

CHSAB Annual Report 2023–24

**People should be able to live a life free from harm
in communities that are intolerant of abuse, work
together to prevent abuse and know what to do
when it happens**

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Introduction by Dr Adi Cooper

I am very pleased to introduce the Annual Report of the City and Hackney Safeguarding Adults Board 2023/24 (the Board), which is a key statutory duty. As the Independent Chair of the Board, I am extremely grateful to all partners for their continued engagement and support to safeguard people living in the City and Hackney in the context of ongoing challenges in responding to changing safeguarding risks and needs. The relationships between the Board's partners continue to be positive and collaborative, and appropriately challenging when seeking assurance that we are all meeting our safeguarding responsibilities.

The annual report describes what the Board has been doing as well as what individual Board partners have achieved during the year. It provides a picture of who is safeguarded and why. This helps to inform the Board's annual strategic plan and priorities for 2024/25. There continues to be learning from Safeguarding Adults Reviews that provide a focus for improvements in safeguarding practice and processes. This is reflected in the annual strategic plan and out priorities for 2024/25. There continue to be significant contextual factors that impact on people's lives and potentially increase safeguarding risks, such as the ongoing increases in the cost of living and the long-term legacy of the Covid-19 pandemic. The Board and its members continue to address these challenges and seek ways in which residents experiencing risks of abuse or neglect can be supported and protected.

I want to use this opportunity to thank all the practitioners and staff from the wide range of partner organisations and agencies, volunteers and residents in City and Hackney who are committed to keeping people safe in the City and Hackney. They have supported and continue to support people at risk of abuse or neglect, often without recognition, and make a huge and significant positive contribution to many peoples' lives.

Dr Adi Cooper OBE,
Independent Chair, City and Hackney Safeguarding Adults Board

What is the Safeguarding Adults Board?

Role

The City and Hackney Safeguarding Adults Board (CHSAB) is a partnership made up of both statutory and non-statutory organisations. A range of organisations attend the Board including health, social care, housing, criminal justice and fire services, voluntary sector and residents who use services in the City of London and Hackney. The role of the CHSAB is to assure itself that organisations based in the City and Hackney have effective safeguarding arrangements. This is to ensure that adults with care and support are protected and prevented from experiencing abuse and neglect.

The CHSAB has three core legal duties under the Care Act 2014:

- 1) Develop and publish a Strategic Plan outlining how the Board will meet its objectives and how partners will contribute to this
- 2) Publish an Annual Report detailing actions that the Board has taken to safeguard the community and how successful it has been in achieving this
- 3) Commission Safeguarding Adults Reviews (SARs) for any cases that meet the criteria.

In addition to this, the CHSAB is able to lead or undertake work in respect of any other adult safeguarding issue it feels appropriate.

Membership

The CHSAB has three statutory partners: the Local Authority, Integrated Care Board (health), police, and a wide range of non-statutory partners.

Below is a full list of our partners and their attendance at our quarterly Board meetings:

2022-23	
Independent Chair	100%
London Borough of Hackney Adult Social Care	100%
Cabinet Member for Health, Adult Social Care, Voluntary Sector and Culture, London Borough of Hackney	50%
North East London Integrated Care Board	75%
Homerton University Hospital	100%
Barts Health NHS Trust	75%
East London NHS Foundation Trust	75%

2022-23	
London Fire Brigade	25%
Metropolitan Police	100%
City of London Police	50%
Hackney Council Voluntary Service	100%
London Borough of Hackney Housing	50%
London Borough of Hackney Benefits and Homeless Prevention	100%
Age UK East London	75%
Turning Point	75%
Older People's Reference Group	75%
Department for Work and Pensions	100%
City and Hackney Public Health	50%

Principles

The Board's strategy and annual strategic plan is underpinned by the six safeguarding principles:

- Prevention** – It is better to take action before harm occurs.
"I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help."
- Empowerment** – People are supported and encouraged to make their own decisions and informed consent.
"I am asked what I want as the outcomes from the safeguarding process and this directly informs what happens."
- Proportionality** – The least intrusive response appropriate to the risk presented.
"I am sure that the professionals will work in my interest, as I see them and they will only get involved as much as needed."
- Partnership** – Local solutions through services working together and with their communities. Services share information safely and each service has a workforce well trained in safeguarding. Communities have a part to play in preventing, detecting and reporting neglect and abuse.
"I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me."

- **Accountability** – Accountability and transparency in delivering safeguarding.
“I understand the role of everyone involved in my life and so do they.”

- **Protection** – Support and representation for those in greatest need.



*“I get help and support to report abuse and neglect.
I get help so that I am able to take part in the
safeguarding process to the extent to which I want.”*

Board Governance

Subgroups

The Board has a number of subgroups in place to ensure the delivery of its annual priorities:

Quality Assurance:

The group examines quantitative and qualitative data to help identify safeguarding trends and issues across the City and Hackney. This information is provided to the Executive group and helps inform the work and priorities of the Board.

Safeguarding Adults and Case Review:

The group fulfils the Board's s44 Care Act duty by considering requests for a Safeguarding Adults Review (SAR). The group reviews referrals and makes recommendations to the Chair when it considers a SAR is required. It also monitors the embedding of action plans from reviews that have an adult safeguarding theme to them.

SAR action plan task and finish group:

This group was designed to ensure that the actions from our most recent SARs are completed in a timely manner. The group also identified how to ensure that learning from SARs has a long term impact on improving practice.

Workforce Development:

This group meets periodically to review and identify training and development opportunities in respect of adult safeguarding.

City of London Adult Safeguarding Committee:

The City of London has a Safeguarding Adult Committee, which focuses on safeguarding issues affecting residents living in the City of London. The Committee meets quarterly, where it allows partners to share their responses and responsibilities in relation to different safeguarding issues and provides updates in respect of their progress against the Board's strategic priorities.

Anti-social behaviour and safeguarding:

This group was set up to improve the multi-agency response to people both perpetrating or experiencing anti-social behaviour. The role of the group was to ensure that a proportionate response is provided to residents as well as support frontline professionals in responding to anti-social behaviour. The group agreed to meet annually

to review the impact of particular workstreams overseen by the group.

The work of the sub and task and finish groups is overseen by the Executive Group, whose role it is to monitor the progress of work undertaken by the groups and identify any other work the Board needs to undertake. The Executive group is attended by statutory partners, the Independent Chair and the Board Manager.

There are also quarterly CHSAB meetings attended by the whole partnership, this allows for discussions on key safeguarding issues, networking and identifying further opportunities for partnership working.

CHSAB strategic links:

The CHSAB has links with partnerships and boards working with residents in the City of London and Hackney, including: the City and Hackney Safeguarding Children's Partnership, Community Safety Partnerships and Health and Wellbeing Boards. The Board will also engage with other partnerships where there may be opportunities to work collaboratively or provide an adult safeguarding expertise.

City of London Adult Safeguarding Committee

The City of London has a Safeguarding Adult Committee, which focuses on safeguarding issues affecting residents living in the City of London. The Committee meets quarterly, where it allows partners to share their responses and responsibilities in relation to different safeguarding issues and provides updates in respect of their progress against the Board's strategic priorities.

Budget

In 2023/24 the budget was £231,137 from the partners listed below:

Partner contributions to the CHSAB	CHSAB Partnership 2022/23 (£)
City of London Corporation	(28,875)
East London NHS Foundation Trust	(27,500)
Homerton University Hospital	(12,000)
NHS City and Hackney CCG	(20,000)
Metropolitan Police Authority	(5,000)
Barts Health NHS Trust	(5,000)
City of London Police	(4,400)
LB Hackney	(127,352)
Total income	231,137

The expenditure for the Board in 2023/24 was £178,779

The remaining £52,348 were transferred to the reserve pot.

Supporting the CHSAB

The CHSAB has a full-time Board Manager and Business Support Officer to manage the work of the Board.

CASE STUDY 1:



London Borough of Hackney Adult Social Care

Ben is a 54 year old man living in Temporary Accommodation arranged by the Hackney Benefits and Homelessness Prevention Team. A safeguarding concern was raised by his support worker at Thames Reach for self neglect. Ben has open sores on both his legs and he was refusing treatment. He would not attend hospital because of a previous negative experience. His sores were becoming necrotic and a safeguarding concern for self-neglect was made. A safeguarding enquiry was commenced. Contact was made with The Greenhouse Surgery, his recovery worker at Turning Point, Community nursing services and Thames Reach to identify what support Ben could access. A mental capacity assessment was completed regarding his capacity to consent to treatment.

Ben was identified as having the capacity to decide on his treatment options. He consented to the doctor from the Greenhouse supporting him with the treatment of his sores and engagement with District Nursing. He also agreed to the support of a care worker visiting him once a day to assist him in maintaining his personal hygiene and managing his home environment..

CASE STUDY 2:

North East London Integrated Care Board

Tommy had a bleed in his brain in December 2016 and as a result he spent six months in hospital for treatment and rehabilitation. He experienced brain damage that led to cognitive impairment. He returned to his family home with a small care package but predominantly to be supported by his wife. Tommy struggled to readjust and was frequently frustrated by his ability to complete everyday tasks. He experienced bouts of confusion that led to aggression and in some instances verbal and physical aggression towards his wife. During a crisis moment, Tommy's wife phoned the police to protect her safety. This phone call triggered a safeguarding response for Tommy and his family, by the police liaising with the Continuing Health Care team.



...He was assessed as having capacity to decide on his accommodation and care needs...

Initially Tommy's wife was supported with emergency alarms. However there were continuing incidents of threats and escalating levels of violence. At the same time, Tommy no longer wanted to engage with care agencies or support in his family home. In partnership with the Continuing Health Care team, options for alternative accommodation were discussed with him and his family. Tommy now lives in a brain injury supported living scheme with a good understanding of his behaviours and triggers. His family visit several times a week, and feel confident to do so as the staff are present in the event of a sudden change in his mood. He was assessed as having capacity to decide on his accommodation and care needs, and consented to remaining living in his flat with a 24 hour support worker and suitable restrictions in place.

CHSAB Achievements for 2022/23

Safeguarding Adults Review (SARs)

- The Board commissioned two discretionary Safeguarding Adults Reviews throughout the year.
- The JL discretionary SAR was commissioned in June 2023 to complement a local learning review by Adult Social Care services in Hackney.
- A practitioners event for JL was held in December 2023, whereby key lines of enquiries were explored and initial learning identified. The 7 minute briefing for JL was published on the Hackney SAR pages online.
- The FN discretionary SAR was commissioned in November 2023, but progress on this SAR stalled due to capacity issues. Work on the FN SAR resumed from April 2024, with plans to publish the SAR towards the end of 2024.
- A learning event for the John SAR was held in June 2023, whereby the key themes from the SAR were discussed amongst relevant agencies and a multi agency action plan was drafted in line with the recommendations of the review.
- The SAR action planning subgroup continued to meet throughout the year, to measure how well learning from published SARs have been embedded into practice.

Training and engagement with professionals

- The Board commissions a package of training for frontline line staff working across the City and Hackney on a yearly basis. This year the Board commissioned 8 safeguarding courses delivered quarterly throughout the year.
- Courses on offer included the following:
 - Safeguarding awareness training (webinar).
 - Trauma informed approaches to safeguarding (in person).
 - Safeguarding, Self-neglect & Hoarding (webinar).
 - Safeguarding Adults Workshop for Manager & Safeguarding Leads (webinar).
 - SAMs – Exploring the Roles, Responsibilities and Expectations of Safeguarding Adult Managers (webinar).
 - SAE – Undertaking S42 Safeguarding Enquiries (webinar).
 - Safeguarding, mental health and social isolation (webinar).

- In total, over 150 people attended the various different training sessions on offer.
- The Board published quarterly bulletins for frontline staff providing them with updates on adult safeguarding issues.

Safeguarding Adults Week

- The Board organised a series of events throughout the whole month of November, in recognition of Safeguarding Adults Week.
- These included events on intergenerational domestic abuse, substance misuse, self neglect, homelessness and mental health. In total, over 120 professionals attended these sessions.
- The City and Hackney Safeguarding Adults Board also helped organise a joint North East London conference, which focused on key learning and themes arising from Safeguarding Adults Review.
- The conference was well received, with over 100 professionals across the North East London boroughs joining on the day.

Quality Assurance

- The Board undertook a self assessment using the Safeguarding Adult Partnership Assessment Tool, which was analysed by the Board Manager and helped inform the strategic priorities during the partnership development day in March 2023.
- The Independent Chair of the Board continued to meet with Board partners, in order to ensure that all safeguarding issues affecting residents were identified and addressed and that engagement with Board partners continued to increase. These check-ins also helped resolve any issues partners experienced within the system, and served to improve relationships with key stakeholders.

Multi-agency working

- There was Board attendance at a number of partnership groups including the suicide prevention group, strategic vulnerability board, community safety officer group and domestic abuse work streams.

Anti-Social Behaviour and Safeguarding Task and Finish Group

- The group reconvened in April 2023 to review the impact of the escalation protocol which was drafted as well as the document which mapped the existing panels within Hackney. Both these work streams were promoted widely at the time and were deemed to have led to positive outcomes across the partnership.



CASE STUDY 3:

HealthWatch

Eric was known to the HealthWatch Engagement & Co Production Manager as a volunteer patient representative. He attended various free activities in the community and volunteered helping refugee migrants. Eric himself is a refugee who found safety in the UK, after travelling here through a perilous route at the hands of people Traffickers. It was observed that his appearance has dramatically declined and that his normal chatty demeanour became very withdrawn. It was also spotted he was hungry all the time. A friendly chat with the patient first revealed he had been sleeping rough, due to an illegal eviction from a rogue landlord.

By raising this safeguarding concern, HealthWatch were able to get Eric into immediate, safe temporary accommodation, assist him with benefit & housing applications and support him getting online and trained digitally on the phone and laptop. This meant he could speak to his wife again who is still overseas.

A cohesive multi agency approach to Eric's case has resulted in him having permanent accommodation, a part time job, attending an ESOL course, much better health & financial prospects and increased social connectivity in the borough. An early concern being raised prevented the situation from escalating any further and the right support being put in place for Eric.

CASE STUDY 4:

Barts Health NHS Trust

Veronika was suffering from a chronic cardiac condition, physical disability as well as some cognitive impairment. She reported to the psychologist that she had concerns about her relationship with her mum, who would constantly undermine her and pretend to be Veronika to make health appointments which she would then miss. When she tried to create some distance from her mum, her mum reported her to adult social care saying she was self-neglecting. Veronika did not identify the abusive behaviour and emotional abuse from her mum, so advice was given to her psychologist to help support her in identifying this form of abuse and engage with the support that was provided.

Veronika subsequently consented to a referral to Adult Social Care, which resulted in more support for herself, whilst the GP was contacted about the mum's interference with care. The relationship with the psychologist continued to be a positive influence, who subsequently reported positive changes in Veronika's confidence and emotional health.

This case demonstrates the importance of supporting adults to identify and understand emotional abuse, which can sometimes be hard to identify especially when coming from a family member.

...reported positive changes in Veronika's confidence and emotional health....



Resident engagement

- Four safeguarding champions were trained to deliver 90 min sessions with community groups. Champions have delivered 3 sessions within the community across 2023-24. The Board is continuing to promote this across Hackney and City.
- The Board is committed to engage with people with lived experience, in order to identify how to improve safeguarding services for residents and ensure services are person centred. This remains a key priority for the Board, and plans to facilitate focus groups with service users throughout 2024 in order to ensure their voices can influence all aspects of the Boards work.

Engagement and partnership work

- The Board is part of a wider range of different stakeholder groups that includes the:
Carers Partnership Board, Suicide Prevention Board and domestic abuse work streams.

National work

- Members of the Board attend a number of national work streams including, the London Safeguarding Adults Board, SAB Chairs Network, SAB Manager Networks and Local Government Association and the Association of Directors of Adult Social Services Safeguarding worksteam.
- The CHSAB participated in the Safeguarding Adults Insight Survey from the LGA/ADASS, which sought to identify the impact of winter pressures and the cost of living crisis on safeguarding activity. The London Borough of Hackney was also profiled in a webinar organised by the LGA/ADASS where good practice was shared.
- Members of the Board have presented at national safeguarding events that have occurred across England.



...Under Aaron's direction, a blitz clean was undertaken and fire detection equipment installed...

CASE STUDY 5:

City of London Corporation Adult Social Care

Aaron is a 47-year-old man living alone in privately rented accommodation. A referral was made to Adult Social Care by Tenancy Support following concerns around hoarding and self-neglect potentially leading to eviction.

A social worker visited and determined the property to be level 5 on the clutter image rating scale. This was discussed with Aaron who was struggling with his mental health and felt unable to make positive change on his own. A referral was made on his behalf to the Hoarding Self-neglect and Fire Risk panel; where a person-centred multi-agency risk plan was put in place involving Social Care, London Fire Brigade, Tenancy Support, Mental Health services and Environmental Health. Under Aaron's direction, a blitz clean was undertaken and fire detection equipment installed. A full Care Act assessment was completed with Aaron, and ongoing weekly specialist autism support was commissioned to support him in effectively maintaining his home environment.

Safeguarding Adults Reviews (SARs)

The Board has a statutory duty to undertake Safeguarding Adults Reviews (SAR) under section 44 of the Care Act 2014. The following criteria must be met for a SAR:

1. An adult has died or suffered serious harm.
2. It is suspected or known that it was due to abuse or neglect.
3. There is concern that agencies could have worked better to protect the adult from harm.

The Board is also able to undertake a discretionary SAR under the Care Act, where a case does not meet the threshold for a review but it is considered that there is valuable learning to be gained in terms of addressing abuse and neglect.

In 2023/24, the Board commissioned two discretionary Safeguarding Adults Review.

JL: The discretionary Safeguarding Adults Review (SAR) into the death of JL was commissioned by the City and Hackney Safeguarding Adults Board (SAB) in April 2023.

JL was aged 77 when he died in his flat in February 2022. An inquest held in April recorded that his death was caused by pneumonia, frailty, chronic alcoholism, hyperthyroidism and frostbite. The review recommended strengthening input from housing partners within the Board as well as reviewing the Board's Escalation Policy.

FN: The discretionary Safeguarding Adults Review (SAR) into the death of FN was commissioned by the City and Hackney Safeguarding Adults Board (SAB) in November 2023. The FN had been known to services in Hackney since April 2020. FN was an extremely vulnerable individual who had cancer, and a long history of homelessness, trauma, alcohol misuse and substance misuse. A safeguarding referral was made to Hackney ASC in April 2023 due to concerns about his inappropriate housing, self neglect and inability to manage medication safely. FN experienced numerous hospital admissions and discharges between Dec 2022 and May 2023. FN was admitted to hospital in early May 2023 due to a fall and a head injury and died a few days later. The coroner's report noted his cause of death as 1a) Acute Respiratory Failure, 1b) Combined Opioid and Opiate Use and 2) Metastatic Testicular Seminoma, Hypertension, Chronic Obstructive Pulmonary Disease.

The review is currently still ongoing, with plans to publish the review towards the end of 2024.

CHSAB Strategy 2020-25

Under the Care Act 2014, Safeguarding Adults Boards are required to publish a strategy outlining how it will meet its obligations in respect of adult safeguarding. The Board renewed its Strategy in 2020 and published a five year plan on how it will deliver its goals.

In the forthcoming year (2023/24) the Board will focus on the following priorities:

1. To continue to raise awareness in relation to mental capacity assessment.
2. To engage with the community and voluntary sector to support them to build their confidence in delivering their safeguarding duties and raise awareness of adult safeguarding.
3. To continue to embed engagement with people with lived experience and ensure that they can influence all aspects of the Board's work.
4. To identify and respond to the needs of people who are at the 'edge of care' and may not have safeguarding needs that meet the criteria for section 42(2) safeguarding.
5. To work collaboratively with agencies and partnerships across the City and Hackney to respond to the safeguarding needs of residents.
6. To support frontline professionals to respond to complex issues relating to self-neglect.
7. To deliver and implement recommendations that arise in relation to both local, regional and national Safeguarding Adults Reviews.
8. To ensure that all agencies across the City and Hackney deliver their core duties in relation to safeguarding.

CHSAB Board Partners Safeguarding Achievements

This section outlines the Board Partners main achievements in relation to adult safeguarding for 2023/34:

London Borough of Hackney Adult Social Care

- We developed and published the Self Neglect Toolkit in June 2023, which provided support to practitioners and agencies in identifying self-neglect and hoarding as a safeguarding issue and shape their responses. The guidance aims to help prevent harm to individuals who are at risk of self-neglect and improve consistency of approach across Hackney and the City of London by ensuring that there is a shared, multi-agency understanding and recognition of the issues involved in working with individuals who self-neglect, there is effective multi-agency working and practice and individuals are empowered as far as possible to understand the implications of their actions or behaviours and supported to reduce any possible risks arising.
- We have ensured that our safeguarding approach is really person centred and outcome focused in line with the principles of Making Safeguarding Personal. Of the adults who were asked what their desired outcome was, 93% had their desires partially or fully achieved.

City of London Corporation Adult Social Care

- The City of London Homelessness and Rough Sleeping Service worked in conjunction with Adult Social Care in progressing cross boundary working to support homeless adults. The development of a City of London high support hostel in the London Borough of Southwark demonstrated the willingness of both local authorities to work together to find solutions to support one of the most at risk adult cohorts.
- Additionally, the City of London developed and implemented a more robust quality assurance programme across Adult Social Care (ASC) bringing in a full-time focused Principal Social Worker. This enabled a programme of audits across ASC which covered mental capacity assessments, safeguarding rough sleepers, and wider ASC casework. Actions arising from the audits include updating relevant recording forms and Practice Standards, implementation of good practice guidance and development of practice tools. The learning from audits was not focussed solely on action plans but included reflective practice sessions for practitioners across the service.
- The quality assurance programme also included bringing in external auditing, specifically around safeguarding practice which included interviews with social workers. The findings from this audit are being used to inform specific service wide reflective sessions focusing on broader

wellbeing outcomes for the Adult through curious practice around social isolation. A follow up audit is planned for next year to assess the impact of the work.

North East London Integrated Care Board

- The ICB continues to ensure that Adult Safeguarding is threaded through our health commissioning processes, internal activities and governance across the health economy. In this first full year there has been many opportunities to utilise the ICB infrastructure to grow and develop Adult Safeguarding activities. This is particularly relevant in the arena of learning from serious case reviews. A key example of this is the bolstering of the Learning Disability review programme LeDer: Learning from Lives and Deaths. Our recent achievements within this programme include the appointment of permanent and additional reviewers and the delivery of a learning from reviews conference. Alongside the LeDer programme the ICB continued its participation in other Adult Safeguarding enquiries including Safeguarding Adult Reviews and Domestic Homicide Reviews. A key aspect of this work has been the strategic analysis of SARs across NEL, drawing trends and key recommendations to share across all of our partnerships.
- As a statutory partner in Adult Safeguarding the ICB fully engaged in a number of projects and initiatives established to better support integrated safeguarding activity. This includes activities such as securing funding for the establishment of domestic violence trainer roles in health settings; supporting our partners to continually reduce the use of out of borough placements for City and Hackney residents who require residential care placements, and the establishment of a NEL wide information sharing forum to monitor quality issues that might arise in private providers. One such example of this partnership work includes our work in leading the local Refugee health steering group – a working group that sought to ensure that individuals placed in Home Office hotel accommodation will have full access to health and wellbeing resources whilst they live as citizens of City and Hackney. This work included arranging timely access to GP registration, vaccinations and immunisations alongside access to broader health and wellbeing activities. This work flourished as the local authority appointed specific staff to follow on project delivery.
- Finally, a significant development this year was the launch of the Serious Violence Duty - a statutory guidance that asks councils and local services to work together to share information and target interventions to prevent and reduce serious violence. There are specific expectations for ICBs within this guidance and we have already established a number of working groups to ensure that we are compliant to these expectations. A key aspect of this work is the collection of data from our health providers and the development of a coordinated strategic plan. We in the ICB benefit from being part of community safety partnerships in each of our local authority areas and we strive to bring this wider footprint of knowledge to each.



CASE STUDY 6: **City of London Corporation**

Michael moved from Ireland to London as a young man and worked on construction sites throughout his working life. He has heart disease, experienced several infractions, and is dependent on alcohol. He tried to stop drinking to improve his health but started again when he had severe pain on his foot and could not find any other relief.

Safeguarding concerns were raised about his accommodation for many years. In addition to infestations, the flat was also not secure, with the front door in a state of repair.

When Michael was admitted to a London hospital with necrosis on his foot, he had to have surgery. Michael discharged himself earlier than recommended and refused to go back to any hospital; nor did he allow for his dressings to be changed. The risk of sepsis was high due to the environmental risks in his flat and his refusal of care.

Several health agencies worked together in ensuring that Michael had the right support in place. London Ambulance Service questioned if professionals had acted correctly in allowing Michael to self-discharge from hospital without a mental capacity assessment. The community matron coordinated service responses and ensured all information about risk was shared appropriately between hospitals and with community services. An Irish health worker managed to build a good relationship with Michael, which led to him trusting the health service enough to have his remaining foot checked regularly. The Single Persons Homeless project kept working with Michael although he no longer 'met their criteria'. Michael is doing well in his new supported accommodation. He is still not fully adhering to his treatment plan but he is engaging with services and doing much better.

Safeguarding data for 2022/23

The safeguarding data for 2022/23 is presented separately for the City and Hackney. This data is submitted to NHS Digital's Safeguarding Adults Collection, which collects statutory returns on safeguarding.

City of London

49

49 safeguarding concerns were raised.

25 of the concerns led to a Section 42 Enquiry

19 concluded S42 enquiries in 2023-24 compared to **29** the previous year. **52%** of adults were asked about their desired outcomes and they were expressed. **90%** had their outcomes fully or partially met..

Concerns and Enquiries

The trend over the last five years shows, concerns have **increased from 48 in 2019/20 to 60 in 2021/22** and then **slightly decreased to 49 concerns in 2023/24**. The conversion rate has slightly increased from **48% in 2022/23 to 51% in 2023/24**.

Although the concern rate per **100,000** has been increasing in line with the national average in the last seven years, there has been a **slight decline in the last two years from 658 in 2021/22 to 613 in 2023/24**.

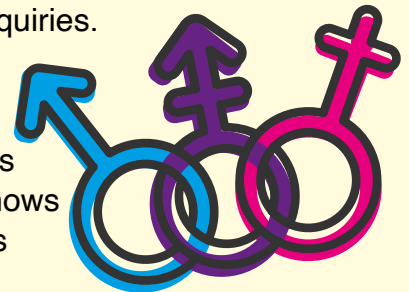


Ethnicity

The population adult structure of the city of London is mostly from the white ethnic background. The data shows the consistency that adults at risk are mostly from the white background. Out of **43** individuals that had a concern in the year, **29** were from a white ethnic background. Of which **16** met S42 enquiries.

Gender

The male population in the City of London Corporation makes up **55%** in the **18+** group in the 2021 Census. The data shows the male clients had slightly more safeguarding concerns this year than female clients which is similar to previous years.



The data shows of the **43** individuals who had a concern during the year 2023-24, **18** were in the **18-64 age** grouping. The remaining 25 individuals were in the **65+** grouping.



Type of Risk

Upon concluding **19** S42 Enquiries, a total of **22** distinct risks were identified. The most prevalent risk noted this year in safeguarding enquiries was Self-Neglect, accounting for **61%** of all cases. This was closely followed by Financial or Material abuse, which constituted **35%** of the risks. Discriminatory abuse, psychological abuse, domestic abuse, physical abuse, and neglect each represented **4%** of the total risks identified.

In terms of the concerns raised during the 2023-24 period, Self-Neglect again topped the list, representing **57%** of all cases. This was followed by Financial or Material abuse at **24%**, and Neglect and acts of omission at **18%**.

Source of Referral and Risk

There was an increase in other referrals by **9%** from the previous year. The 'In line with the national and London average, the data shows **64%** of the client's risk comes from someone known to the individual. This is a decrease from the previous year 2022-23 of **74%**. A slight increase in service providers at **32%** compared to **24%** the previous year.

Location of Risk

The **majority** of safeguarding enquiries related to alleged abuse that happened within the **person's own home**. Two enquiries happened in the community, **1 in the Hospital-Acute and 2** in other locations. The continued increase in cases in people's own home is consistent with national data which identifies that **abuse typically happens within someone's own home**.

Making Safeguarding Personal

There were **19** concluded S42 enquiries in 2023-24 compared to twenty-nine the previous year. **52%** of adults were asked about their desired outcomes and they were expressed. Of which **90%** had their outcomes fully or partially met. **The local management system recording has been improved to capture the outcomes better than in previous years** and there has been some discussions at Safeguarding Adults Board Quality Assurance group around whether further improvements could be made to the form data fields to capture a more in-depth understanding of the MSP data.

London Borough of Hackney

Data has been collated from three different sources for this reporting year.

Concerns and Enquiries

1788

1788 safeguarding concerns were raised

The number of accepted section 42 enquiries is generally in line with the previous two years.

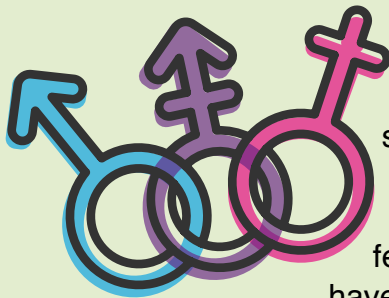


Ethnicity

The proportion of concerns broken down by ethnicity for 2023/24 remains very similar to previous years. The most concerns continue to relate to adults from a White or Black African, Caribbean, or British background, and is generally consistent with the demographic profile of the borough. The proportion without a declaration has **dropped from 18.4% in 2022/23 to 8.5% in 2023/24**; this is primarily due to a better case management system being used now compared to the interim systems used in 2021/22.



Gender



The proportion of concerns split by gender remain very similar to previous years, **with females amounting to 54.1% of concerns**. This is consistent with the 2021 census for Hackney, which shows the borough has more females compared to males, and therefore expected to have a higher proportion of concerns.



The highest number of concerns being raised in respect of age has remained the same as last year; **those between the ages of 26-64**. This contrasts with the national picture of safeguarding, which highlights that abuse is typically experienced by older adults. This contrasts with the national picture of safeguarding, which highlights that **abuse is typically experienced by older adults**. The younger demographic within Hackney could be an explanation for this.

Type of risk

The most common form of abuse reported **continues to be self-neglect, which makes up 26.9%** of all concerns reported. **Neglect and Acts of Omission and Financial or Material abuse make up the second and third most common types of abuse**, in line with what we saw over the past two years.



Source of Referral and Risk

The data shows that the source of risk is most likely to be someone known to the individual, **which makes 81% of concerns referred** to adult safeguarding. There has been a decrease in the service provider being identified as the source of risk, **from 15% in 2022/23 to 8.8% in 2023/24**.

The number of safeguarding concerns from Hospitals remains the most common source of referrals, amounting to 24.1%. There continues to be a consistent number of concerns raised by friends and family, which is encouraging for the Board and evidence of the engagement work done with many community groups over the past couple of years.

Location of Risk

The data continues to show that most abuse occurs within the home. This could **correlate with the increase in the cases of self-neglect**, which tend to occur within people's own homes.

Making Safeguarding Personal

In **89% of concluded section 42 enquiries**, adults were asked what their desired outcome was. This is **slightly down from the previous year's figure of 85%**.

Of the 89% that were asked, 92% had their desires partially or fully achieved (up from 88% last year). This information is helpful to help ensure that safeguarding is person-centred and the process focuses on the wishes and needs of the individual.

East London NHS Foundation Trust (ELFT)

249 safeguarding concerns were raised for 2023/24,
There were **95** accepted section 42 enquiries, which is generally in line with the previous two years.

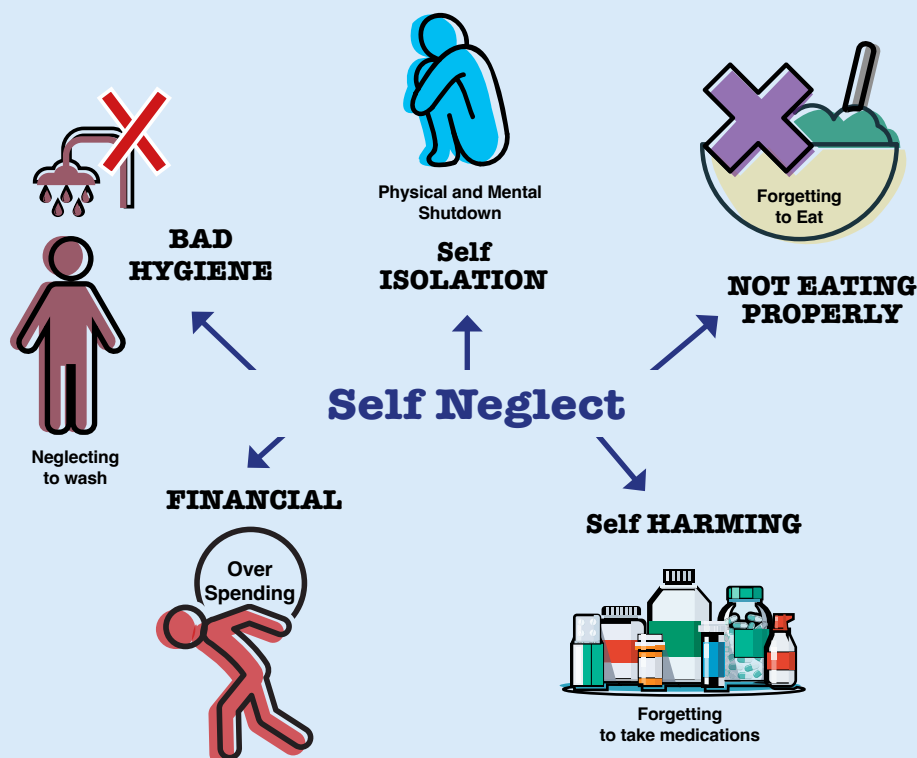
A large number of safeguarding concerns received by ELFT are raised in relation to mental health crises and have often been acted upon when the safeguarding concern is received.

This might explain the number of concerns that are not registered as s42 enquiries. It is worth noting that the level of complexity being managed in the communities has risen sharply within mental health services over the last couple of years, and many issues often in the safeguarding domain are managed under care coordination in community teams.



Type of Abuse

Financial or Material Abuse amounted to **27%** of all concerns, with **self neglect at 18%** and **physical abuse at 14%**. Since the pandemic, there have been increasing reports of financial abuse and self-neglect in the community. The high levels of physical abuse will be impacted by incidents of violence on the psychiatric wards and mental health crisis.





CASE STUDY 7:

Department for Work and Pensions

A 59 year-old male with eye condition and reading/writing difficulties was referred into Advanced Customer Support by a Universal Credit work coach, who had lost contact with the customer since July 2022. Multiple contact attempts were made including by phone, letters and with DWP Visiting Officers. The customer was a phone claim customer and notes on the system stated that he lived alone with no family support and there was no indication that he was engaging with any other professional organisations. His claim was at risk of being suspended due to non-engagement. The customer was possibly in financial hardship as DWP did not know if he had been collecting or cashing his payment vouchers. There were also concerns of self-neglect as the social worker had also noted no engagement since April 2022 despite multiple visits. The support worker, rent officer and Neighbourhood Watch team facilitated visits to the customer, who responded to a calling card and attended the Hackney Council office. He advised that he was unaware of the job centre's contact. Hackney supported him with attending a job centre appointment and contact remains consistent as of today. DWP have ensured contact details are kept up to date and that his vulnerabilities are noted on the system.



...eye condition and reading/writing difficulties was referred into Advanced Customer Support by a Universal Credit work coach,...

Homerton University Hospital NHS Foundation Trust

- Over the past 18 months there have been a number of incidents, serious incident review meetings and investigations that have identified a need for a multi-disciplinary forum to support staff to manage patients with complex behavioural, neurological, psychological and social needs. The complex patient panel has been established to provide staff with responsive, senior multi-disciplinary support to manage complex, ward-based patients. Chaired by the head of adult safeguarding, this meeting takes place weekly and has been effective since July 23.
- Training compliance has increased – over 30% of patient facing staff with a professional registration are now compliant with level 3 training and we will be mandating this from the spring 24.
- Multi-disciplinary simulation training commenced this year - the first time the SAT had used simulation in their training programmes. With the help of the simulation team, we devised an interactive communication course which aimed to help health care professionals explore communication strategies to better manage challenging conversation in the assessment of mental capacity.

East London Foundation Trust

- There has been a significant improvement in the length of time safeguarding concerns are open due to a number of teams reviewing their safeguarding process and assigning leads to oversee the process.
- Additional safeguarding training has been made available for clinicians, with specific training being available on areas such as dual diagnosis and safeguarding, coercion and control and intergenerational abuse. We are taking steps to address any learning needs on a continual basis.
- DIAS and Turning Point workers are now working in house to increase staff knowledge re dual diagnosis and domestic abuse, financial abuse, intergenerational abuse and coercion and control. Prevent training has also been organised by ELFT Safeguarding Lead for clinicians in ELFT.

Barts Health NHS Trust

- At the end of 2022, the structure of safeguarding teams within the Trust changed, with devolvement to the hospital sites and increased staffing for safeguarding processes, with new adult specific roles at the Royal London and St Barts Hospitals. Since then, the team is now fully staffed, which has allowed a significant improvement in the team's effectiveness. For example, with co-working with local authorities, we have reduced the number of open safeguarding concerns against the Royal London and St Barts sites have gone down to from over 60 to less than 20; with none open for longer than 3 months. There had previously been multiple concerns that had been open for over 6 months.

- Barts has also, taking learning from audits, safeguarding cases, and SARs, a Trust wide plan to improve staff knowledge and implantation of the Mental Capacity Act/DOLs, with renewed MCA processes, audits and embedding of MCA training within a wide variety of existing training schemes as well as delivering MCA specific training for staff.

Metropolitan Police Service

- Successful implementation of Right Care Right Person to be able to focus on core policing business driving change in partner agencies to improve and streamline their own processes to absorb the additional demand.
- Maintaining 'business as usual' high level of service throughout the cost of living crisis and associated increased societal unrest.

City of London Police

- We initiated the Bridge Watch Project, which is an initiative aimed to address the public health and safety issues in the areas surrounding the bridges of the City of London. Incidents involving people suffering mental crises and indicating intent to enter the water from these sites, account for a rising number of incidents around Thames bridges annually. The Bridge Watch pilot aims to provide a 'physical presence' of teams of volunteers that will patrol the areas on and around the bridges of London and who have a brief to engage with anybody indicating intent to enter the water.
- The Mental Health Street Triage team (MHST) remains an example of good practice amongst other forces, who are looking to replicate the model. The MHST has 3 full time staff members, and of the 40 referrals that were made to them over the past year, only 4 resulted in a 136 detention by police, with the rest being referred to alternative pathways freeing up valuable police time. The City of London Police remains integrated nationally around mental health and continues to improve the data we hold, the quality of it and how we share it for evaluation and analysis to improve the response to the mental health crisis.

Age UK East London

- In the face of increasing demand and complexity and the consequent recognition that there is a greater risk to vulnerable adults as a result, we have reviewed our processes and record keeping. We now ensure that any safeguarding concerns are case conferenced across our teams as a way of enhancing understanding of good practice.
- We have embedded Levels 2 and 3 training into our mandatory training for all staff and have added 'Safeguarding for Managers' for all managers.



CASE STUDY 8: Turning Point

Andy is a 53 year-old male with a history of injecting opiates and alcohol difficulties. Currently compliant on methadone, however, continues to drink to dependent levels. Andy is a frequent attendee at several hospitals due to alcohol use, other health complications or because of his foot ulcer. Previously, there were incidents of poor discharge planning from hospitals, seeing Andy return to studio with a POC and often being readmitted within a few days. There are regular professionals' meetings which include Turning Points recovery worker, hospital staff, housing/tenancy support and social workers to discuss Andy's capacity, support and key decisions about his future and risk is discussed.

Andy has had several capacity assessments related to his continued alcohol use and lack of engagement with key services, whilst service professionals continue to work together to reduce the harm of Andy's self-neglect and alcohol use.

Turning Point

- Turning Point has an average of 1800 people registered for support with substance use difficulties and may have a combination of other support needs including mental health, domestic abuse or and homelessness. Our work is challenging as we continue to work with other agencies and professionals in efforts to support people with the complexities they present with, reduce risks and support in their recovery. Following discussions with the senior manager of the adult safeguarding teams, Turning Point now co-locate regularly at the civic centre amongst the various colleagues and teams, providing substance use information, responses to queries about the service and discussing mutual clients. This arrangement has been beneficial to improve communication, highlight where referrals can be made or where other interventions can be implemented to reduce risks.
- Domestic Abuse Intervention Services (DAIS) have continued to co-locate within the Turning Point service twice weekly, providing the opportunity for in person consultations on domestic abuse and reducing risks to adults and children, advising on referring to MARAC, using the updated domestic abuse risk assessment tool or encouraging consent from service users to complete a DAIS referral.
- We now have an appointed family, friends and carer worker within the service, who supports those affected by another's substance use. Assessing these individuals is often an effective way to get more information regarding risks and safeguarding concerns related to these individuals and their loved ones who are using substances and are also known to the service.

London Borough of Hackney Benefits and Homeless Prevention

- The service worked with the Head of Safeguarding and Head of Mental Health and Learning Disabilities on our hospital discharge procedure, which highlighted the need for the service to request for an up to date Care Act Assessment for patients being discharged from MH hospital but also for those who are under secondary MH services in the community. This was introduced so that we can be confident on the suitability of placements being considered for general needs accommodation or when considering alternative housing options, which are better suited for the individual's needs. We are currently in the process of embedding the new process.
- The service also has two social workers embedded into the service; one generalist and one mental health specialist social worker who continue supporting our frontline staff to better support residents presenting multiple disadvantages. They also facilitate weekly drop-in sessions for staff and

deliver quarterly lunchtime learning sessions for the service on various topics including; mental health crisis pathways in Hackney, Care Act Assessment and Mental Capacity Assessment.

- The service has delivered Trauma informed approaches and Reflective practice training to all frontline officers to ensure they have the right skills to support residents who present often with multiple traumas. Last year we also made a free training program produced by Aneemo mandatory for all frontline officers to enhance their knowledge and skills. The training is on Improving Access to Services for Clients Experiencing Multiple Disadvantage & Co-occurring Conditions.

Department for Work and Pensions

- The Department for Work and Pensions (DWP) has a suite of comprehensive guidance and learning products readily available for all colleagues on how to deal with vulnerable citizens including those citizens who discuss harming themselves. When a threat of self-harm is identified, staff follow a six-point plan that helps them take the right action at the right time; this could include alerting the emergency services. All Communications from the SAB are taken forward and communicated to the Jobcentres in local Jobcentres and to relevant national teams.
- DWP introduced mental health training for Work Coaches and this has better equipped them to identify customers' mental health issues or vulnerability, and take appropriate action to support them. The learning continues to be updated to ensure the content is relevant and in Redbridge we have more awareness sessions planned over the coming months for newer starters.
- Every Jobcentre has a complex needs toolkit containing links to local organisations who can help and provide support to those who require it. This toolkit is accessible by most customer facing roles. The toolkit was developed by a range of experienced officials across the department, to support, signpost and raise awareness of citizens with complex needs. All colleagues are currently being trained and refreshed in complex needs at face to face events and this includes Safeguarding.

CASE STUDY 9: City of London Police

A friend of an elderly man suffering from Parkinson's and in supported accommodation identified that his carer was subjecting him to economic abuse and reported this to Social Services who contacted the City of London Police.

A joint professionals meeting was arranged, which led to a safeguarding referral to the agency employing the suspect and access to records in order to establish whether



there were any further vulnerable victims. A meeting between healthcare, social services and police reviewed the suitability of the man's accommodation and put measures in place so he could safely remain in his home address; including updating the police control room in respect of the man's vulnerability.

An interview to obtain evidence and permission to access his financial records was arranged using an intermediary as well as the man's social worker. The presence of the social worker provided support for the man who was anxious due to his condition as well as his limited interactions with the police. As a result, the suspect was arrested and a case file submitted to the Crown Prosecution Service.

CASE STUDY 10: Metropolitan Police

The police became aware of **Amy**, who was a disabled resident with a serious medical diagnosis, being taken advantage of by drug users who were using her residence as a place to meet and take class A drugs. The Police worked with Hackney Council, to move towards a permanent resolution. Amy was safeguarded and moved to alternative accommodation and received ongoing medical treatment. The Police then continued with their investigation and arrested a wanted offender at the address that had been frequented by drug users. Other nearby residents had been victims of anti-social behaviour. Working with Hackney Council, police arranged for the venue in question to be boarded up preventing further drug consumption and anti-social behaviour. The resident who had been relocated is being supported.



...Amy was safeguarded and moved to alternative accommodation and received ongoing medical treatment..

Appendix A:

CHSAB Annual Strategic Plan 2023-2024

CHSAB Annual Strategic Plan 2024 – 2025

The CHSAB Plan addresses the six core principles contained in the CHSAB's Strategy for 2020 – 2025

Partner	Lead
London Borough of Hackney (LBH)	Helen Woodland / Georgina Diba /
City and Hackney ICB	Diane Jones / Celia Jeffreys / Mary O'Reardon
City of London Police	Alistair Marman
Barts Health NHS Trust	Clare Hughes
London Fire Brigade (City of London and Hackney)	James O'Neill
National Probation Trust	Stephanie Salmon
Healthwatch Hackney	Sally Beaven
Hackney CVS	Tony Wong
London Borough of Hackney and City of London Public Health	Andrew Trathen
Turning Point (substance misuse service)	Jude Unsworth
Older Person's Reference Group	Cynthia White
Commissioning LBH	Jenny Murphyl

Partner	Lead
City of London Corporation (CoL)	Chris Pelham
Hackney Metropolitan Police (MPS)	Vijay Gorania
Homerton University Hospital Foundation Trust (HUHFT)	Breeda McManus / Jennie Wood
East London Foundation Trust (ELFT)	Jed Francique
Age UK	Larissa Howells
Department of Work and Pensions	Laura Anderson
Healthwatch City of London	Lesley Oblein
The Advocacy Project	Judith Davey
London Borough of Hackney Benefits and Housing Needs	Jennifer Wynter
City and Hackney Safeguarding Children's Partnership	Jim Gamble
City of London Commissioning	Sacha Lewis
City of London Housing	Liam Gillespie

Sub-group	Chair
SAR & Case Review	Chris Pelham
Quality Assurance	James Pearce
SAR Action Plan Group	Mary O'Reardon

Sub-Committee	Chair
City of London	Dr Adi Cooper

Task & Finish Groups	Chair
Transitional Safeguarding (joint group with Community Safety Partnership & Children's Safeguarding Partnership)	Dr Adi Cooper
Safeguarding and Anti-Social Behaviour	Dr Adi Cooper

Principle 1: Proportionality - “I am sure that the professionals will work in my interest, as I see them and they will only get involved as much as needed.”

Priority	Action	Lead	Intended Impact	Update
<p>1. To continue to improve the quality of mental capacity assessments.</p>	<p>1.1 To undertake a multi agency case file audit including mental capacity assessments as a theme in order to monitor the improvement.</p>	<p>Quality Assurance Subgroup</p>	<p>1. There is assurance that audits on capacity assessments improves practice.</p> <p>2. There is more support offered to residents who have fluctuating or lack executive capacity.</p>	

Principle 2: Empowerment - “I am asked what I want as the outcomes from the safeguarding process and this directly informs what happens.”

Priority	Action	Lead	Intended Impact	Update
2. To engage with the community and voluntary sector to support them to build their confidence in delivering their safeguarding duties and raise awareness of adult safeguarding.	2.1 The Board will train and induct a new cohort of Safeguarding Champions to deliver safeguarding awareness sessions across the community.	CHSAB Manager / HCVS	1. There will be increased awareness of adult safeguarding amongst residents in the City and Hackney	
3. To continue to embed engagement with people with lived experience and ensure that they can influence all aspects of the Board’s work	3.1 The Board Manager will coordinate/facilitate focus groups for people with lived experience, in order to gain insight and feedback on their safeguarding journey.	CHSAB Manager	1. The Board will be able to identify how to improve adult safeguarding services for residents 2. The Board will be able to ensure that safeguarding services are person centred.	

Principle 3: Prevention - “I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help.”

Priority	Action	Lead	Intended Impact	Update
4. To identify and respond to the safeguarding needs of people who are homeless, people experiencing modern day slavery, people experiencing discriminatory abuse (hate crime) and young people (18-25 year olds)	4.1 Raising awareness of the safeguarding needs of people experiencing homelessness and modern day slavery	CHSAB/ Executive Group	1. Increased reporting in these categories of abuse. 2.)Increased awareness of these categories of abuse.	
	4.2 Identify areas for improvement and develop plans to address these needs, and monitor how needs are being met.	CHSAB/ Executive Group	3. Increased efforts in prevention and early intervention to mitigate the risks associated with these categories of abuse/exploitation.	
	4.3 Work in partnership with the Community Safety Partnership on modern day slavery and hate crime.	CHSAB/ Executive Group		
	4.4 Work in partnership with the Safeguarding Children Partnership to address transitional safeguarding needs.	CHSAB/ Executive Group		

Principle 4: Partnership - “I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me.”

Priority	Action	Lead	Intended Impact	Update
5. To work collaboratively with agencies and partnerships across the City and Hackney to respond to the safeguarding needs of residents.	5.1 The Independent Chair will continue to review partners contributions to the Board and will identify how key roles (e.g. chairing task and finish and sub-groups) can be evenly distributed amongst partners.	Independent Chair of the Safeguarding Adults Board	1. The work of the Board is evenly distributed across Board partners and strategic priorities meet the needs of all partners	
	5.2 The Board will seek assurance around the safeguarding of refugees and asylum seekers placed in hotel accommodations within the borough.	CHSAB/ Executive Group	1. The Board has oversight around the safeguarding mechanisms in place to protect refugees and asylum seekers from exploitation and harm.	
	5.3 To develop a multi agency dashboard that has a clear focus on outcomes and helps identify emerging safeguarding risks and trends.	Quality Assurance subgroup	1. The Board is better able to respond to emerging risks and trends within the community.	

Principle 5: Protection - “I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want.”

Priority	Action	Lead	Intended Impact	Update
6. To support frontline practitioners to respond to complex issues relating to self-neglect	6.1 The Boards will continue to offer and promote training to practitioners on recognising, assessing and responding to self neglect. This will be done through the Boards training offer, as well as sessions during safeguarding month.	CHSAB Manager	<ol style="list-style-type: none"> 1. Professionals are given the tools to ensure that they can effectively support residents experiencing self-neglect 2. There will be improved outcomes for people experiencing self-neglect 	
	6.2 To monitor the usage and impact of the self neglect toolkit.	Adult Social Care London Borough of Hackney & the City of London Corporation.	<ol style="list-style-type: none"> 1. The Board is able to assess the effectiveness of the toolkit and inform decision making. 2. Accessibility of the toolkit is enhanced 	

Principle 5: Protection - “I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want.”

Priority	Action	Lead	Intended Impact	Update
7. To deliver and implement recommendations that arise in relation to both local, regional and national Safeguarding Adults Reviews	7.1 A roundtable review will be undertaken into fire deaths that have occurred in the London Borough of Hackney and the City of London to assess how future fire deaths can be prevented.	SAR sub-group	<ol style="list-style-type: none"> 1. There will be assurances that professionals understand fire safety risk and how to manage this effectively 2. There will be will be a reduction in fire related deaths in Hackney and the City of London 	
	7.2 The SAR protocol will be reviewed/ refreshed to ensure the SAR 'journey' is as efficient, effective and responsive as possible from start to finish.	SAR sub-group	<ol style="list-style-type: none"> 1. Agencies and professionals all have a clear understanding of their roles, responsibilities and procedures when conducting SARs 2. Learning from SARs will be embedded more efficiently 	

Principle 6: Accountability - “I understand the role of everyone involved in my life and so do they.”

Priority	Action	Lead	Intended Impact	Update
<p>8. To ensure that all agencies across the City and Hackney deliver their core duties in relation to safeguarding</p>	<p>8.1 The Board will work with its partners (including the voluntary sector) to raise awareness of safeguarding pathways (for professionals) and safeguarding risks (for residents).</p>	<p>CHSAB/ CHSAB Manager</p>	<ol style="list-style-type: none"> 1. Professionals are better equipped to intervene more promptly when needed. 2. Residents are more resilient and empowered to raise concerns early to prevent harm/abuse. 	



Accessibility statement

If you require this document in a different format, please email



CHSAB@hackney.gov.uk

We will consider your request and get back to you in the next five working days.

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