits.

Partnership Working

The SAB has formal links with a number of other strategic partnerships in East Sussex, including the East Sussex Safeguarding Children Partnership (ESSCP), Safer Communities Partnership (SCP), Children and Young People's Trust (CYPT) and the Health and Wellbeing Board. In addition, the Board maintains links with Sussex-wide and national networks and forums including:

- The National Network for Chairs of SABs.
- The National SAB Managers Network.
- The South-East Regional SAB Network.
- The Sussex Anti-Slavery Network.

The Board works closely with the neighbouring Brighton & Hove and West Sussex SABs, and our Safeguarding Policy and Procedures are adopted on a Sussex wide basis, as well as many protocols and guidance documents.

Our Strategic Priorities 2021-2024

- Accountability and Leadership
- Performance, Quality and Audit and Organisational learning
- Prevention, Engagement and Making Safeguarding Personal
- Safeguarding Policies and Procedures
- Integration, Training and Workforce Development

The Strategic Plan 2021-24 has two main purposes:

- To specify the actions required by the SAB and its member agencies to implement the strategy.
- To inform the local community and all interested parties about the work programme of the SAB

SAB Budget

Adult Social Care and Health (ASCH), NHS Sussex Integrated Care Board(ICB), Sussex Police, East Sussex Healthcare Trust (ESHT) and East Sussex Fire and Rescue (ESFRS) contribute annually to the SAB budget. SAB Partners support with the running of the Board, for example by offering to chair meetings and co-delivering training.

Income for 2022 – 2023

Partner Contributions	£126,400
Carry over from 21/22	£20,022
West Sussex and Brighton and Hove SABs	
(*contributions towards P & P site, staff, and SAR)	£22,053*
Total	£168,475

Expenditure for 2022 – 2023

SAB Staffing: £110,310

Independent Chair: £19,251

Safeguarding Adult Reviews: £26,625

Website (SAB & Procedures) costs: £4,295

Total £160,481

Key Achievements 2022 – 23

Strategic Priority 1: Accountability and Leadership

The SAB Operational subgroup has been chaired by the Principal Social Worker for the past 12 months and the role of chair has been passed to the recently appointed Head of Safeguarding and Quality for Adult Social Care and Health (ASCH).

Recommendations from the Thematic Safeguarding Adult Review¹ (SAR) and SAR Charlie² (both published in 2022/23) required assurances that transitional safeguarding processes are meeting the needs of people who have had adverse childhood experiences but may be struggling to engage with services, are met after they reach the age of 18 years old.

- A transitions task and finish group was established in January 2023 by the SAB and East Sussex Children’s Safeguarding Partnership (ESSCP) and is chaired by the Head of Safeguarding for the Sussex NHS Integrated Care Board. A scoping activity has been undertaken to identify current pathways for children who reach eighteen in East Sussex. This will identify any potential gaps and map the current provision for adolescents and what further work needs to be developed across agencies in East Sussex. The work of the task and finish group will continue this year with the aim of developing an identified multi-agency transition protocol for East Sussex.
- To ensure effective governance is in place in order that all Board members understand their roles and responsibilities under the Care Act 2014 the SAB members pack was updated in January 2023 to reflect new deputising arrangements and information sharing/data protection information.

¹ <https://www.eastsussexsab.org.uk/wp-content/uploads/2022/11/ESSAB-Thematic-Review.pdf>

² <https://www.eastsussexsab.org.uk/documents/executive-summary/>

- A new SAB Complaints Policy³ was developed for any complaints made to the East Sussex Safeguarding Adults Board and how these would be managed.
- A SAB strategic objective for accountability and leadership is to develop arrangements with other Boards to be responsive to specific safeguarding themes:

Learning from Partnership Reviews was a local partnership collaboration to compare current action plans/emerging themes and current learning around Domestic Homicide Reviews (DHRs) Drug and Alcohol Related Deaths (DARDs) Local Children’s Safeguarding Practice Reviews (LCSPRs) and SARs This was presented to the Safer Communities Board in September and as part of the NHS Sussex Safeguarding Fortnight with SAB partners in November 2022.

Agreed outcomes following this collaboration included:

- Bi-monthly meetings for review managers, which includes sharing review recommendations to contribute to ‘smarter’ action planning to avoid duplication and support a more systematic approach.
- Regular learning briefings developed to themes across reviews and shared briefings to be developed where appropriate.

Annual presentation to the Safer Communities Board on key learning from reviews.

Strategic Priority 2: Safeguarding Policies and Procedures

There are a number of similar themes identified in Safeguarding Adult Reviews that are undertaken across Sussex. The three Sussex Safeguarding Adult Boards worked together to produce a [12-minute podcast](#) which identified four shared themes identified in reviews undertaken across Sussex and some of the actions that have been undertaken in response.

These four themes are Mental Capacity, Making Safeguarding Personal, Application of Safeguarding processes, and Multi-agency information sharing and communication.

To raise awareness of safeguarding policies and procedures relating to specific local themes and challenges the SAB have produced a number of learning briefings, revised documents, and resources this year. They include⁴:

- Reviewing and refreshing the ***Sussex Adult Death Protocol***

³ <https://www.eastsussexsab.org.uk/documents/east-sussex-safeguarding-adults-board-complaints-policy/>

⁴ All these documents are available on our website [Guidance and Resources - East Sussex SAB](#)

- Reviewing and updating the **Sussex Safeguarding Adults Thresholds Guidance** (this has been adopted by Rotherham SAB)
- Publishing a **Court of Protection Learning Briefing**
- Including a new **Advocacy Information** section on the SAB website
- Publishing **The importance of multi-agency meetings Learning Briefing**
- Including the **Mental Capacity Toolkit** on the SAB website
- Updating the **Information Sharing Protocol**
- Developing and publishing *Recognising and Responding to Child Protection and Adult Safeguarding Concerns : Safeguarding Guidance for Homes for Ukraine Host Families in East Sussex.*

The Sussex Policies and Procedures Review Group has responsibility for the Sussex Safeguarding Adult Policy and Procedures⁵ (which are held by the three local authorities as the statutory leads for adult safeguarding) and the development and implementation of changes to these.

[The Policy and Procedures site](#) was refreshed in 2022 with the aim of providing a more accessible version. The following is a breakdown of the number of people who accessed the policy and procedures site from April 2022 – March 2023 and the safeguarding information that was accessed:

- 7627 people visited recognising and reporting abuse and neglect section.
- 2640 people visited safeguarding and criminal investigations section.
- 2486 people visited safeguarding and managing allegations against PIPOT section.
- 2376 people visited safeguarding and domestic abuse section.
- 1951 people visited supporting adults who self-neglect section.
- 1698 people visited receiving concerns and undertaking enquiries section.
- 1018 people visited adult safeguarding and sharing information section.
- 896 people visited safeguarding adults policy section.

⁵ <https://sussexsafeguardingadults.procedures.org.uk/>

Strategic Priority 3: Performance, Quality and Audit, and Organisational Learning

A SAB strategic objective of performance, quality and audit and organisational learning is to ensure the SAB has effective arrangements for the commissioning of SARs to ensure our reviews are precise in form and focus and take into account a range of case and contextual factors so as to shape learning and continuous improvement.

- **To support this objective, we developed a SAR Quality Assurance Code of Practice in 2022. This quality assurance process is aligned with the Social Care Institute of Excellence (SCIE) considerations, which assumes the principles of Making Safeguarding Personal, as well as the Six Principles of Safeguarding that should underpin all adult safeguarding work (Empowerment; Prevention; Proportionate; Protection; Partnership; Accountability).**

The SAB recognises that SARs are a statutory process with the purpose of organisational learning and improvement. This approach to the quality assurance of SARs supports and reinforces the focus on actions to promote learning and agency practice improvement. To ensure the SAB has robust multi-agency safeguarding data to shape learning, awareness, and practice audits are often identified as recommendations within SARs to ensure this is taking place.

The Adult C Safeguarding Adult Review (SAR) published in December 2020 set out important learning in relation to the barriers and challenges faced by women with a combination of needs in relation to chronic trauma, drug and alcohol abuse, homelessness, and domestic abuse .

- **An audit was subsequently undertaken to establish the extent to which a multi-agency approach is effective in supporting women with multiple disadvantage who experience domestic abuse, in managing risk and enabling them to achieve sustained positive outcomes.**

The overall strengths and examples of good practice from the audit are listed below:

- **The Probation service showed a recognition of gaining the adult's voice and wishes and including these in planning with clear recordings showing the opportunities taken to gain the information around the adult's previous trauma and how this may be impacting on her presentation and behaviour at the time.**
- **There were examples of Adult Social Care (ASC) practitioners using funding to support more appropriate temporary housing to prevent risk escalating and providing support to access refuges and the transportation of belongings.**

- **Sussex Partnership Foundation Trust (SPFT) provided support to accident and emergency services by providing a triage assessment which provided a good overview of the adult's current mental state.**
- **East Sussex Healthcare Trust (ESHT) staff in the emergency apartment raised a safeguarding concern for domestic abuse to reduce the risk escalating.**
- **Multi-Agency Risk Assessment Conference (MARAC) recordings were clear showing planning to manage risk and safety. A particular good example of consideration of previous trauma was considered included the specific assignment to avoid using male workers with an adult.**
- **ASC practitioners evidenced good examples of multi-agency meetings which provided good joint planning between agencies and proactive approaches were taken to meet with the adult face to face gaining their views which were included in accommodation plans.**

Strategic Priority 4: Prevention, Engagement and Making Safeguarding Personal

The SAB continue to develop approaches to safeguarding which recognise the value of prevention and early intervention.

Through the SAB Safeguarding Community Network, focussed discussions were introduced in 2022/23 on particular safeguarding themes that community groups wished to be more aware of and which would improve their confidence in recognising and responding to concerns. We are grateful to the Safeguarding Development Team and the East Sussex Domestic Abuse ,Sexual Violence/ Abuse & Violence Against Women and Girls (VAWG) Team who supported these sessions.

Topics covered this year which have been requested by the Network have included:

- **Coercion and Control**

The session included the background and definition of controlling and coercive behaviour, examples and signs of controlling and coercive behaviour and lived experience of domestic abuse. The audience was shown a short film and asked to identify the elements of coercive control they noticed, what warning signs they noticed and the challenges which may be facing the victim

- **Modern Slavery**

This session outlined the context and prevalence of Modern Slavery including Human Trafficking. It explored the different types of Modern Slavery, signs, and indicators of the various types of exploitation and referrals into Adult Social Care.

- **Reporting a Safeguarding Concern**

This session provided an overview of the Care Act S42 safeguarding duty, an overview of the SAB Thresholds Guidance⁶ and how to raise a safeguarding concern.

Homes for Ukraine

- *Recognising and Responding to Child Protection and Adult Safeguarding Concerns – Guidance for Host Families in East Sussex* was developed in collaboration with the East Sussex Safeguarding Children’s Partnership (ESSCP) to help host families understand what action to take if they were worried about an adult or child staying in their home.

In collaboration with West Sussex and Brighton SABs we produced new information for our communities which is easily accessible, raises awareness of adult safeguarding and increases confidence in raising concerns, which ensures our communication and engagement strategies consider the diversity of local communities and reflect changing demographics.

- The East Sussex SAB website⁷ received 12,217 visits between March 2022 and April 2023 with 86.4% of these being new visitors.

The most popular page visited within the website was ‘Safeguarding Adult Reviews’ receiving 3043 views followed by 2270 visits to the ‘raising a concern page’ and 1,684 visits to the ‘guidance and resources’ section.

The average time a user spent on a page within the ESSAB website was 01:47 minutes and a total of 8,340 documents were downloaded from the website.

- New content has been added onto the website including information on Advocacy and a page to sign up to SAB learning Events.
- During Safeguarding Adults Week 2022 the SAB promoted a number of SAB and national resources which linked to the themes of *Exploitation and County Lines, Self-neglect, Creating Safer Organisational Cultures, Elder Abuse and Domestic Abuse in Tech-Society*. The tweet which received the most engagement was the launch of the [Pan-Sussex SAR Learning from SARs Podcast](#).

⁶ <https://www.eastsussexsab.org.uk/wp-content/uploads/2022/02/Sussex-Safeguarding-Adults-Thresholds-Guidance-Print-Version.pdf>

⁷ <https://www.eastsussexsab.org.uk/>

Strategic Priority 5: Integration, Training and Workforce Development

The SAB training and workforce development subgroup supports the strategic objective of ensuring the workforce is equipped to support adults effectively where abuse and neglect takes place.

Two learning events were delivered in March which 82 professionals attended. The event focused on SAR Anna⁸ which identified areas of learning which were the focus of the event:

- The importance of Multi-Agency Meetings
- The impact of coercion and control on capacity assessments
- How legal interventions can be used to better protect vulnerable adults
- The relevance and importance of working closely with the whole family
- Dealing with hostility and aggression shown by family members
- Knowing when to consider using the Adult Death Protocol

84% of attendees confirmed they had received information, training or learning briefings about East Sussex SARs.

At the end of the session 81% of attendees reported their knowledge of SARs had improved compared to 41% at the start of the session.

88% of attendees reported that the workshop had provided them with further knowledge and understanding to enhance their practice.

90% of attendees who had received SAR information, training or learning briefings reported that this had impacted on their operational practice and knowledge in a good way.

⁸ <https://www.eastsussexsab.org.uk/wp-content/uploads/2022/05/SAR-Anna-Overview-Report.pdf>

Supporting the work of partners raising awareness of Modern Slavery and Human Trafficking the SAB supported in the delivery of awareness raising events for community volunteers and community development staff who were supporting the Homes for Ukraine scheme and local refugee/asylum seeker support services.

- A [Modern Slavery Podcast](#) was developed in collaboration with Discovery – the East Sussex multi-agency partnership which aims to expose and tackle Modern Slavery and Human Trafficking.
- A Multi-agency domestic abuse training pathway was developed and made available in April 2022. The pathway consists of 19 training courses available to a wide range of audiences including SAB members and frontline staff.

The current East Sussex SAB training programme includes the following courses:

- Self-neglect
- Modern Slavery and Human Trafficking
- Mental Capacity Act 2005: A Multi-agency Approach to Complex Cases
- Adopting a Whole Family Approach to Domestic Abuse
- Coercion and Control

Safeguarding Adults Reviews (SARs)

The SAR Subgroup acts with delegated responsibility from the East Sussex SAB. Its' main purpose is to monitor the delivery of its statutory duties with regards to SARs and other reviews of cases where there are lessons to be learnt.

The purpose of a SAR is set out in the Sussex SAR Protocol, namely, to look at the ways professionals and agencies work together to determine what might have been done differently that could have prevented harm or death. It is not an enquiry into how a person died, nor is it to apportion blame; but to learn from such situations, and to ensure that any learning is applied to future cases to reduce the likelihood of similar harm occurring again.

SABs have a statutory duty under the Care Act 2014 to undertake Safeguarding Adults Reviews (SARs). This is when:

- An adult dies as a result of abuse or neglect (including death by suicide), whether known or suspected, and there is concern that partner agencies could have worked more effectively to protect the adult.
- An adult is still alive but has experienced serious abuse or neglect, and there is concern that partner agencies could have worked more effectively to protect the adult.

SABs can undertake reviews in any other circumstance where an adult has care and support needs.

The SAR Protocol was reviewed in 2022/23 and refreshed to include:

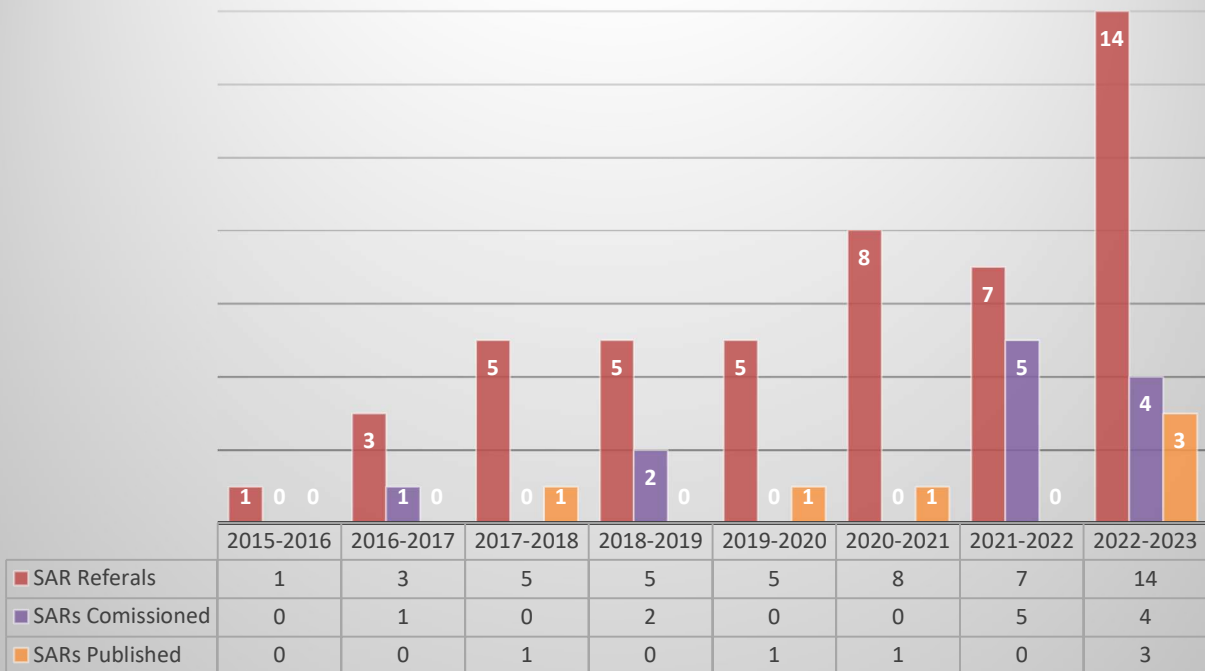
- The criterion for a SAR is now aligned to the Care Act 2014 wording which now states that the death was as a result of abuse and neglect and not that abuse, and neglect was a factor in their death
- Arrangements for endorsing a SAR when an Independent Chair is not in post.
- Improvements made to what information the referee provides which support the SAR criteria

SAR activity during 2022/23 has increased.

- SAR referrals have increased by 100%
- Commissioned SARs have slightly decreased however a number of referrals received in 2022/23 have progressed as SARs in 2023.
- Three reviews have been published.⁹

⁹ <https://www.eastsussexsab.org.uk/publications/sars/>

SAR Activity by financial year



The table above shows East Sussex SAR activity since 2015 as follows:

2015 - 2016: one SAR referral.

2016 - 2017: three SAR referrals, one SAR commissioned.

2017 - 2018: five SAR referrals, one SAR published.

2018 - 2019: five SAR referrals, two SARs commissioned.

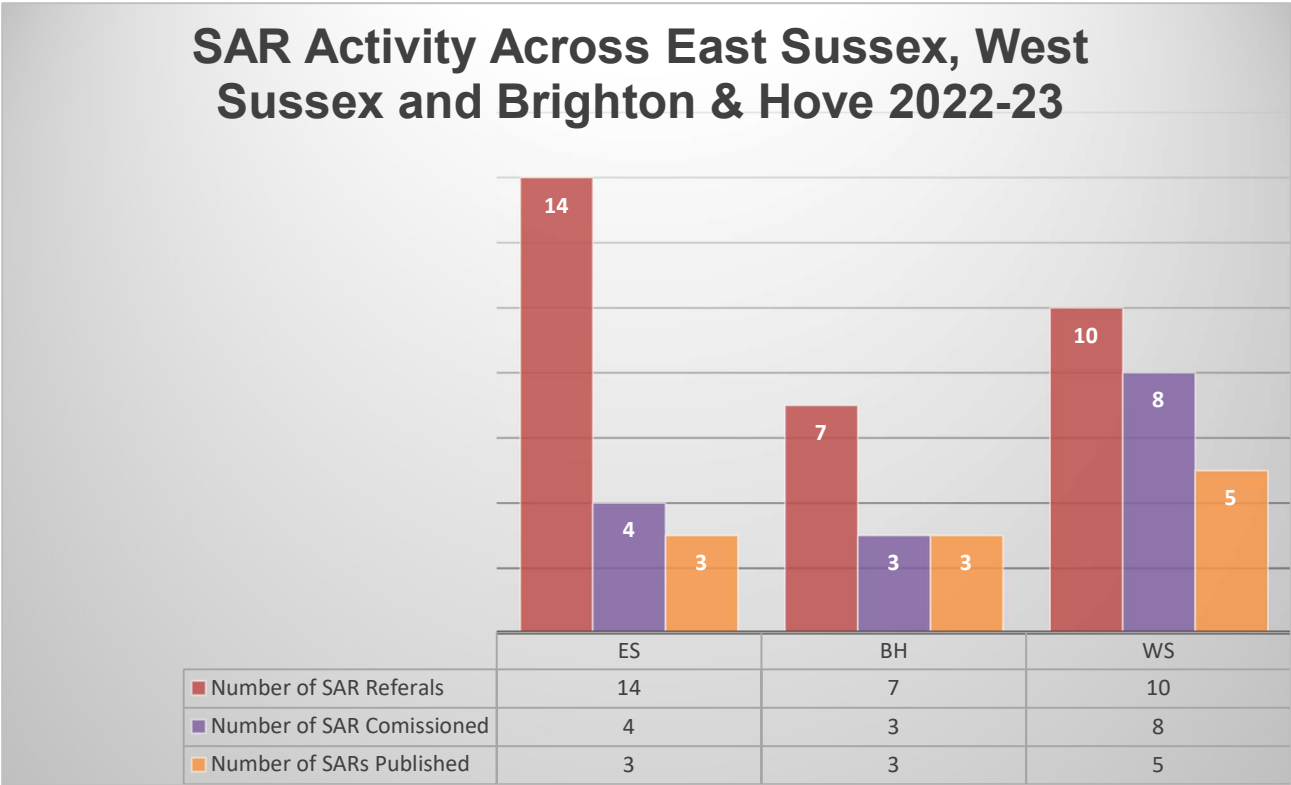
2019 - 2020: five SAR referrals, one SAR being published.

2020 - 2021: eight SAR referrals, one SAR being published.

2021 - 2022: seven SAR referrals, five SARs commissioned.

2022 - 2023: fourteen SAR referrals, four SARs commissioned and three SARs published.

The table below shows SAR activity across Sussex during 2022/23



East Sussex 2022-2023: fourteen SAR referrals, four SARs commissioned and three SARs published.

Brighton & Hove 2022-2023: seven SAR referrals, three SARs commissioned and three SARs published.

West Sussex 2022-2023: ten SAR referrals, eight SARs commissioned and five SARs published.

Published Safeguarding Adult Reviews 2022/23

- A total of 24 recommendations from three published reviews were developed into one SAR Action Plan in 2022/23 and the recommendations have been developed in partnership with several partner agencies over the last 10 months. A number of actions and assurances have been recorded against 22 recommendations.
- The two remaining recommendations are being progressed and will be included within the SAR Action Plan for 2023/24. Completed actions have included:

SAR Anna – published May 2022

‘Coercion and Control: A Multi Agency Workshop for Staff Working with Domestic Abuse’ training has been amended to reflect particularly when applied to older people

SAR Anna presentation delivered to occupational therapy teams, Mental Health Substance Misuse Service Teams, Neighbourhood Support Teams, and Older Peoples Mental Health Teams.

Domestic Abuse in Older Age presentation and learning– delivered as a MARAC Continued Professional Development (CPD) session and various partner agencies with 80+ attendees and is being amended for roll out to ASCH Operational teams.

East Sussex Healthcare Trust (ESHT) staff are referred to Nice guidance to evaluate bruising in vulnerable adults.

SAB Learning Events for SAR Anna delivered in March 2023.

The Safeguarding adult’s competency framework for Directly Provided Services (DPS) and operational support staff (including financial services) has been developed to ensure that staff are meeting the expectations of The Care Act 2014, in relation to safeguarding. Staff complete the competency framework as part of an annual review or appraisal which includes an understanding of the factors that might increase risk of abuse and vulnerability.

SAR Ben – published September 2022

Joint podcast with WSSAB and BHSAB on Learning from SARs which included the mandate for reviews. SAR referrals have doubled in 2022/23 and all have been timely in relation to referral timings.

ESCC Specification for reviews which applies to both in and out of county placements now includes the opportunity for the provider to request a review:

Reviewing Mental Capacity Act Training and how Advocacy is promoted within the current training offer provided assurance that 10 courses include the promotion and use of advocacy.

The Safeguarding Development Team Manager presented an overview and learning from SAR Ben to the Registered Managers Meeting in October. This overview included duties and responsibilities around the appropriate use of DOLs.

Assurance provided that there is free comprehensive training available to all care homes in East Sussex (300) which currently includes: Safeguarding awareness, Mental Capacity and Deprivation of Liberty Safeguards.

ESSAB in partnership with Sussex NHS ICB developed and published A Court of Protection Learning Briefing in September 2022

Thematic Review: -published November 2022

Public Health updated SAB partners on the three-year Sussex Suicide and Self-Harm Prevention Strategy in January 2023.

SAB Self-Harm and Suicide Mini-Briefing was developed for partners to promote the Royal College of Psychiatrist's report including the importance of Suicide Safety Plans and the Consensus Statement which identified obtaining information from and listening to the concerns of families as key factors in determining risk.

Updates and assurance from SPFT in relation to their Towards Zero Suicide Strategy was provided to SAB Partners in January. The strategy identifies a broad range of actions to improve the responses of its services to suicide risk. They are working closely with Local Authority colleagues in Public Health, Police, and other members of the Integrated Care System on a Pan Sussex Suicide Prevention Strategy.

Supporting the use of outreach and flexible approaches to meet the needs of individuals over the age of 18 years old who find it hard to engage with services and who services consider have multiple-complex needs and/ or have had experienced adverse childhood experiences SAB partners are actively involved in the Sussex, Changing Futures Programme stakeholders and partners monthly meetings and the Changing Futures Pan Sussex Trauma Informed network.

Safeguarding Adult Reviews commissioned in 2022/23

Eve was a 76yr old female who died in temporary accommodation, which an inquest determined was a drug related death. She had terminal cancer for which she was on pain medication. Eve was estranged from her family and lived with her partner.

Eve was offered support by various agencies for her medical issues and to help safeguard her, however she found difficulty in accepting the support offered and may have been controlled and/or coerced to not engage with agencies by her partner.

Due to the coercion and control evidenced this review is currently a joint Domestic Homicide Review (DHR) and is currently on pause.

Focus for the review – inherent jurisdiction, financial abuse, domestic abuse with a cancer diagnosis, adult death protocol and suitability of carer.

Hannah was 48-year-old women who died in 2022 as a result of a severe injury to her temple she sustained after a fall while she was intoxicated. Prior to her death Hannah had severe alcohol misuse issues and had previously attended rehabilitation in the States and in the UK.

Hannah lived with her husband and young sons, although she lived a very separate life away from her family in the family home. The children were being supported by children's services at the time of her death. A number of health agencies were involved

due to regular hospital admissions in relation to alcohol issues and the significant this was having on her body.

Focus for the review- self-neglect and the harm caused by alcohol, multi-agency approaches to managing risk, the consideration of carers and making safeguarding personal.

Gwen and Ian- were not known to each other but both cases had strong similarities and have been combined as one review.

Gwen was a 95-year-old woman who died in 2021. She was living with her daughter and had not seen her GP or Community Nurse since 2018. A neighbour contacted Adult Social care to report concerns about how Gwen and her daughter were managing. She was on regular medication, but her prescriptions had not been collected since early 2021. Gwen was admitted to hospital with significant physical concerns and died shortly afterwards in Kent.

Ian was a 67-year-old man who was living with his son. He was made redundant in 2021 and also had limited agency involvement. Concerns raised about self-neglect and he was admitted to hospital on West Sussex in 2022 and died in hospital due to multiple organ failure and Alzheimer's dementia.

Focus for the review- challenges when there is non-engagement or disengagement by vulnerable adults from minimal services, needs of adults who are informal carers and response to safeguarding concerns, when raised by a member of public, family member or agency.

Finley was a 31-year-old male who died in 2021 due to drug toxicity. He experienced both mental health and substance misuse issues. There were concerns prior to his death of cuckooing. Finley was in debt despite being supported by his mother who had Power of Attorney for finance. There were also reports of self-neglect.

Finley had recently been discharged from an inpatient ward for mental health support and there were concerns that he was unable to care for himself properly due to difficulty in accepting support from services.

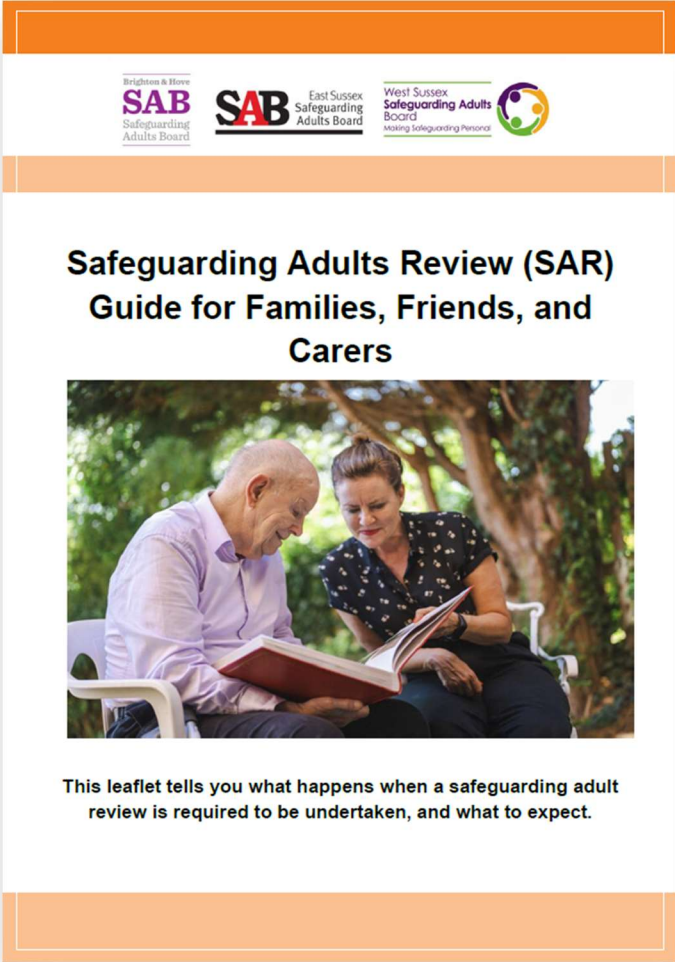
Focus for the review – impact of substance misuse, professionals understanding of lasting power of attorney, involving family carers in care planning arrangements, how agencies recognise and respond to self-neglect and how potential indicators of cuckooing are assessed.

Family involvement in Safeguarding Adult Reviews

Family, carers and friends' contributions and their involvement in reviews is a significant factor in ensuring the person, subject of the review, is known and understood – this additional information can help provide a deeper understanding of their personality and life experiences. Importantly it reminds us that a review focuses on a period of time in someone's life and does not reflect their entire life.

The SAB have been grateful this past year to have had contributions from family members involved in a number of reviews namely: Donna, Charlie, Finley, Hannah, Gwen, and Ian.

“If one person, one family doesn't have to go through this from lessons learnt , changes made, then my battle for my son has not been in vain.” Sue (SAR Finley)



**Safeguarding Adults Review (SAR)
Guide for Families, Friends, and
Carers**

This leaflet tells you what happens when a safeguarding adult review is required to be undertaken, and what to expect.

The Safeguarding Adults Review (SAR) Guide for Families, Friends, and Carers was updated last year to acknowledge the significant distress that many families experience having to ‘relive’ the aspects of their loved one’s death.

Details on Cruse Bereavement has been included, the benefits which their contributions bring to the review and how we will work to support them as much as possible if they decide to contribute.

Priorities 2023 – 24

In April 2021, the East Sussex SAB published its Strategic Plan for 2021 – 24¹⁰. The key priority areas identified for the SAB in 2022 – 23 continue to be priority areas of development and require further embedding within safeguarding practice for 2023/24 and are listed below. Additional areas of self-neglect, homelessness and safeguarding the increasing migrant population will be featured in and alongside these priorities.

- Embedding the Mental Capacity Act in practice.
- Safeguarding transitions for young people at risk.
- Supporting adults who face multiple disadvantage.

Specific objectives for 2023/2024 include:

- Undertaking the bi-annual safeguarding assurance activity across the partnership.
- Develop and hold ESSAB Learning Events with the purpose of promoting learning and best practice from published SARs.
- Collaborating with West Sussex and Brighton and Hove SABs on a West Sussex commissioned SAR to consider the complexity of the self-neglect process within Sussex and considering practical change in relation to support for cases who self-neglect.
- A review of the Multi-Agency Risk Management Protocol (MARM)¹¹ process. The review will consider the themes from referrals, emerging issues, and chairing arrangements.
- Develop and publish an East Sussex Multi-Agency Transition to Adulthood Protocol
- Progressing recommendations identified in current and future actions plans for SARs Charlie, Donna, Hannah, Finley, Gwen, and Ian.

¹⁰ <https://www.eastsussexsab.org.uk/documents/sab-strategic-plan-2021-2024/>

¹¹ <https://www.eastsussexsab.org.uk/documents/multi-agency-risk-management-marm-protocol/>

East Sussex Contextual Information

The State of the County Report¹² for East Sussex 2022 reports:

- Compared to 2022, by 2025 there will be 41,060 older people (age 65+) projected to have a limiting long-term illness whose day-to-day activities are limited a little (up 6.5%), 31,450 people's day to day activities will be limited a lot (up 6.8%).
- By 2028, around 20,000 more people in East Sussex will be living with two or more of these conditions, when compared with the needs of our population in 2018.
- 12,681 Estimated number of people aged 65+ living with dementia in East Sussex by 2025.¹³
- Recently released 2021 Census figures shows East Sussex has the second highest proportion of over 85s in England. This means that there is a higher percentage of the population locally, compared to the national figure who will have, or will develop, care and support needs
- The 2021 Census showed around 53,820 residents (9.9%) of East Sussex were born outside the UK, an increase of 10,970 (25.6%) since 2011.

¹² <https://www.eastsussex.gov.uk/media/zpqehvzy/state-of-the-county-2022-for-publication-august.pdf>

¹³ https://www.alzheimers.org.uk/sites/default/files/2019-07/ldp_east_sussex.pdf

Migrant Support, Refugee Resettlement and Asylum Dispersal

In 2022/23 SAB partners sought assurance regarding healthcare needs, mental health needs and safeguarding and potential risks of exploitation in relation to vulnerable refugees and asylum seekers being accommodated in various locations in East Sussex. Updates and assurances were provided at a number of meetings of the Safeguarding Adults Board.

At the end of February 2023 almost 1600 Ukrainian guests had arrived in East Sussex on a Homes for Ukraine visa, matched with over 600 sponsors.



Homes for Ukraine¹⁴ is being delivered in East Sussex through partnership of organisations across the public and VCSE sector, with coordination and leadership from the County Council. Partners help to deliver safety checks, welfare support, financial support, and assistance with key needs such as accommodation, employment, English language, and education.

SAB Partner agencies have also responded to the need to safeguard people in contingency hotels in East Sussex. A number of safeguarding training sessions have been facilitated, as well discussions around access to local services and support, meeting basic needs and community tension and integration.

More recently the Home Office have advised there is potential for a large site at Northeye¹⁵ in Bexhill to accommodate male asylum seekers. The Home Office is considering options which could potentially transform the current site into suitable accommodation for asylum seekers in response to the increasing pressures on the UK asylum system.

A Northeye Multi-Agency Forum was set up in June 2023 to provide a forum to share and manage next steps and representatives include ESCC, Rother District Council, Sussex Police, ESFRS, NHS Sussex, Home Office, South-East Strategic Partnership for Migration and VCSE reps (local and national) should the Home Office pursue this option.

To address the challenges and opportunities, of the increase in asylum seekers and refugees in East Sussex, it has been agreed that an East Sussex Migration Partnership Board is established, with the overall purpose of supporting the delivery of a coherent and sustainable strategy for supporting displaced persons in East Sussex, including refugees, people seeking asylum and other migrants (e.g., people on Government visa schemes), and to work collaboratively with partners and communities to achieve this.

¹⁴ <https://www.gov.uk/guidance/homes-for-ukraine-scheme-frequently-asked-questions>

¹⁵ <https://www.gov.uk/government/publications/asylum-accommodation-factsheets/factsheet-bexhill-asylum-accommodation-accessible>

Adult Social Care and Health

The Care Act 2014 sets out statutory duties and responsibilities for safeguarding adults including the requirement to undertake enquiries under section 42 of the Act. Below is a summary of key safeguarding activity during 2022/23 for both concerns raised and enquiries undertaken by Adult Social Care and Health (ASCH) in East Sussex County Council.

A safeguarding concern is when someone reports an adult is being abused, neglected, or exploited. **The total number of safeguarding concerns received in 2022/23 was 5,171, decrease of 11.1% compared to 5,819 in 2021/22.**

A section 42 enquiry relates to the duty of the Local Authority to make enquiries, or have others do so, if an adult may be at risk of abuse or neglect. **The total number of safeguarding enquiries that commenced in 2022/23 was 2,680, an increase of 10.4% compared to 2,428 enquiries in 2021/22.**

The table below illustrates the number of concerns raised and enquiries since 2017/18 to 2022/23

Year	Total Concerns	Concerns not progressed to enquiry	Enquiries	Percentage of Concerns progressed to Enquiry
2017/18	4873	3317	1556	31.90%
2018/19	4841	3713	1128	23.30%
2019/20	4465	2437	2028	45.40%
2020/21	4931	2915	2016	40.90%
2021/22	5819	3391	2428	41.70%
2022/23	5171	2491	2680	51.80%

- Previous Audit activity provided assurance on decisions made to progress concerns to safeguarding enquiries, but the increased conversion rates will be monitored in 23-24, to ensure appropriate responses to safeguarding concerns are being achieved.

Safeguarding Enquiries Outcomes

The desired outcomes are the wishes of the adult at risk or their representative which have been expressed at some point during the information gathering or enquiry phases.

	Fully achieved	Partially achieved	Not achieved
2021/22	53%	43%	4%
2022/23	47%	47%	6%

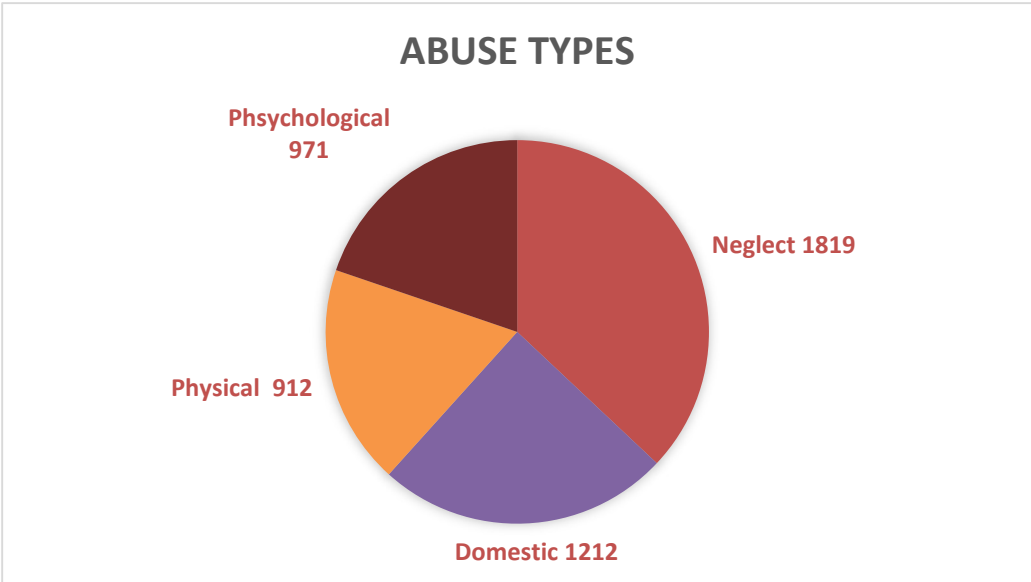
Mental capacity for completed safeguarding enquiries

	Adult has capacity	Adult lacks capacity	Not Known
2021/22	72%	27%*	1%
2022/23	71%	28%	1%

*Of the adults who lacked capacity, 98% were supported by an advocate.

- In March, the option of ‘not recorded’ for Mental Capacity within the ASC Safeguarding episode database was removed, with the aim of improving this further. Of the adults who lacked capacity, 98% were supported by an advocate.

Most reported abuse types (by completed episode) 2022/23



The pie chart displays the most reported abuse types by completed episode as follows:

- 971 psychological
- 912 physical
- 1819 neglect
- 1212 domestic

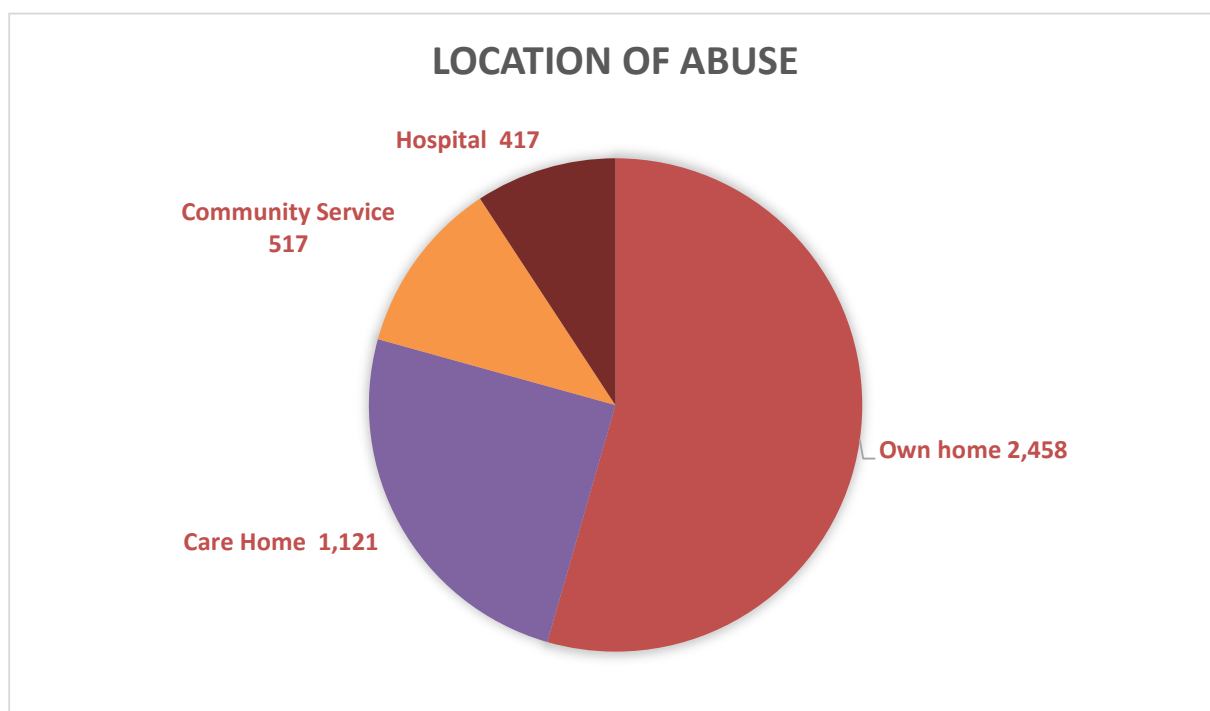
These four abuse types remain the same as the most reported in 2021/22.

- Neglect cases have increased by 17% this financial year.
- National data from 2022¹⁶ reports that the most common type of risk in Section 42 enquiries that concluded in the year was Neglect and Acts of Omission, which accounted for 31% of risks.
- Domestic abuse, psychological, financial, and physical abuse have all decreased slightly compared to last year.

Most common locations of abuse 2022/23

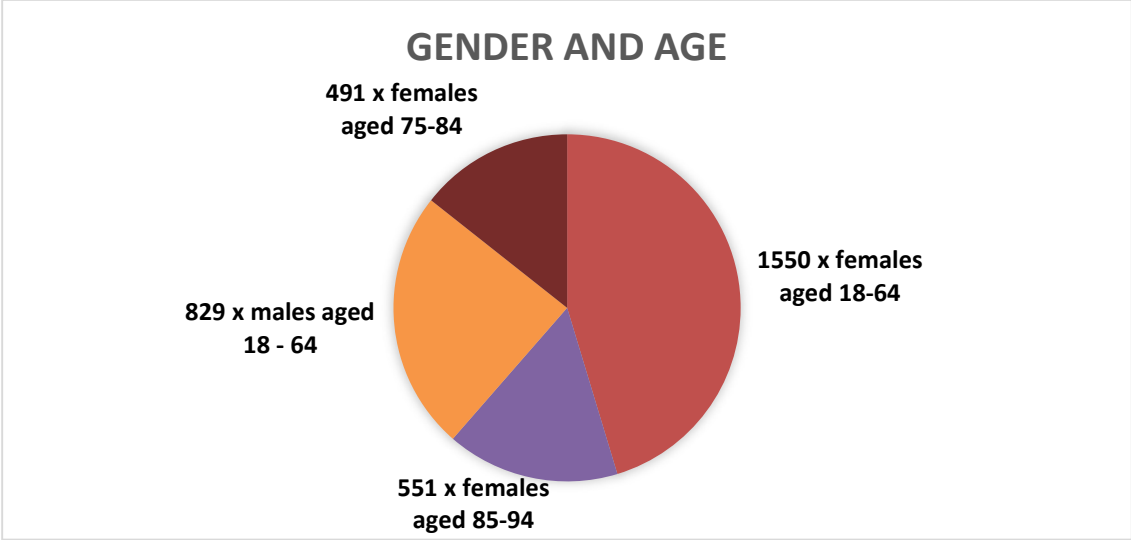
- This remains the same as 2021/22 and as in previous years, the most common reported location of abuse is in the adult at risk's own home. This has increased by 6% compared to last year's figures.
- The second most common location continues to be Care Homes. This has increased this year from 954 to 1,121 an increase of 15%.
- The pie chart displays the **type and location of risk reported nationally in 2021/22¹⁷**.

417 Hospital, 517 Community Service, 1,121 Care Home and 2,458 Own Home



East Sussex data in 2022/23 is comparative with national data from 2021/22. The most common type of risk in Section 42 enquiries that concluded in the year was Neglect and Acts of Omission, which accounted for 31% of risks, and the most common location of the risk was the person's own home at 48%.

Most common age and gender of victims 2022/23



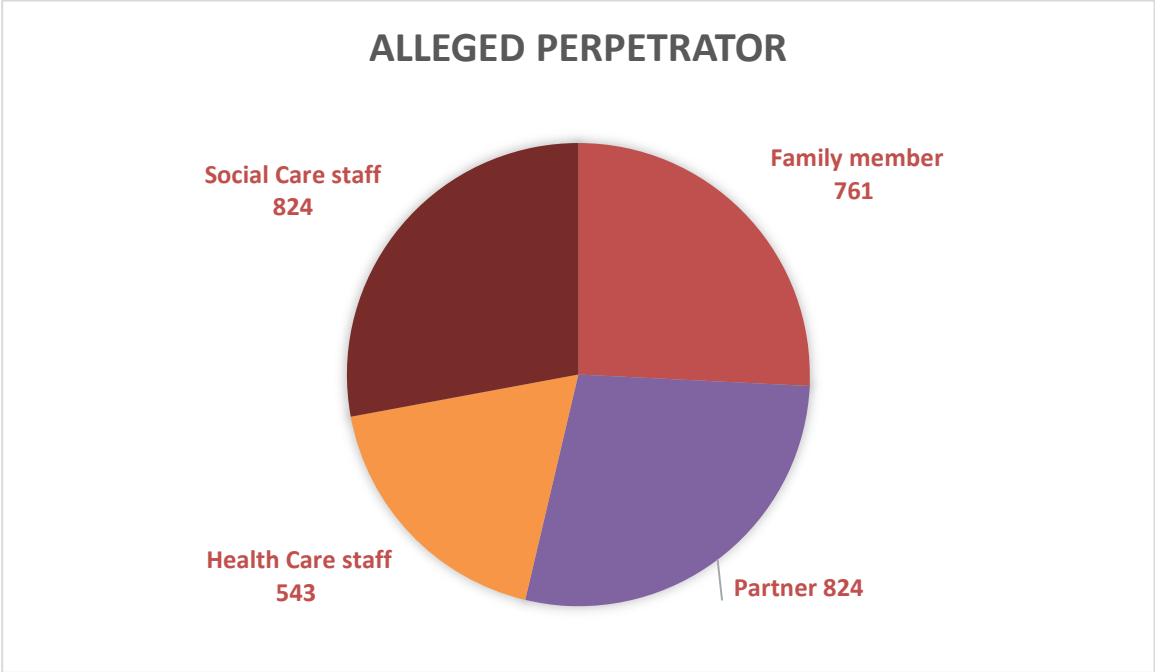
The pie charts displays the most common age and gender of victims 2022/23 as follows:

- 1550 x females aged 18-64
- 829 x males aged 18 - 64
- 551 x females aged 85-94
- 491 x females aged 75-84

Alleged perpetrator type 2022/23

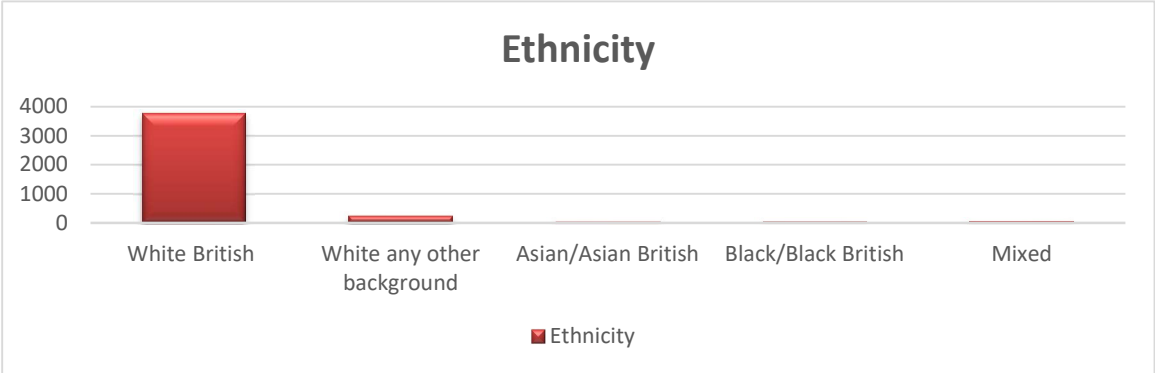
The pie chart shows the alleged perpetrator type 2022/23 as follows:

- Social Care staff 824
- Partner 824
- Family member 761
- Health Care staff 543



Safeguarding enquiries by ethnicity

The table below shows a breakdown of the 5 most recorded ethnicity categories.



- As with the 2021/22 SAB annual report, adults of white origin continue to be the largest group, accounting for 82%(3,766) of individuals, which is consistent with East Sussex population data and in line with the previous year.

The second largest recording (5%) is that of white any other background which represents 239 cases.

Making Safeguarding Personal

- There continues to be an increase in the proportion of adults who were asked for their desired outcomes.
- There will be cases where outcomes will not have been achieved - where desired outcomes are beyond the remit and control of the enquiry, or where the situation has changed from the initial desired outcomes that were recorded.

For each enquiry was the individual or individual's representative asked what their desired outcome was?

Yes, they were asked, and outcomes were expressed	82%	1654
Yes, they were asked, and no outcomes expressed	13%	271
No	4%	82
Don't know	0.19%	4
Not recorded	0.24%	5

In how many of these cases were the desired outcomes achieved?

Fully achieved	48%	800
Partially achieved	46%	770
Not achieved	5%	84

Complaints - Adult Social Care and Health

The total number of new complaints received by Adult Social Care & Health (ASCH) in 2022 - 2023 was **430** which is an increase of 25% from 2021/22.

Of these, 18 related to safeguarding, this is 4.2% of the total complaints received, and compares to 15 (4.5%) complaints received in relation to safeguarding in 2020 – 2021.

The outcome of the 18 complaints relating to safeguarding can be broken down as follows:

- Not upheld: 12
- Partially Upheld: 5
- Upheld: 1

Learning and actions from these 18 complaints, include:

- Case audits were undertaken by the Adult Safeguarding Development Team.
- The Adult Safeguarding Development Team have **developed Pressure Ulcer Guidance** which has recently been reviewed and updated. Health and Social Care Connect, our contact centre, also has a specific form for providers to complete when a concern is being raised about this. Our Pan Sussex Thresholds Guidance, which was recently revised, also contains a section on pressure ulcers and how these should be reported/responded to.
- There is greater emphasis in our training on areas including:
 - **Professional Curiosity** (described as not taking things at face value but exploring every possible indicator of abuse or neglect and the use of awareness of current evidence, applying knowledge to practice, and understanding how policies directly affect patients), and considering protective characteristics within the Equalities Act.
 - **Mitigating Unconscious bias** is a specialised course offered to all Adult Social Care (ASC) staff by the Corporate Training Team and it includes: ageism, racism, sexism, and numerous other forms of covert or overt discrimination. This training to ASC staff is promoted through internal communication media, newsletters, and emails.
 - **Neglect** is a subject highlighted in the Safeguarding Adults e-learning and in both the Safeguarding Adults Introduction and Refresher Training sessions. It is mandatory training for ASC staff.
 - The **procedures and Lead Enquiry Officer (LEO) checklist** was updated and published last year and highlights the need to consider **the use of an independent expert in safeguarding enquiries**. The checklist also includes the consideration of **equality and diversity issues, protected characteristics and ethnicity and cultural needs** within the enquiry
 - Working with the ASC Principal Social Worker for Adults, ASC practitioners and partners request provider reports with a view to ensuring there is a **clear and**

consistent approach to requesting information. This information is then be analysed in line with the Pan Sussex safeguarding procedures.

- The use of multi-agency meetings including all relevant agencies should support practice as should the LEO checklist to ensure that all identified areas within the enquiry have been concluded.

Agenda and minute templates have been updated and published over the last few months to support the structure of enquiries and to follow up on areas of dissent, disagreement, and feedback on minutes within 10 working days.

- Apology given for the complainant not being made aware earlier that there are safeguarding reports and a copy had not been given to complainant in a timely manner. This was addressed with the Worker. The Practice Manager also followed up with their team and provided additional refresher training to all staff members to ensure safeguarding reports and plans are sent out to all parties as per the safeguarding procedures.

Sussex Police

Number of Crimes per Category of Abuse Risk reported 2022/23 (figures are comparable with figures from 2021/22).



- Physical: 819
- Institutional: 2
- Neglect: 31
- Discriminatory: 22
- Psychological: 458
- Sexual: 310
- Financial: 118

Operation Signature¹⁸ is the force campaign to identify and support vulnerable victims of fraud. The campaign aims to combat fraud and scams with a particular focus on protecting the more vulnerable and elderly.



- In 2022/23 Operation Signature supported 952 victims who were either standard, medium, or high-risk victims of fraud and scams
- Across Sussex vulnerable people have been targeted by scammers who have stolen more than £3.6million through courier fraud.

¹⁸ <https://www.sussex.police.uk/advice/advice-and-information/wsi/watch-schemes-initiatives/os/operation-signature/>

- The majority of the 543 reports of courier fraud reported to Op Signature have been targeted at women aged 75yrs or over. Of those cases 185 suffered a financial loss, leading to the fraudsters walking away with £3.6m.

In one instance, a woman in her 80's in East Sussex was called by a man claiming to be a police officer. The caller claimed her bank account was at risk and a member of the bank staff was committing fraud against her account. She was asked to assist with a fraud investigation and was told to withdraw £8,000 from her local branch. A courier would then collect the cash and "check that the notes were not counterfeits". Thankfully, the bank staff stopped the withdrawal having realised the scam was being carried out and stopped the woman from withdrawing the money before explaining what was happening.

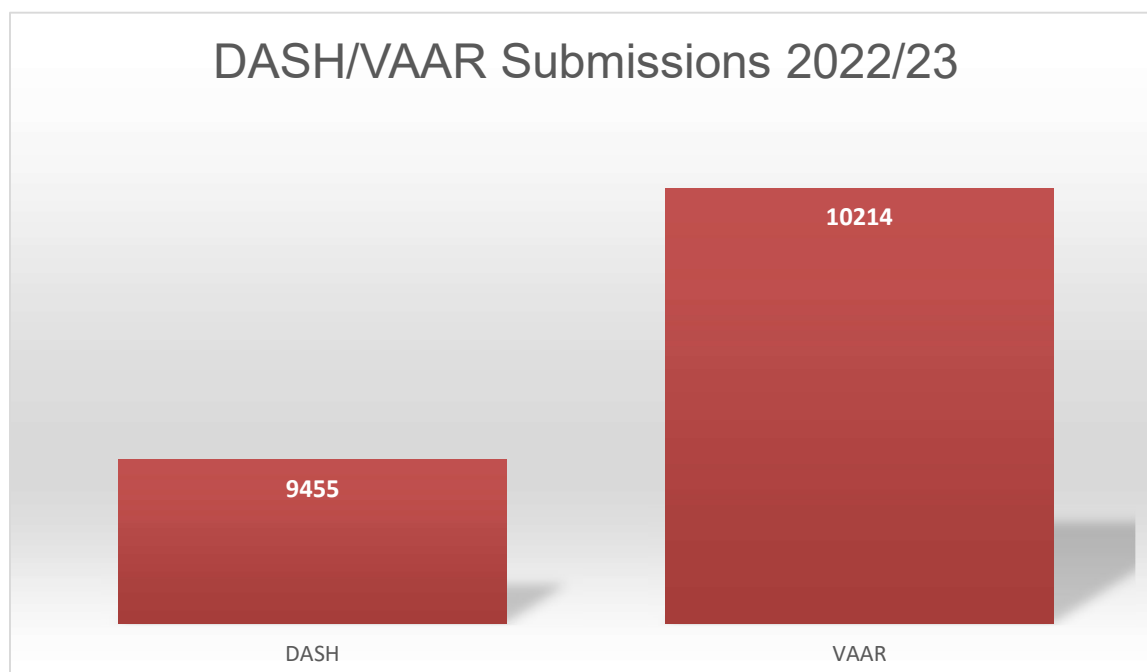
- Sussex residents lost over £3 million to dating scams in 2022.
- The county ranked fifth in the list of areas hardest hit by such scams with 251 people in the county falling victim.

Policing has a crucial role to play in the identification, support and safeguarding of adults who are at risk of harm:

Domestic Abuse, Stalking and Harassment and Honour-based violence risk forms (DASH) forms are for use by specialist domestic abuse and other non-police agencies for identification of risks when domestic abuse, 'honour'-based violence and/or stalking are disclosed.

The Vulnerable Adult at Risk (VAAR) section of the Single Combined Assessment of Risk Form (SCARF) is completed by the police for every safeguarding concern.

The table shows 9455 DASH submissions and 10214 VAAR submissions.



In August 2022, the Sussex Partnership NHS Foundation Trust (SPFT) moved to a new system for recording safeguarding concerns that are shared with local authorities. Safeguarding concerns now form part of the Trust's internal incident reporting and are recorded in its incident management system.

- The change provides a central database for the storage and analysis of the Trust's own safeguarding concern data. Prior to this system, the Trust relied on information from different sources, including local authorities, to understand its safeguarding activity.

The table shows Adult Safeguarding Concerns raised by SPFT in East Sussex in 2022/23

- The total figures for the twelve-month period are taken from the eight months of data from August 2022 to the end of March 2023. Future reporting cycles will be based on actual data across the twelve-month period.

Categories of Abuse	Number
Physical	90
Sexual	29
Financial	38
Discriminatory	6
Domestic	26
Psychological/emotional	63
Neglect & acts of omission	74
Self-neglect	23
Organisational	6
Modern slavery	5
Total	360

Section 42 Enquiries

Trust safeguarding enquiry information records forty-two Section 42 enquiries within East Sussex where the Trust was believed to be the cause of risk.

- The majority of these enquiries were linked to inpatient mental health settings with a category of abuse of neglect and acts of omission. Enquiries focussed issues related to delays in admission, unsafe discharges, and incidents on the wards.

- Concern continues to exist about safeguarding risks arising from hospital admission delays, especially following mental health act assessments. The issues leading to this situation are complex and relate to the number of hospital beds as well as available health and social care support in the community to enable discharge of patients who no-longer need to be in hospital.

Safeguarding Adult Reviews

The Trust participated in the Safeguarding Adult Review work of the Board which included the three Safeguarding Adult Reviews that were published in the 2022/23 business year (SAR Anna (May 2022), SAR Ben (September 2022) and a Thematic Review (November 2022).

The Thematic Review is especially relevant to the Trust as women at the centre of the review had mental health problems. The Trust is engaged in the action planning from the review and embedding learning, which focusses on trauma informed care, working with people with multiple compound needs/multiple disadvantage and suicide prevention.

Safeguarding Service

The Trust's Safeguarding Service is fully staffed and allows the Trust to deliver its safeguarding adult training in line with NHS requirements. It also enables the Trust to support its frontline services to respond to safeguarding concerns and enquiries, and to play its part in the work of the Sussex Safeguarding Adult Boards.

The challenge for the Trust is delivering core services at a time of increasing demand and continuing pressure on health and social care resources.

Safeguarding Initiatives and Projects

Domestic Abuse - The Trust has updated its Domestic Abuse & Sexual Violence policy for working with patients and carers and created a new domestic abuse policy to respond to its own staff who are victims or perpetrators of domestic abuse. A working group has begun to update the Trust's mandatory domestic abuse training.

The Trust continues to provide mental health representation to East Sussex Multi-Agency Risk Assessment Conferences (MARAC) and is supportive of the current East Sussex pilot to amend MARAC processes in the county.

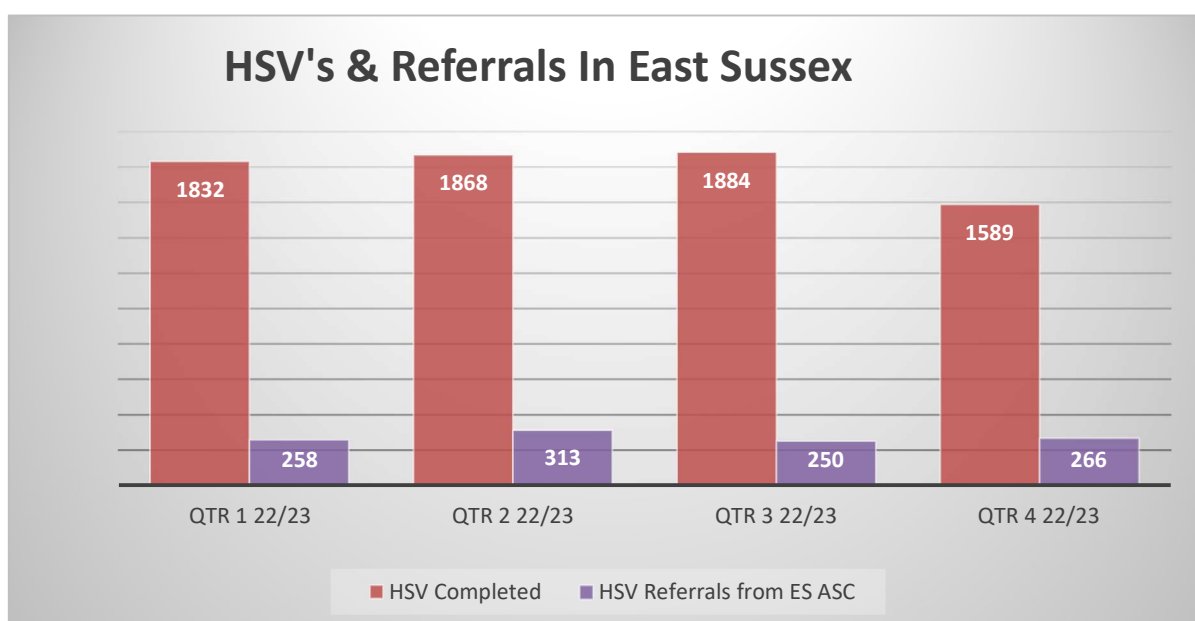
Safeguarding Policies - The Trust's adult safeguarding and Prevent policies have been reviewed and updated. The updated Prevent policy now includes reference to two new posts within the Trust to support its Prevent work. These are a Prevent Practitioner (Social Worker) and a Senior Clinical Lead for Prevent (Consultant Psychiatrist).



Home Safety Visits

East Sussex Fire and Rescue Service (ESFRS) provide Home Safety Visits (HSV's) to members of the community with essential information on safety in their home, escape plans and what to do in the case of a fire. ESFRS also works with GP surgeries to deliver home safety visits to those most at risk from accidental dwelling fires.

- In 2022/23 over 7,000 home safety visits were completed in East Sussex



The table shows the number of home safety referrals from East Sussex Adult Social Care per quarter in 2022/23 and the number of home safety visits completed as follows:

Quarter 1: 1832 visits completed and 258 referrals received.

Quarter 2: 1868 visits completed and 313 referrals received.

Quarter 3: 1884 visits completed and 250 referrals received.

Quarter 4: 1589 visits completed and 266 referrals received

Coming to Notice (CTN) forms

- 399 CTN forms were submitted in 2022/23 in relation to safeguarding concerns. Hoarding and mental health were the two most common safeguarding concerns raised.
- Hoarding represented 30% of all concerns
- Mental Health represented 13% of all concerns

Safeguarding Training

Safeguarding and community safety staff attend East Sussex Safeguarding Children Partnership training courses throughout the year.

Between 2021/22 and 2022/23 staff have attended the following courses:

Safeguarding Essentials course (online course) – 675

Safeguarding Adults & Children (face to face course) – 67

The new **Home Fire Safety booklet** is an easy-to-read guide that brings together important safety information from various sources. It helps keep homes and families safe, especially children. The booklet also covers topics such as:

- Mental health
- Wellbeing
- Dementia
- Cost of living



East Sussex Probation area covers both areas of East Sussex and Brighton and Hove. Therefore, the data below is reflective of both areas.

In 2022/23:

There has been a decrease of 71 probation cases since November 2022

There have been increases in safeguarding and police check requests and responses.

- Safeguarding checks increased by 29.22%
- Safeguarding checks returned increase by 31.29%
- Police checks increased by 22.54%
- Police checks returned increased by 21.71%

Safeguarding Current Activity from Probation Service by Gender

Gender	Safeguarding - Known Persons Check	Safeguarding Referral	Safeguarding Referral (Adult)	Safeguarding Referral (Child)	Police Intelligence Enquiries Requested	Police Intelligence Enquiries -Response Received	Total
Female	39	2	2	1	327	244	615
Male	439	107	2	5	2912	1929	5394
Total	478	109	4	6	3239	2173	6009

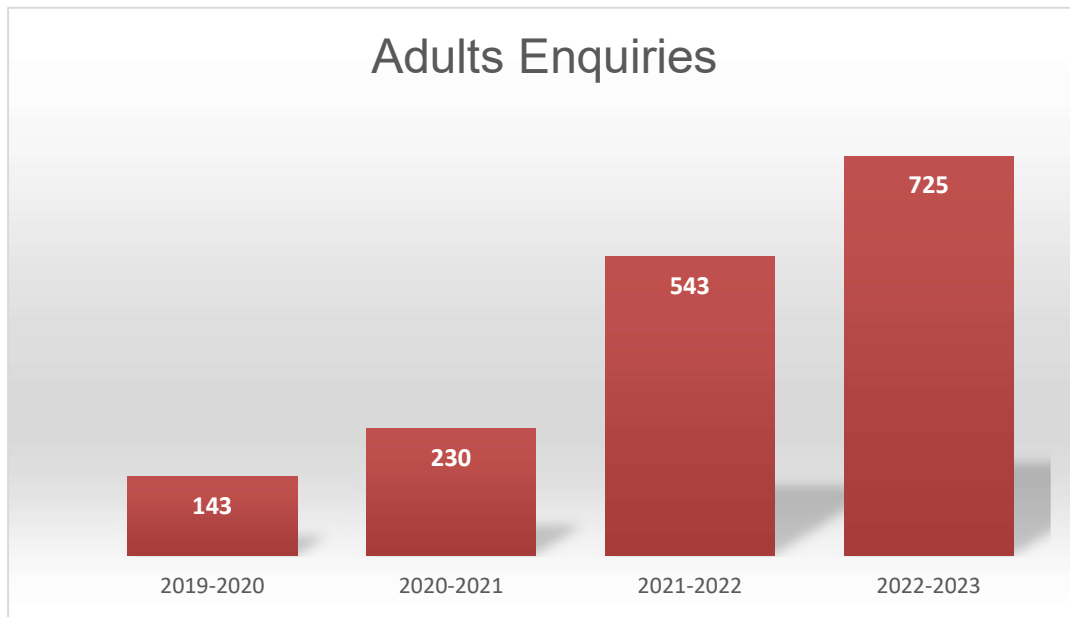
- The image shows that 89.76% checks and responses are for males on probation caseload.

Safeguarding Current Activity from Probation Service by Age Group

Age Group	Police Intelligence Enquiries Requested	Police Intelligence Enquiries - Response Received	Safeguarding Enquiries Requested	Safeguarding Enquiries - response received	Safeguarding - Known Persons Check	Safeguarding Referral	Safeguarding Referral (Adult)	Safeguarding Referral (Child)	Total
Brighton and East Sussex	3225	2149	1475	1517	473	108	4	6	8957
18 - 20	77	71	55	42	14	0	0	0	259
21 - 24	289	191	139	134	41	3	0	0	797
25 - 30	640	413	270	287	77	17	1	1	1706
31 - 40	1087	728	501	518	161	40	0	2	3037
41 - 50	546	378	259	277	101	23	3	2	1589
51 - 60	404	249	160	182	50	13	0	1	1059
61 - 70	140	85	64	51	19	6	0	0	365
71 - 80	35	30	18	21	8	3	0	0	115
81 - 90	7	3	8	5	2	3	0	0	28
91 - 100	0	1	1	0	0	0	0	0	2
Total	3225	2149	1475	1517	473	108	4	6	8957

- The image above shows that 33.90% checks and responses are for the 31 – 40 age group.

East Sussex Healthcare NHS Trust (ESHT) has seen a year-on-year increase in the number of Safeguarding Adults enquiries, the predominate themes are neglect and self-neglect.



The table above show the number of Safeguarding Adults enquiries as follows:

- 143 during 2019 – 2020
- 230 during 2020 – 2021
- 543 during 2021 – 2022
- 725 during 2022 – 2023

The trust implemented a **quality improvement plan in 2022-2023** in response to an increase in the number of enquiries about the organisation that were predominantly attributed to the discharge process and to a lesser extent to skin damage.

- Improvements in documentation and handover have supported the skin damage enquiries. Concerns regarding discharge frequently included the terms ‘unsafe’ and ‘failed’ discharge. Significant work has been and continues to be undertaken with regard to discharge. This includes safely balancing patient choice whilst also trying to mitigate the risk of harm from

deconditioning. In trying to ensure that patients do not rapidly decondition; the culture and approach to falls prevention is changing as a result.

- One element of quality improvement was the development of a weekly tracker to monitor the themes alongside meetings with the Heads of Divisions and Matrons led by the Chief Nurse. The progress of completion of the provider reports is also monitored through a database and discussion within Divisional governance forums to ensure robust and timely responses.
- There has been an additional and significant challenge with the very high numbers of patient with a very extended length of stay many of whom are frail, complex and at high risk of harm e.g., falls, pressure damage and psychological distress.
- The presentation of some cases is increasingly complex. An area where this is of particular note is within Maternity Safeguarding, for example domestic abuse considerations have also to encompass any risks to new-borns and other families.
- Since Covid, ESHT facilitated a level 3 Think Family Safeguarding training. This has been delivered through a combination of e-learning and a virtual training platform; this training is being updated for 2023-2024.
- The Health Independent Domestic Violence Advocate (HIDVA) facilitates Domestic Abuse training within the trust. In 2022 the HIDVA also facilitated training for Domestic Abuse champions within the trust, 14 staff completed this programme and it is hoped this will be offered again this year.
- In 2022 the trust employed a Mental Capacity lead to support staff to be more cognisant of the Mental Capacity Act and to embed understanding about the Deprivation of Liberty Safeguards (DOLS) process. As a result, the numbers of Deprivation of Liberty Safeguards (DOLS) applications within the trust have increased.
- The East Sussex Healthcare team has functioned alongside considerable staffing challenges in the last year with staff sickness alongside vacancies.

Feedback

“Can’t thank the staff in A&E enough for their dedication and care when my husband, who has dementia was taken I’ll. Their kindness, humour, and especially patience made the visit less stressful for me”.

“This year my wife had the onset of new Atrial Fibrillation. The care and kindness received from her Cardiologist has been and continues to be amazing. He is a brilliant listener and worked hard to find a solution to returning her to good health. Two words ‘fantastic and thanks’”.

“Went to A&E on a Saturday afternoon with a progressive hand infection. I was triaged quickly, and the subsequent assessment was very thorough, culminating in a course of antibiotics. The staff were very empathic and put my mind at rest while waiting. Subsequently, due to good liaison from the clinician, my GP contacted me a few days later to assess progress”.

NHS Sussex (also known as the local Integrated Care Board or ICB) became an organisation on 1st July 2022, taking on the commissioning functions previously carried out by the Clinical Commissioning Group¹⁹ (which ceased to exist thereafter) and has continued to work alongside both statutory and wider Safeguarding Adults Board to safeguard the local population.

This includes providing health leadership to all SAB subgroups and chairing the Transitional Safeguarding Task and Finish group which was jointly commissioned by the Safeguarding Adults Board and Safeguarding Children Partnership during Quarter 4 and will continue working on this crucial piece of work in 2023/24 financial year.

In addition to fulfilling its statutory obligations, as per the NHS: Safeguarding accountability and assurance framework²⁰, during the 2022-23 year, NHS Sussex have continued to undertake a number of actions to support strengthening safeguarding practice and arrangements across the East Sussex health landscape.

Some notable highlights this year have included:

- **Mental Capacity Act Reforms / Liberty Protection Safeguards (LPS) Readiness:** In anticipation of the implementation of the Mental Capacity (Amendment) Act 2019: Liberty Protection Safeguards NHS Sussex set up a Sussex Wide LPS implementation Board, chaired by the Chief Nursing Officer, and a system wide LPS steering group. This was designed to be a supportive forum as well as bringing together Integrated Care System colleagues across Sussex to coordinate and plan the implementation for the revised legislation across the local health economy.

Integrated care systems (ICSs) are partnerships of organisations that come together to plan and deliver joined up health and care services, and to improve the lives of people who live and work in their area.

- At the end of the 2022-23 year (April 2023), the Government announced that delay the implementation of the Liberty Protection Safeguards²¹ would be beyond the life of this Parliament. NHS Sussex remains committed in supporting to ensure that there is an appropriate understanding and implementation of the Mental Capacity Act within health settings, leading to improved patient experiences and outcomes. **A number of training webinars**

¹⁹ [NHS Sussex - Sussex Health and Care \(ics.nhs.uk\)](https://www.nhs.uk/ics)

²⁰ [NHS England » Safeguarding children, young people, and adults at risk in the NHS: Safeguarding accountability and assurance framework](#)

²¹ [Mental Capacity \(Amendment\) Act 2019: Liberty Protection Safeguards \(LPS\) - GOV.UK \(www.gov.uk\)](https://www.gov.uk)

regarding use of the **Mental Capacity Act**, using real case studies to putting theory into practice, have been scheduled to be held in **2023-24**. Members of the Sussex wide LPS Steering Group have also agreed a change to its Terms of References, becoming the Sussex Wide MCA Steering Group moving forward.

- **NHS Sussex Safeguarding Fortnight:** During Q3 2022-23, NHS Sussex delivered a fortnight of multi-agency learning events covering a wide range of topics including learning from statutory reviews, exploitation, domestic abuse, and trauma informed care.

The events reached approximately 1,165 attendees across the twelve sessions with representation from 120 different organisations (including from statutory, voluntary and the independent sector).

Feedback from the fortnight indicates that the sessions were very well received, with attendees reporting that they were taking forward the related learning to embed into practice.



- **Revised Local NHS Sussex Safeguarding Arrangements** (Place Based Leadership): In consideration of the breadth of the revised organisational geography of NHS Sussex (when compared to the former individual CCGs) and in recognition of bespoke local safeguarding issues within Sussex, changes were made, through the implementation of ICB 'place-based' Safeguarding leadership to support the system safeguarding work .
- Since Q3, there has been **dedicated Designated and Named Safeguarding Professionals for Safeguarding Adults for East Sussex**. This enables our Safeguarding Professionals to work more consistently alongside multi-agency partners in identifying and support the development of local safeguarding needs, whilst maintaining the benefits of continuing to work as part of the wider Sussex system (such as sharing best practice / relevant learning from across the Integrated Care System).
- **Raising awareness of Serious Violence and Exploitation:** During Q4 2022-23, NHS Sussex hosted a virtual conference including sessions on 'cuckooing', tackling serious and organised crime and 'honour-based' abuse. The conference was very well attended by a wide range of professionals and has been well evaluated, with learning being shared and developed into practice.

Sussex Community NHS Foundation Trust



Sussex Community NHS Foundation Trust (SCFT) serves a wide geographical area which includes, West Sussex, Brighton & Hove, and High Weald, Lewes, and Havens, and provides health services in the community to both adults and children.

- Safeguarding is a fundamental part of our recruitment process, ensuring appropriate checks are in place to ensure all staff are employed within SCFT services to contribute to the delivery of excellent care within the community.
- All staff have access to mandatory and statutory safeguarding training for adults and children appropriate to their role and position within the Trust including higher-level training for those in specialist roles.
- SCFT has a safeguarding team which provides specialist advice for both adults and children across all services and supports staff to recognise signs of abuse and how to report it. The Trust works effectively with all safeguarding partnerships to ensure a multi-disciplinary and cross agency approach.
- The safeguarding team works closely with new service developments to ensure we provide high quality and effective health services. The team is part of a Quality and Safety Department, which enables close working both with specialist safety teams and clinical staff. This ensures that we focus on learning for improvement and strengthens our personalised approach to safeguarding.

Healthwatch- Putting a Face to Unmet Need Report 2023



Following contact from a member of the public about their father's experience of health and social care services, Healthwatch East Sussex undertook a project in 2022/23: *Putting a Face to Unmet Need*²² to explore people's social care needs and how they were being met. The findings and recommendations from the project were published in May 2023.

- Working in collaboration with three partner organisations, Citizens Advice in Eastbourne, Diversity Resource International (DRI) and Care for the Carers, fifteen people were identified and interviewed. They were asked about their experience of social care and the impact of needed social care.
- People were drawn from three groups, namely unpaid carers, individuals from an ethnic minority background and people on low incomes.



Unmet Need and Safeguarding

This report looks at unmet social care needs in a broad way. People were asked about their lived experience of the social care system and based on what Healthwatch heard, the public appear to know relatively little about who oversees adult social care, how it works, how it is paid for and what help they might get.

The complexities of what is a health need or a housing need or a social care need and who might (if anyone) help or be responsible for helping was reflected in the interviews that were conducted.

²² <https://cdn.whitebearplatform.com/hweastsussex/wp-content/uploads/2023/05/05152842/HWES-Unmet-Need-Project-Report-2023-FINAL-5.5.23.pdf>

A number of recommendations have been put together by a combination of Healthwatch East Sussex staff and volunteers and representatives of partner organisations contributing to this report.

Recommendations include:

- There is a general lack of public awareness about Adult Social Care (ASC), what it is, who is responsible for providing services and how to access advice and services.
- Adult Social Care should work with partners and in particular the Safeguarding Adults Board to develop and implement a plan to improve public awareness of safeguarding and who to contact with a concern.
- Health and social care partners including ASC, NHS and voluntary, community and social enterprise (VCSE) organisations should develop a plan to provide information, advice and emotional support for Unpaid carers and people arranging for the care of a family member.
- Health and care strategies and delivery programmes should identify and focus resources on preventative measures, rather than just crisis management.

Raising a safeguarding concern

No one should have to live with abuse or neglect – it is always wrong, whatever the circumstances.

Anybody can raise a safeguarding concern for themselves or another person. Do not assume that someone else is doing something about the situation.

You can report a concern in the following ways:

Phone: 0345 60 80 191 (8am to 8pm 7 days a week, including bank holidays)

Email: [Health and Social Care Connect](#)

Online: Via the form on the [East Sussex County Council website](#)

Contact the police on 101 or in an emergency 999

Find out more in our [safeguarding leaflet](#) and [easy read version safeguarding leaflet](#).

Appendix 1 – Board membership

- East Sussex Adult Social Care & Health (ASCH)
- NHS Sussex Integrated Care Board (ICB)
- Sussex Police
- Care for the Carers
- Care Quality Commission (CQC)
- Change, Grow, Live (CGL)
- District and borough council representation
- East Sussex Fire and Rescue Service (ESFRS)
- East Sussex Healthcare NHS Trust (ESHT)
- East Sussex Safeguarding Children Partnership (ESSCP)
- Healthwatch
- HMP Lewes
- Independent Homecare representatives
- Kent, Surrey, Sussex Community Rehabilitation Company (KSS CRC)
- Lay members
- National Probation Service (NPS)
- NHS England
- Registered Care Association (RCA)
- South-East Coast Ambulance Service NHS Foundation Trust (SECamb)
- Sussex Community NHS Foundation Trust (SCFT)
- Sussex Partnership NHS Foundation Trust (SPFT)
- Trading Standards, East Sussex County Council
- Voluntary and community sector representation

Appendix 2 – Board structure

