



Peggy Safeguarding Adults Review

The Peggy SAR detailed five system findings which are underlying issues that helped or hindered in the case. Newham SAB and its partners have set out the progress that has been made in response to these findings.

FINDING 1: Pathways to Newham’s Multi-agency “High Risk Panel” for individuals facing multiple exclusion homelessness
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Questions for the SAB and partners

- a) What can be done to better popularise the High Risk Panel to enable those who need it to access it?
- b) Has the High Risk Panel continued to function through the pandemic when, it can be argued, it is most needed?
- c) Who would need to lead on work about how the different panels fit together?
- d) Does the High Risk Panel’s current remit allow it to effectively ‘case-hold’ for those that do not currently meet criteria for safeguarding/ s.42 processes, but are likely to in the future if needs remain unmet?

Response

- The terms of reference for Newham’s High Risk Panel (HRP) were agreed in November 2020. Since the first Covid-19 lockdown in March 2020, there has been a concerted effort to ensure the workforce in Adult Social Care (ASC) are aware of the process. The HRP continued to function throughout lockdown and held two meetings and received six cases between October and November 2020.

A local multi-agency Task & Care Planning (TCP) was set up to manage complex high risk rough sleeper cases and safeguard them from further health and social care related harms. TCP membership includes representatives from a wide range of agencies that support Rough Sleepers, including local authority, health, and commissioned and voluntary provider partners. When cases have exhausted all safeguarding processes, there is an escalation route into the HRP for complex cases where resolution cannot be found.

- ASC has in place a mechanism to support customers that do not meet the [Care Act section 42](#) requirements. Services are being reorganised based on vulnerability and there is a very clear preventative offer in Newham for people who don’t meet particular thresholds. Customers who do not meet s42 thresholds are allocated a practitioner to look at ways they can safeguard themselves.
- The Newham SAB Chair will undertake two sessions with the Board’s Named GPs in early 2021 regarding the findings from SARs and some work will also be taking place with primary care.

FINDING 2: Benefiting from small neighbourhood organisations

Questions for SAB and partners:

- a) In relation to young people at risk of exploitation and involvement in gang violence, there have been corporate developments to drive engagement with affected communities. The Mayor Chairs and champions the Youth Safety Board for example. In relation to multiple-exclusion homelessness, another big issue in the area, are there tactics and attitudes that could be usefully mirrored to bring some prominence to the issue and respect to small neighbourhood organisations playing vital roles?
- b) Is there is a risk that the strengths of established providers of outreach services, comes with a risk of excluding the diversity of smaller neighbourhood organisations? Is there flexibility within the current commissioning arrangements between ASC and Thames Reach, to integrate small neighbourhood organisations into care planning and potentially advocate roles?
- c) How might statutory providers such as Newham Centre for Mental Health be helped to know of the existence of local neighbourhood organisations?

Response

- Newham works closely with many voluntary organisations, with a lot of work done recently on our vision for transforming supported accommodation and tangible commissioning intentions.
- Newham Cabinet agreed the proposal for the [Newham Rough Sleeping Integrated Support Services and Vision](#) on the 1st December 2020. The proposals build on the recognition of the value that voluntary organisations have brought to Newham, and the need to ensure that small and specialist organisations can continue to play a vital role whilst balancing the need to procure services in line with legislation. The report specifically sets out how the commissioning strategy will support the Council's commitment to maximising the existing community infrastructure and voluntary resource.
- We are proposing a model where one lead provider will form a consortia or similar type of vehicle with smaller local providers, who will then provide distinct work packages to meet our needs as a borough. We recognise the value of local community organisations and this proactive approach is aimed at ensuring such voluntary organisations are fully involved in our work.
- The Homelessness and Rough Sleepy Strategy (Dec 2019) and associated Action Plan (June 2020), specifically identify targets for developing and increasing full and effective engagement of the voluntary and faith based sectors to tackle homelessness.
- The SAB commissioned a reflective practice session on the lessons to be learned from this SAR in January 2021. This session presented Peggy's case in the form of reflective supervision sessions, inviting participants to put themselves in the shoes of frontline workers and supervisors involved. The session was attended by 41 social care practitioners, who explored social work practice with homeless customers and the challenges this can present. This session will help to embed key learnings from the SAR in future practice. Following this session, we are organising a wider reflective session in collaboration with other stakeholders in the first quarter of 2021/22, to take forward the learning from this SAR.

FINDING 3: Sustaining Covid-19 innovations that reduce assessment demands on people

Questions for SAB and partners

- a) What are the plans for assessing which of the new ways of working developed in response to Covid-19 that are to become standard?
- b) How can opportunities to innovate be sustained?
- c) Is there adequate scrutiny of assessment demands?
- d) Is there scope for further innovation and creativity to streamline or combine respective agencies' assessment requirements and support a collective understanding of the interplay of a person's needs and issues?

Response

- Newham now uses advanced IT devices and software including 'Smarter Newham'. This enables officers to undertake assessments virtually and, if the customer agrees, removes the need to book appointments for home visits, which has reduced waiting times.
- Primary care mental health community transformation have a clinical video assessment system that all GP surgeries in Newham are utilising, 'AccuRx'. This has created the ability to see people more flexibly in ways that are most meaningful and useful to them. Patients are given a range of options for assessment, including face-to-face. This diversity of options, enables health practitioners to better engage with people and will continue to be offered where clinically appropriate and where service users wish to use it beyond the pandemic.

Finding 4: Lack of "low key" housing options

Questions for SAB and partners

- a) Do local strategic needs assessments provide any further understanding of this need?
- b) How might voluntary sector and neighbourhood organisations be engaged to better understand the size and scale of this need and adequacy of current provision?

Response

- The Council's Adult Social Care vision is to improve the quality of life of adults with support needs, to promote independence and to treat vulnerable and socially excluded residents of the borough with respect, care and compassion. Care and support should be outcome focussed, person-centred, planned, proactive and coordinated. There should be an early intervention and preventative support offer based on the needs of the local population. From this ASC vision, we have also developed a specific Rough Sleeping Strategy that takes a compassionate approach to supporting Rough Sleepers in order to rebuild trust with those who have fallen through societal gaps and often experienced significant trauma. This is set out in the Cabinet report agreed in December 2020.

- Newham Council has set out its plan for Supported Accommodation, with a plan to transform the service offer before April 2022, with an estimated cost of over £20million. This includes:
 - A new multidisciplinary team (already established), chaired by the Assistant Director of Commissioning, to oversee the Council's response to market instability, safety and risk during the transformation period.
 - The transformation of Supported Living and Housing Related Support, including the development of a long-term strategic commissioning plan.
 - This will ensure that specialist accommodation based services are delivered to meet the needs of people with complex needs. This complements our approach to meeting the individual care and support needs of the person rather than their homelessness. For example, their needs could be met in a specialist support accommodation service for people with mental health issues rather than a generic hostel-type service
- Newham housed rough sleepers during the Ministry of Housing, Communities and Local Government's (MHCLG) Covid-19 'Everyone In' directive, which provided a unique opportunity for people to engage with us who wouldn't normally. 195 Rough Sleepers were rapidly accommodated from the street, with a further 40 moved from shared accommodation, no evictions and an offer for all those who remain on the street.
- Since 'Everyone In', 132 people have been supported to move onto more suitable longer-term accommodation. Currently there are 178 people in this accommodation. The commissioning team are developing a number of longer-term accommodation-based options designed to be flexible in response to future funding opportunities.
- In July 2020, we completed the development of the Minimum Data Set (MDS) with Thames Reach, which captures a range of information to enable professionals to monitor the needs of an individual and their progression towards independence. To inform the MDS, individuals are now assessed using the "CHAOS" Index, which is a bespoke tool for assessing the complexity of an individual's need and the Outcome Star, which enables us to better understand both the support need and the aspirations of a person to provide of personalised service. This information has helped us to identify which of the repurposed accommodation best suits the needs of the individual and to support them onto a sustainable accommodation pathway. The accommodation offer will be based on an individual's mental health and support needs etc. and to date c. 500 people have engaged in this process. Capturing this data, will also help us to better design services for individual need in the future.
- [Newham's Health and Wellbeing Strategy \(2020-2022\)](#) focuses on tackling the determinants of health and addressing Newham's major health challenges, with a specific priority on building health promoting housing, including a commitment to reducing homelessness and rough sleeping in Newham.

FINDING 5: Working with a person when they do have capacity, to understand how they would like to be treated when they are sectioned under the Mental Health Act 1983

Questions for SAB and partners:

- a) Does this happen routinely for people who are able to engage more readily?
- b) What are the options for engaging with small neighbourhood organisations in this regard?

Response

- East London Foundation Trust (ELFT) Mental Health have steps in place to address this issue, such as Advanced Directives that are particularly useful for people who are care co-ordinated and receiving a lot of input. Part of that care planning is a review of how someone would like to be treated if and when they lose capacity due to an acute mental illness.
- In cases like Peggy's , it can be difficult for the NHS alone to capture how people would like to be treated when detained under the Act because of the brief amount of time they are with ELFT and the coercive circumstances they find themselves in at the time. Through voluntary sector partnerships and greater links with people in primary care, we will be better able to capture expressed wishes for how people would like care to be given when detained.
- In the medium to long-term through our partnerships with the voluntary sector in Newham and through our Primary Care Networks, a major part of that transformation will involve sub-contracts to the voluntary sector. By building those partnerships we make it much more likely that we'll know who these neighbourhood organisations are and establish relationships with them to ensure they can be embedded in our standard care processes. In addition to us knowing who they are, we'll be able to better understand the integral role they play in supporting vulnerable people.
- Dedicated 'Navigators' work intensively with clients who have complex needs, offering a continued single point of contact and support through the pathway system to settled accommodation. Navigators adopt a Make Every Adult Matter (MEAM) approach to deliver better coordinated services to the vulnerable cohort who may display or have undiagnosed trauma. They were created to work with clients with complex cases who need more intensive work. There are seven Navigators in place, taking on complex cases where conventional support from the outreach team alone is not sufficient. Navigators have a small caseload of 10 -12 cases to enable them to work intensively with clients to find solutions to the multitude of problems they may be facing. Navigators concentrate on four key elements of: Engagement, Complexity, Vulnerability and Available Options and work closely with each other to coordinate and ensure a seamless service for the client. Navigators will escalate cases to the tasking and Care Planning meeting for further multi-agency support as and when necessary. Navigator support is not a substitute for personal care.