

Safeguarding Adults Reviews (SARs) are a statutory requirement for Safeguarding Adults Boards (SABs). Safeguarding adult practice can be improved by identifying what is helping and what is hindering safeguarding work, in order to tackle barriers to good practice and protect adults from harm.

Adult Z

Adult Z was 78 years old when he passed away in 2018. He had been diagnosed with COPD and Metastatic Lung Cancer, he was also known to suffer from anxiety and panic attacks which had a significant impact on his daily life. Adult Z was considered to be resistant to accepting support and 'unkempt'. Family members regularly contacted services to express concerns about Adult Z and to seek support for him.

Themes that emerged from the Safeguarding Adult Review in to Adult Z;

- ◆ Issues with multi-agency communication
- ◆ Quality of ASC assessments
- ◆ Lack of professional curiosity
- ◆ Lack of risk assessments by any agency involved
- ◆ Investigation of reasons for non-engagement
- ◆ Unidentified and unmet needs of Adult Z
- ◆ Lack of escalation
- ◆ Lack of application of the Mental Capacity Act 2005 and any associated capacity assessments

Agencies Involved; CCG, Buckinghamshire Council Adult Social Care/Contracts Team, Prevention Services, Community Housing, SCAS, British Red Cross, Buckinghamshire Healthcare NHS Trust

Good Practice

Making safeguarding personal is:

- A personalised approach that enables safeguarding to be done with, not to, people.
- To work with the person to set safeguarding outcomes which have meaning to them.
- Practice that focuses on achieving meaningful improvement to people's circumstances rather than just an 'investigation' and 'conclusion'.
- To prevent harm and reduce the risk of abuse or neglect to adults with care and support needs.
- To safeguard individuals in a way that supports them in making choices and having control in how they choose to live their lives.
- To promote outcomes based approach in safeguarding that works for people resulting in the best experience possible.
- To raise public awareness so that professionals, other staff and communities as a whole play their part in preventing, identifying and responding to abuse, harm or neglect.

Recommendations

The health and social care architecture in Buckinghamshire should consider how more effective communication might take place with integrated intelligence systems in situations of safeguarding (ICS)

Individual agencies should consider and evaluate why risk assessments are not being utilised in practice

Agencies should ensure that communication practice with clients who have known sensory impairments require reassessment

Given the noted misunderstanding relating to 'appropriate safeguarding referrals', and appropriate 'thresholds' the Buckinghamshire Safeguarding Adults Board should consider reviewing the guidance followed by a county wide communication strategy with partners to clarify misunderstandings

Professional curiosity should be promoted in ongoing CPD for all staff and professional complacency challenged

Seek assurance that Buckinghamshire ASC has reviewed and revised it's procedures to ensure all Social Care assessments are holistic and outcome-focused

A protocol should be designed to assist staff to 'risk manage' in situations where clients are reluctant (or refuse) services and risks remain

The Buckinghamshire Safeguarding architecture should consider the development of a specialist 'Self-Neglect Team. Business case to be developed

Who are we and what do we do?

[About the BSAB - Buckinghamshire Safeguarding Adults Board \(buckssafeguarding.org.uk\)](https://www.buckssafeguarding.org.uk)

Link to the Adult Z report;

[Safeguarding Adult Reviews - Buckinghamshire Safeguarding Adults Board \(buckssafeguarding.org.uk\)](https://www.buckssafeguarding.org.uk)