



Newsletter

Issue 2 October 2018

Who should read this Newsletter?

Everyone with an interest in safeguarding adults at risk, to enable them to live their lives free from abuse and neglect, and to access and receive appropriate care.

We hope this Newsletter will be an important means to keep you up to date, and to share good practice and important information.

If you would like to contribute to the next Newsletter or be a feature in our spotlight, please email safeguardingboardscomms@cambridgeshire.gov.uk

Message from the Chair



Dr Russell Wate QPM MSc
Independent Chair, Peterborough
Safeguarding Adults Board

Home.

Please also have a look at the information within the newsletter that refers to the community based crisis mental health service.

We as a safeguarding partnership are very keen to do all that we can to stop suicide in our area. Please help us in this work and join the 'Stop Suicide' campaign.

We would also like to encourage professionals and members of the public to tell us what they know about Safeguarding Adults by completing a short survey.

If you have any feedback on this newsletter, would like to contribute any future articles or be a feature in our spotlight please let us know by emailing safeguardingboardscomms@cambridgeshire.gov.uk

Dr Russell Wate QPM

Independent Chair, Cambridgeshire and Peterborough
Safeguarding Adults Board

Inside this edition

Safeguarding Adults Survey	2
Multi-agency Training	2
Safeguarding Awareness Month	2
Community based crisis mental health service	3
First Response Service	4
Integrated Mental Health Team	4
Sanctuaries	4
Stop Suicide Campaign and Zero Suicide Alliance	5
New Bill to replace Deprivation of Liberty Safeguards (DoLS)	8
Spotlight on the Tudors	9
National Publications	10

What do you know about Safeguarding Adults?

The Safeguarding Adults Board would like to give you the opportunity as professionals to share your thoughts and experiences surrounding adult safeguarding.

From the information that you give us, by answering this short survey, we hope to find out; not only 'what adult safeguarding means' to you as a professional, but also what your experiences are of working with adults at risk and their families.

The survey on Professionals views on Adult Safeguarding can be found at the following link
<https://www.surveymonkey.co.uk/r/HP39J73>

The Safeguarding Adults Board would also like to find out what the general public across the region understand about safeguarding adults at risk of abuse and neglect. This will then help the Board to get the right information and messages to the community and to professionals to help make Cambridgeshire and Peterborough a safer place to live.

The survey for members of the public can be found at the following link
<https://www.surveymonkey.co.uk/r/5CRBNFK>.

An 'Easy Read' version can be downloaded from the [Safeguarding Board website here](#)

The completion of both surveys is completely anonymous and the findings will only be used, by the Adult Safeguarding Board, to look at identifying; what is known about adult safeguarding, any gaps in understanding and training needs, where to aim future resources for safeguarding awareness events.

We would like to say thank you for taking the time to complete this survey – your opinions are very important to us.

Adult Safeguarding Training

Below is a selection of our upcoming courses

Wednesday 7th November 2018

10:00 – [Safeguarding Adults and the Mental Capacity Act](#)
13:00 – [Safeguarding Adults and the Mental Capacity Act](#)

Wednesday 14th November 2018

09:30 – [A Workshop for Professionals Who Work with People Who Self-Neglect](#)
12:30 – [An Introduction to Safeguarding Adults](#)
09:30 – [An Introduction to Safeguarding Adults](#)
12:00 – [An Introduction to Safeguarding Adults](#)

Thursday 15th November 2018

09:30 – [Self-Neglect and Hoarding](#)
16:00 – [Self-Neglect and Hoarding](#)

Thursday 22nd November 2018

13:00 – [Safeguarding Adults and the Mental Capacity Act](#)
16:00 – [Safeguarding Adults and the Mental Capacity Act](#)

Tuesday 4th December 2018

09:30 – [Safeguarding Adults - Advanced](#)
13:30 – [Safeguarding Adults - Advanced](#)

Wednesday 5th December 2018

13:30 – [Adult Refresher - Messages from Safeguarding](#)
16:00 – [Adult Refresher - Messages from Safeguarding](#)

Tuesday 11th December 2018

10:00 – [Safeguarding Adults and Domestic Abuse](#)
13:00 – [Safeguarding Adults and Domestic Abuse](#)

Thursday 13th December 2018

09:30 – [Adult Refresher - Messages from Safeguarding](#)
12:00 – [Adult Refresher - Messages from Safeguarding](#)

To apply online for any of our courses either click on the titles above or visit:

www.safeguardingpeterborough.org.uk/availabletraining

If you have any queries regarding our training courses please contact our training team on 01733 863747

Safeguarding Awareness Month 2018

Thanks very much to all of you who did something to raise awareness of Safeguarding in March by taking part in our first Cambridgeshire and Peterborough, Childrens and Adults, Safeguarding month.

At the end of the month agencies were asked to evaluate how the month had gone. Not all agencies responded so it is difficult to report accurately how many contacts were made during the month or how many people attended events, but figures from those who did respond show that over 2000 staff were given some sort

of awareness message and over 750 service users/members of the public. Cambridgeshire City Council also shared the "Chelsea's Choice" production with 918 pupils, and there were also 2 community performances for parents and community groups.

Many partners delivered some sort of communication message highlighting safeguarding, including newsletters, email messages, and training bulletins which went out to over 4000 staff. Many partners also used the month to run specific training events.

Agency comments included:

- "Excellent, well worthwhile" – Cambs Early Years Team
- "It is important to keep sharing the message, so people remember, and refer when they have concerns" – Cross Key Homes
- "Found it a helpful challenge to do something innovative, a useful exercise for us all" – NHS England
- "There was a recognition that safeguarding is everyone's responsibility, and how it effects the majority of services and staff" – Cambridgeshire County Council.
- "It has been a useful opportunity to raise awareness of safeguarding and to offer targeted support and learning for our staff" – CCS NHS Trust

Highlights

The East Anglia Ambulance Service really embraced the month, with key personnel going out to raise awareness amongst their teams, meeting members of the public, and spreading awareness not just in Cambridgeshire and Peterborough, but across their whole area, including Norfolk, Essex and Bedford. (Full details are included at Appendix 2.) In total they met with over 700 staff and 300 service users/public. In their evaluation they said the awareness month had been a very positive experience, and very beneficial to staff and service users.

Cambs Constabulary also worked with partners to produce a short film highlighting different roles in Safeguarding, and why it's so important. This film can be found their youtube channel: <https://youtu.be/l2kT3xNPlic>.

Because the month was a real success, we will be another Awareness Month during February 2019 – look out for more information nearer the time.

Community based crisis mental health service



People living in Peterborough and Cambridgeshire can now access a new mental health team when they dial 111 option 2

The pilot scheme was launched in September 2016 as part of the Urgent and Emergency Care Vanguard programme in Cambridgeshire and Peterborough, following that the full operating model is now in place.

NHS organisations - including Cambridgeshire and Peterborough Clinical Commissioning Group - together with local authorities, Cambridgeshire police and representatives from the third sector have also been involved in setting up the pilot projects, which aim to improve the way urgent mental health care is delivered and reduce the pressure on acute hospitals.

The extension of the 111 service will mean callers who are experiencing a mental health crisis will be able to dial the NHS urgent medical advice number, and by choosing 'option 2' will be put through to a member of CPFT's First Response Service.

Specially-trained mental health staff will speak to callers and discuss with them their mental health care needs instead of them having to go to accident and emergency departments of local acute hospitals.

The First Response Service links directly to two out-of-hours 'safe-havens' for people experiencing mental health crisis - run by Cambridgeshire, Peterborough and South Lincolnshire Mind (CPLS Mind), the Sanctuaries offer people somewhere to go where they can access emotional and practical support rather than having to attend hospital.

When people call the First Response Service, via 111, being referred to one of the Sanctuaries may be one of the options offered to them as part of the support available.

Sharon Johnson, Service Manager for FRS and IMHT, told us more about the different services being offered in the community for those with mental health needs

First Response Service (FRS):



- Provides assertive and responsive support and triage for anyone experiencing mental health crisis, including providing face to face assessment if needed
- Open 24/7 for people of all ages from throughout Cambridgeshire and Peterborough
- Welcomes self-referral as well as urgent referrals via 111 option2 from carers, GPs, ambulance crews, police (anyone!) and from the Emergency Departments

The FRS is an all age service providing clinical risk and mental health assessments and formulation short term contingency planning for people presenting with signs of a mental health crisis. People can self-refer into the service so it is patient led rather than relying on Health Care Professional Referral, by calling 111 and pressing option 2 or they can be referred into the service by concerned others.

The team do not hold a caseload; they support individuals through their current ("here and now") mental health crisis. The team works within the community to provide telephone triage using the UK Mental Health Triage Scale and brief psychological interventions, to support individuals in managing their crisis and if indicated face to face assessments together with a range of solution-focused interventions to empower patients, carers and their families in decision making and to divert them to a relevant range of health and social care resources for support. The team identify the appropriate intervention or management required or if necessary recommend the most suitable referral agency. It is not unusual for there to be a number of calls to the Service while helping a patient through their crisis.

"Integrated Mental Health Team" (IMHT)

The IMHT is a small team of Mental Health Nurse Practitioners who work within the Cambridgeshire Force Control room providing support and advice to Police Officers who are dealing with individuals in mental health crisis.

- Provides an effective first point of contact intervention by Cambridgeshire Constabulary and Mental Health Services, resulting in identification of the most appropriate pathway for individuals suffering from a mental health issue/crisis
- Service operates Monday to Friday 10am-10pm and at weekends 1pm-9pm
- Have access to local community mental health trust CPFT clinical records (RIO) to enable current and thorough assessment of an individual's needs

Sanctuaries - out of hours' community spaces:

- Provides calm, safe place for young people and adults (aged 16+ where clinically appropriate) experiencing a mental health crisis
- Offers onward referral of the patient into appropriate services that will provide support for their recovery journey
- Service operates Monday to Sunday 6pm-1pm

The Sanctuaries provide a safe place for individuals experiencing an emotional or mental health crisis, who are over the age of 16 years. There are 2, one in Cambridge and one in Peterborough - offering practical and emotional support in a warm, welcoming and friendly environment. The Sanctuary is open seven days a week from 6pm to 1am, 365 days a year.

Hannah Turner, Head of Services – Sanctuary, wellbeing, Support2Recovery, Changing Lives, explained that the opening times of the Sanctuary were designed to match the times that people in a mental health crisis are more likely to attend A&E departments or make 999 calls. She says that people attending the Sanctuary are asked what they need – they might want someone just to sit with them, others just want some time alone in a safe place, and some others might want to talk – everyone is different. Demand has been very high and following a trial period the service now works

by allowing each person 2 hours; in 95% of cases in Cambridgeshire and 93% in Peterborough, the crisis has de-escalated following their time at the Sanctuary – meaning the person feels well enough to return home, – for those that don't feel well enough other pathways are considered and the most appropriate option is discussed – this usually means a referral back to FRS and together the services will re-assess and put a care plan together for next steps.

When designing the services and considering things like the opening times, consultation included the Sun network.



The SUN Network exists to support service users of Mental Health and Drug & Alcohol Services to enable them to have a say in how these services are shaped and delivered. They ensure that the service users' voice is heard from a strategic level all the way through to ongoing evaluation and if there are any gaps/barriers to accessing services, they can address these with commissioners to seek improvement.

Using their 5 Values system,(Empathy Honesty Inclusion Personalisation Working Together), the SUN Network 5 Values peer assessors have assessed the services and have awarded the First Response Service 3 stars for their work in the field of Mental Health Crisis Support, and The Sanctuary 4 stars for their work in the field of Mental Health Crisis Support.

 Good: Positively serving clients well. Meets all requirements

 Outstanding: Highly effective, meets all clients' needs and provides exceptionally well.

To read the full report:

<http://www.sunnetwork.org.uk/first-response-service-sanctuary-5-values-report/>

STOP Suicide Campaign

STOP Suicide is an award-winning suicide prevention campaign that seeks to empower communities and individuals across Cambridgeshire and Peterborough to help stop suicides by being alert to the warning signs, asking directly about suicide and helping those who are feeling suicidal to stay safe.

Asking **directly** about suicide
WON'T prompt someone to
kill themselves. FACT.

#IdAsk

STOP suicide
Save a life. Choose to live.

The campaign is led by the charities Cambridgeshire, Peterborough and South Lincolnshire Mind (CPSL Mind) and Lifecraft, supported by local NHS and Public Health teams.

It involves general awareness raising about suicide, specialist training for non-mental health professionals working / volunteering within our communities and a public campaign to encourage sign up to the [STOP Suicide Pledge](#) for organisations and individuals.



“ One conversation can
mean the difference
Between life and death ”

-Jodie

#STOPSuicide

STOP suicide
Save a life. Choose to live.
Working together for a suicide-safe community

The main aims of the campaign are to empower communities and individuals to help stop suicide by:

- Being alert to the warning signs
- Asking directly about suicide
- Helping those who are feeling suicidal to stay safe

At the heart of the campaign are three messages:

- Suicide can be prevented
- It's everybody's business
- We need to talk directly about suicide

The campaign originally launched in 2014 but during May 2018 CPSL Mind ran a huge local publicity campaign across Cambridgeshire to promote the STOP Suicide message.

This included a campaign film, bus advertising, radio adverts, media appearances - including BBC Radio Cambridgeshire and Look East, large-scale social media promotion and endorsement by Stephen Fry and other influencers. Several community roadshow events – at which the campaign film was shown - were also delivered locally by STOP Suicide Campaign Maker volunteers.

The results of the May 2018 campaign are impressive and indicate the success which STOP Suicide is having in achieving its aims:

- **2,250 pledges** reached.
- **Significant positive change in attitudes** towards preventing suicide post-campaign vs. pre-campaign (Cambridgeshire survey).
- **70,000+ views** of campaign film.
- **1.9 million+ impressions** on social media.
- **1 million+ reach** from broadcast and media news exposure.
- **82% of Cambridgeshire population reached** from 69 bus adverts.
- **5,000 personal face-to-face interactions** with people in Cambridgeshire.
- **420+ volunteer Campaign Maker hours.**
- **32,000 resources** distributed.
- **Celebrity endorsements** from Stephen Fry, Benjamin Zephaniah & more!

STOP Suicide continues to raise awareness and has recently delivered further concentrated promotional work around both World Suicide Prevention and World Mental Health Day.

Visit stopsuicidepledge.org for more information.



The Zero Suicide Alliance

(www.zerosuicidealliance.com/) are also running a campaign – they are a collaborative of National Health Service trusts, businesses and individuals who are all committed to suicide prevention in the UK and beyond.

Why is the number zero so important?

The concept of zero suicide is inspired by the Henry Ford system in Detroit, which began a programme of screening every patient for risk of suicide, not just those with mental health issues, in 2001 and enjoyed significant results. The suicide rate among its patient population fell by 75% within four years and by 2008, they eliminated all suicides among people in their care.

The alliance is ultimately concerned with improving support for people contemplating suicide by raising awareness of and promoting FREE suicide prevention training which is accessible to all. The aims of this training are to: enable people to identify when someone is presenting with suicidal thoughts/behaviour, to be able to speak out in a supportive manner, and to empower them to signpost the individual to the correct services or support. It can be used by the public as much as professionals.

The training only takes 20 minutes to complete – but be warned the training may be challenging, especially if you are a suicide survivor or have been bereaved by suicide. It may be an idea to have someone supportive nearby as you go through this training.

Link to training:

https://www.relias.co.uk/hubfs/ZSACourse3/story_html5.html?utm_source=Relias&utm_campaign=Training-Landing-Page

You can also access free resources, download posters, email banners, screen savers and other campaign materials to help spread the word:

<https://www.zerosuicidealliance.com/resources/>

Suicide is everybody's business. Please work with us to make Cambridgeshire and Peterborough a suicide-safer community.

For those that have had their lives affected by suicide there is a Suicide Bereavement Support Service offered by Lifecraft:



Lifecraft

<http://lifecraft.org.uk/our-services/suicide-bereavement-support-service/>

Suicide represents an individual tragedy and a loss to society. The impact on those left behind can be devastating. Evidence suggests that early intervention support can benefit individuals in the grieving process. Lifecraft aims to ensure information and access to support is available to those bereaved by suicide.

The loss of a loved one to suicide is a uniquely devastating circumstance that leaves the bereaved with unanswered questions and complex feelings that can be hard to understand and process, our service at Lifecraft understands this and is here to offer help and support. The suicide bereavement support service is available to family and friends in the Cambridgeshire and Peterborough area.

They are able to provide:

- Early contact with families
- A named liaison worker
- A home visit to meet the family and offer support
- Information on services available in Cambridgeshire and Peterborough
- Liaison with other services
- Follow up telephone support for the family
- Signposting to practical support
- Information on procedures that take place when there is a death by suicide

Please contact [Fiona at Lifecraft](#) for more information

Blue Light Programme: Wellbeing Networks for our Emergency Services

CPSL Mind haven't just been working on the Stop Suicide campaign, they are ALSO proud to be one of four pilot projects across the country, all of which seek to raise awareness of mental health issues and to tackle mental health-related stigma across all four emergency services (Police, Fire, Ambulance, Search & Rescue).

From a national survey commissioned by Mind we know that:

- People who work or volunteer in the emergency services are more likely to experience mental health issues and 88% said they had experience low mood or signs of stress.
- Emergency service staff are also less likely to take time off from work with these issues.
- They are just as likely to seek help from a colleague as they are from seeing a GP.
- Many staff said they would disguise periods of sick leave as another issue, rather than say they had a mental health issue.

<https://www.cpslmind.org.uk/what-we-do/blue-light-programme-wellbeing-networks-emergency-services/>

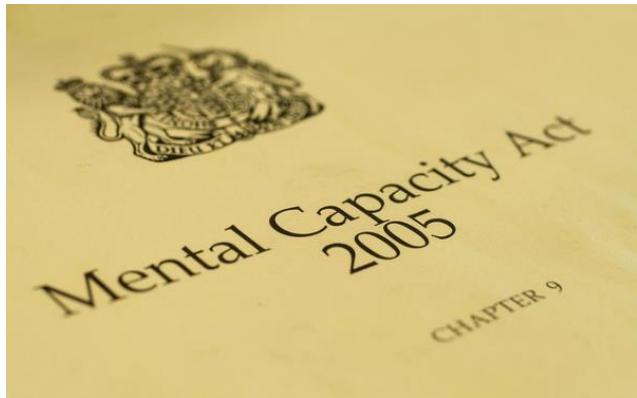
Watch their video 'Tackling Stigma and Changing Minds' –the journey, achievements and impact of the Blue Light Project in Cambridgeshire and Peterborough 2016-2017

[Blue Light Programme: Wellbeing Networks for our Emergency Services - Cambridgeshire, Peterborough and South Lincolnshire Mind](#)

Watch their video 'You look after others: who looks after you?' – what emergency service workers wish they had known about mental health, how it affects them and how they look after their own mental wellbeing.

[Blue Light Programme: Wellbeing Networks for our Emergency Services - Cambridgeshire, Peterborough and South Lincolnshire Mind](#)

New bill introduced to replace Deprivation of Liberty Safeguards (DoLS)



[The government has introduced a bill](#) to overhaul the law on deprivation of liberty in a bid to tackle the huge demand on the current system and save local authorities an estimated £200m a year.

[The Mental Capacity \(Amendment\) Bill](#) had its first reading in the House of Lords on 3 July. It will replace the Deprivation of Liberty Safeguards with a scheme called the Liberty Protection Safeguards, based on [proposals issued by the Law Commission last year](#).

The government has estimated that the reform will save local authorities £200m a year, including by permitting the NHS to authorise deprivations of liberty in its settings and by ensuring that restrictions on people's care or living arrangements are considered as part of their wider care planning, rather than as a separate process.

"We know local authorities are under pressure which is why these reforms are so important: to reduce the burden on councils so they can focus their resources where they are needed on the frontline," said minister for care Caroline Dinenage.

The reforms seek to:

- Introduce a simpler process that involves families more and gives swifter access to assessments.
- Be less burdensome on people, carers, families and local authorities.

- Allow the NHS, rather than local authorities, to make decisions about their patients, allowing a more efficient and clearly accountable process.
- Consider restrictions of people's liberties as part of their overall care package.
- Get rid of repeat assessments and authorisations when someone moves between a care home, hospital and ambulance as part of their treatment

The National Mental Capacity Act Forum Chairs Annual Report 2017 is full of ideas and examples of good practice around MCA and developments/schemes that are being put in place. It is easy to use and you can dip into different sections relevant to your role, for example supporting people to stay in their own home, supporting carers, and clinically assisted nutrition and hydration.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/708149/nmcf-annual-report-2017.pdf

For more information on MCA/DoLS, you may like to read the CCC, LGSS and LGSS Law Ltd quarterly MCA/DoLS newsletter for health and social care professionals, which has lots of useful links and case law updates:

<https://ccc-live.storage.googleapis.com/upload/www.cambridgeshire.gov.uk/residents/working-together-children-families-and-adults/MCA%20DoLS%20Newsletter%20spring%202018.pdf?inline=true>

If you have any ideas for items for the newsletter, on MCA/DoLS related topics please send them to: James Codling – MCA/DoLS Training and Development Manager CCC (LGSS) – james.codling@cambridgeshire.gov.uk

Spotlight on... The Tudors, Residential Care



Ronnie Lane

In June of this year, The Tudors, a residential care home in Peterborough, was rated as Outstanding by CQC. Their manager, Ronnie Lane, and Unit Manager Cara Limbrick told us about some of their initiatives and best practice which helped them achieve this.

Ronnie said that he and his team are always looking for the next thing they can improve, to make life better for their residents, and then they make a plan for how to make it happen.

He explained that he is the Safeguarding Lead for the service, but that staff (and residents/families) have access to information and know what to do if he isn't around, and he regularly tests them on this. He said that they went through a time when they had to raise a few safeguarding concerns and that led to them being over cautious and anxious about when to involve other services such as the GP, but now, having worked with partners such as the local authority and the district nurse team, they are confident about when to ask for help and in the safeguarding process. He said the support from their district nurses has been fantastic and this has an impact on the care of their residents.

They have a number of residents who have been with them a long time, and inevitably this has meant some residents have been with them when they have died. In response to feedback from families and staff they have now introduced an "end of life" trolley – stocked with things that family members will find useful while they are with their loved one, often not going home for long periods, such as refreshments and toiletries, and also things like mouth wipes for the resident. Ronnie says this is a small thing that can make families more comfortable during a difficult time.

Ronnie has a strict safer recruitment process in place, with regular checks and audits on different aspects of care. He encourages staff to take on 'lead role' responsibilities. These included dignity; nutrition and hydration; infection control; dementia; end-of-life, falls and engagement. There is a 'staff champion' who's role is to look for additional training to bring new and creative ideas into the service and to challenge existing practices. The benefit of this was to motivate staff to find ways to improve the lives of people at the service. For

example, Ronnie and the Dementia Champion have implemented 'virtual reality' training to help staff have a better understanding of what it is like to live with Dementia – they have gone on to use this method for other conditions such as loss of sight, and they have shared this with families so they can have a better understanding too.

We are always pleased when providers come up with creative, least restrictive solutions for service users - this improves their quality of life while keeping them safe, and working in their best interests"

As a Best Interest Assessor it is refreshing to go into a home that is being proactive and working with their residents as individuals to find solutions to meeting different needs rather than taking a blanket one size fits all approach

Residents are encouraged to maintain their independence and make their own choices. Cara said that when looking at requests made by residents, they try to work out how something can be done, rather than look for why it can't – for example they recently had an outing to a local park and residents wanted to use the play equipment, so the staff enabled them to do so safely, rather than prevent them from having fun.

They also adopt this approach when working with the residents who are subject to DoLs (Deprivation of Liberty Safeguards) – they work to find the least restrictive and creative solutions, rather than trying to control all behaviours. They currently have a gentleman resident who has Dementia, who had kept trying to leave the home (when it was unsafe for him to do so), and they have found a way for him to work with their handyman to keep him safely occupied on a project which holds his interest. For another resident who had been a typist during her working life they located an old typewriter for her, she enjoyed using and it kept her busy.

Ronnie credits his staff, the residents and their families for their success, but also praises the local community and partners such as the District Nurses, and the DoLS team.

For information on the ratings of other care service providers across Cambridgeshire and Peterborough, or how the CQC inspect care service providers, please visit the CQC website <https://www.cqc.org.uk/>

National Publications – Reports of interest:

Mental health: how do you know your council is doing all it can to improve mental

Local government makes a vital contribution to promoting good mental health in individuals and communities. The main ways this happens are through:

- system-wide leadership through health and wellbeing boards (HWBs)
- public health responsibilities to promote mental wellbeing and prevent poor mental health throughout the life course
- statutory duties and powers related to mental health for children and young people and for adults
- the overview and scrutiny of mental health provision.

Even with the extremely poor financial situation, many local areas are maximising their opportunities by working smartly and imaginatively with partners to promote mental wellbeing.

For more information:

https://www.local.gov.uk/sites/default/files/documents/22.27%20-%20Mental%20Health%20Must%20Know_02.pdf

Tackling gambling related harm – a whole council approach

Harmful gambling is increasingly cited as a public health issue which requires a broad response; that is to say, traditional approaches that focus on single interventions do not tend to work at a population level.

Harmful gambling is a complex problem with a large number of different but often interlinked factors - no single measure is likely to be effective on its own in addressing it.

This publication provides an overview of problem gambling, and how councils can begin to try to help local residents who are impacted by it. It includes

research which has found evidence to support suggestions that the following groups are more vulnerable:

- children, adolescents and young adults (including students)
- people with mental health issues, including those experiencing substance abuse issues (problem gambling is often 'co-morbid' with these substance addictions)
- individuals from certain minority ethnic groups, such as Asian/Asian British, Black/ Black British and Chinese/other ethnicity
- the unemployed
- the homeless
- those with low intellectual functioning
- problem gamblers seeking treatment
- people with financially constrained circumstances
- those living in deprived areas.

Individuals experiencing harm from gambling, or their families or carers, rarely present to health or social care services with problem gambling as their presenting condition, and it can manifest in a range of different ways, including physical and mental health problems, relationship breakdowns as well as social care and financial issues.

For more information:

https://www.local.gov.uk/sites/default/files/documents/Tackling%20gambling%20related%20harm_LGA_10%202023.pdf
Home Office – Updated 04/05/2018

Home Office

Modern slavery is a heinous and often hidden crime. It includes slavery, servitude, forced and compulsory labour and human trafficking. The impact can be devastating for the victims. In 2016, 3,805 potential victims were identified and referred in the UK. In the year to March 2017 the police in England and Wales recorded 2,255 modern slavery crimes. However, many more crimes and victims go undetected.

The Home Office have produced and updated their modern slavery training resource page - this resource

is designed to share examples of training products available to public sector professionals and other individuals that might come across victims to help raise awareness, better spot the signs and increase confidence in reporting modern slavery when potential cases are encountered.

Increased awareness and reporting helps law enforcement to tackle the perpetrators of modern slavery as well as protecting victims.

This resource contains basic awareness raising materials. For many professionals more advanced or bespoke training will be appropriate and the materials here are not intended to be the extent of the training required by any sector.

For more information:

<https://www.gov.uk/government/publications/modern-slavery-training-resource-page/modern-slavery-training-resource-page>

Changes to CQC guidance for providers

The Care Quality Commission (CQC) has updated its guidance on how it monitors, inspects and regulates adult social care services. The key updates concern:

- How CQC will inspect community services
- How CQC provides feedback at the end of a site visit
- Guidance on its approach to services repeatedly rated as 'requires improvement'

[Click here to read more.](#)

Adult inpatient survey 2017

The national survey shows some improvements in people's hospital experiences but highlights concerns around discharge and inequalities for those with mental health conditions

The majority of people who stayed as an inpatient in hospital were happy with the care they received, had confidence in the doctors and nurses treating them

and had a better overall experience, according to a national survey from the Care Quality Commission (CQC).

However, survey respondents were less positive about arrangements and information received when leaving hospital, and those with a mental health condition reported a poorer than average experience across most question areas, repeating a trend found in previous patient surveys.

For more information - www.cqc.org.uk/surveys

Driving improvement: Case studies from nine adult social care services

CQC interviewed nine adult social care services that had achieved a significant improvement on their rating.

They spoke to a range of people at each service. This included people who use services and their families, registered managers, providers and owners, care staff, administrative and other staff, commissioners and social workers.

The experiences of the services show that improvement in adult social care is possible. The nine case studies highlight some clear actions that other providers can use to help them learn and improve.

For more information:

https://www.cqc.org.uk/sites/default/files/20180607_drivingimprovementasc_report.pdf

Individuals who have made a difference

As CQC's contribution to the celebrations of 70 years of the NHS, they have brought together stories highlighting individuals who made a significant impact on the care people receive.

While it's the NHS that's celebrating a birthday, the people working alongside it in adult social care have also played a vital and integral role.

This collection of short case studies is part of a series highlighting the work that individuals - from volunteers, to front line staff to senior leaders - have done to deliver great services across [acute](#) and [mental health](#) NHS trusts, [primary care](#) and [adult social care](#).

For more information:

https://www.cqc.org.uk/sites/default/files/20180629_dringimprovementnhs70_asc.pdf

The Department for Digital, Culture, Media & Sport and the Home Office

The Department for Digital, Culture, Media & Sport and the Home Office have published an overview guide to the **Data Protection Act 2018**. Schedule 18 of DPA (2018) covering data sharing for Safeguarding of children and of adults at risk.

[Click here to read more](#).

[Click here for the Data Protection Act 2018](#).

Public Health England (29 May 2018)

Public Health England (PHE) have published a dementia guideline - *Health matters: midlife approaches to reduce dementia risk*.

[Click here to read more and the guideline](#).

Also of interest is National Institute for Health and Care Excellence's (NICE) guideline on *Mental health problems in people with learning disabilities: prevention, assessment and management*.

[National Institute for Health and Care Excellence](#).
[Mental health problems in people with learning disabilities: prevention, assessment and management](#).

National Mental Capacity Forum: Chair's annual report

Professor Baroness Finlay of Llandaff, Chair of the National Mental Capacity Forum has published her annual report for 2017.

Professor Baroness Finlay of Llandaff writes '*The last year has seen the 10th anniversary of the Mental Capacity Act 2005 (MCA) being implemented in October 2007. This anniversary was marked by many teams across England and Wales who work with the MCA on a daily basis. The second year of the National Mental Capacity Forum has seen continuing progress in embedding the principles of the MCA, raising awareness of its wide application and in developing tools to promote the Act and its workings. Notable work in the financial and banking sector has been the widespread development of guidelines and accompanying training for front line staff on providing services to people who are vulnerable.*'

[Click here to see the report](#).

SAR Library – briefing note

Research in Practice for Adults (RiPfA) and SCIE are pleased to announce that the Safeguarding Adults Review Library is now live. This contains reports and associated resources to support those involved in commissioning, conducting and quality assuring Safeguarding Adults Reviews (SARs).

The aim of the repository is to maximise the value of individual SARs through (a) supporting the quality of individual SARs and (b) enabling more widespread and effective use of the learning from SARs.

Commissioned by the Department of Health, the repository was developed jointly by RiPfA and the (SCIE), working closely with colleagues from the sector.

Preliminary resources include:

The repository of SARs reports is the first opportunity that the sector has had to share the learning from SARs in one place. SARs are a statutory requirement for Safeguarding Adults Boards and can inform adult safeguarding improvement. They can also identify what is helping and what is hindering safeguarding work.

To access the resources you need to register for a free MySCIE account or log into an existing account then follow the link.

Cases of interest:

Review published by Cumbria SAB (3 June 2018)

Cumbria Safeguarding Adults Board has published the findings and learning from a Safeguarding Adults Review (SAR) by Margaret Flynn into incidents of physical, sexual and emotional abuse of residents in a Cumbrian nursing home, **Beacon Edge**.

Beacon Edge was owned and run by BUPA Care Homes (CFC Homes) Limited as a specialist dementia home, providing care and support for up to 37 people with dementia type illnesses. The nursing home is now closed.

The abuse was highlighted by a newly appointed member of staff who observed disrespectful and cruel behaviour towards residents by an existing member of staff during her first night shift. The newly appointed worker was 'shadowing' two members of the care staff

throughout this shift and on challenging them about their behaviour, was told 'it's just a laugh'.

Safeguarding alerts were reported to Adult Social Care the next day which resulted in a thorough and robust investigation taking place, which was led by the Police. Extensive evidence was retrieved from the mobile phones of three members of the care staff who were subsequently arrested and charged with s.44 offences under the Mental Capacity Act, and one carer with an additional charge of sexual assault. The investigation identified a number of victims of the abuse within the care home by the three workers. All three care workers were subsequently prosecuted and all received custodial sentences.

Margaret Flynn is the author of the review into the Winterbourne View private hospital which was published in September 2012.

[Click here for a Learning Brief.](#)

[Click here for the full report.](#)