As previously reported to both the Health and Wellbeing Board and the Adults and Safeguarding Committee, the Barnet Safeguarding Adults Board has agreed in its two year business plan that the establishment of a Multi-Agency Safeguarding Hub (MASH) is a key priority to achieve improvements locally. A multi-agency working group has been developing the model for a Barnet Adults MASH. Collectively, partners have concluded that an adult MASH will better bring together key information sources from the various partner systems; will provide a simpler and quicker pathway for reporting concerns; and will enable improved triage and risk management of cases reported. Partners are committed to more integrated working to better safeguard vulnerable residents in Barnet. In January, the Council’s Adults and Safeguarding Committee agreed to the development of the Adults MASH. Subsequently, the Health and Wellbeing Board agreed to consider the development of the Adults MASH, given its multi-agency aspects. The Health and Wellbeing Board is asked to endorse the approach and model of developing an Adults MASH in Barnet.
1. **WHY THIS REPORT IS NEEDED**

1.1 Every year, the Health and Wellbeing Board considers the Annual Report of the Barnet Safeguarding Adults Board. The Safeguarding Adults Board is a statutory multi-agency board, which has been established to improve safeguarding practice for adults at risk of abuse in Barnet and is made up of representatives from the Council, the Metropolitan Police, NHS Barnet CCG, local NHS providers, the London Fire Brigade, the voluntary and community sector, including Healthwatch, and the Barnet Group.

1.2 The establishment of a Multi-Agency Safeguarding Hub (MASH) is one of five priorities in the Board’s Business Plan. It sets out that an adult MASH will bring together key information sources from the various partner systems and will provide a clear pathway for reporting concerns. It will improve the triage of cases reported. The MASH will support comprehensive, well informed, multi-agency assessments of risk for adults referred to the MASH. The MASH will bring together not just information but also professional staff from a range of agencies into an integrated multi-agency team. Partners are committed to this approach of more integrated working to better safeguard vulnerable residents in Barnet.

2. **REASONS FOR RECOMMENDATIONS**

2.1 A Multi-Agency Safeguarding Hub (MASH) is a means for rapid information sharing between agencies in response to a safeguarding concern. It can take the form of either: a dedicated, multi-agency team, working in one location with access to the systems of each of the organisations; or a virtual team with a central coordinator linked to contacts in each organisation, facilitating the sharing of information. A successful MASH improves the flow of information, decision making and responses to adults at risk. It provides a system to review information from multiple sources in a timely manner to give a comprehensive picture. It provides an opportunity to embed personalisation in safeguarding (following Care Act 2014 statutory guidance on ‘Making Safeguarding Personal’) across the pathway by ensuring consistent practice across agencies and professionals. Good information sharing helps ensure risks to adults are better understood and managed. The MASH should also reduce the risks and inefficiencies that can arise from duplication or poor coordination across agencies.

2.2 The Barnet Adult MASH would make initial multi-agency assessments of risk and decisions about appropriate and proportionate responses in line with the London Multi-Agency Safeguarding Adults Policy and Procedures (these Care
Act 2014 compliant procedures are followed by all London councils, NHS organisations and the Metropolitan Police, along with other partner agencies). It is anticipated that the MASH will be able to offer quicker response times, a coordinated approach and better informed decision making to ensure that adults at risk are better protected.

2.3 The Barnet Adults MASH will support the achievement of the duties held by partner agencies under the Care Act 2014 Statutory Guidance (section 14.11) to:

- Prevent harm and reduce the risk of abuse or neglect to adults with care and support needs
- Stop abuse or neglect wherever possible
- Safeguard adults in a way that supports them in making choices and having control about how they want to live
- Promote an approach that concentrates on improving life for the adults concerned
- Raise public awareness so that communities as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect
- Provide information and support in accessible ways to help people understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or well-being of an adult
- Address what has caused the abuse or neglect.

2.4 In Barnet in 2016-17, there were 1,043 safeguarding concerns, of which 298 were referred for further enquiry under S42 of the Care Act 2014. 21% of all concerns received related to adults with dementia. The majority of concerns related to adults over 65 and of these, 78% related to neglect or acts of omission. The second largest category was physical abuse. For adults with learning disabilities, the highest proportion of concerns related to physical abuse. For those with mental health needs, the most prevalent abuse type was domestic violence. There were 147 concerns raised in relation to pressure ulcers. However, only 19.7% of these concerns progressed to a safeguarding enquiry.

2.5 Abuse was substantiated, either partially or fully, in 47% of completed enquiries (129/298). Following the completed enquiry, the most common actions taken were increased monitoring and assessment of care and support needs. 25 cases resulted in police action. Three cases were referred to the Disclosure and Disbarring Service.

2.6 Discussion with service users and carers as part of the consultation on the Barnet Safeguarding Adult Board (SAB) 2018-21 strategy has highlighted that often service users feel vulnerable after an enquiry. Adults at risk may feel confused by the number of different services involved in a case. The MASH would ensure better co-ordinated and more targeted contact with service users, enabling prevention of further concerns.
2.7 The presence of mental health and police expertise could help identify and improve the management of potentially high risk cases earlier in the referral pathway. Those concerns that are also criminal investigations would benefit from the development of a MASH as it will enable earlier input from the Police. The number of criminal prosecutions in relation to safeguarding is relatively low in Barnet. Having a clear understanding of organisational processes and methodology would help support prosecution rates.

2.8 Barnet, like all Local Authorities, already has a children’s MASH but Adult MASHs are less common. Conversations have taken place with officers from sites that have adopted or are considering adopting this model including Camden, Enfield, Surrey, Hampshire, Lancashire and Lambeth. These authorities have highlighted the positive impact that an adult MASH can have, such as improved timeliness of decision making, improved risk assessment and management.

2.9 A project group was established to evaluate and develop proposals for an Adult MASH. The group comprised the council, NHS, Police and other partners. The group’s preferred option is a multi-agency, co-located MASH model including statutory partners and other agencies. However, it is acknowledged that this may be implemented in a phased approach. A phased approach will allow partners to develop and test joint working approaches; and allow time for partners to identify the resources required to be part of the MASH. It has already been identified that the Adults MASH can be located in the new Barnet Council Colindale offices, adjacent to the Children’s MASH to ensure a whole family approach. Space has been earmarked for the Adults MASH to include all partner agencies. The building will become operational in phases from autumn 2018. The details of exactly how the team will be established, the phasing of development and the resource commitment of each partner will be worked out over the coming months once commitment to the approach has been secured.
3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

3.1 No change. This would not achieve the ambitions for improvement identified by the Safeguarding Adults Board.

3.2 Joint improvement plan. Whilst there are improvements that could be made to collaborative working without the development of a MASH, it is the considered view of the partnership that the MASH model offers the best opportunity to achieve the desired benefits.

4. POST DECISION IMPLEMENTATION

4.1 A period of detailed design and implementation planning will commence followed by a mobilisation period to include training and communications. This will be followed by a launch, to take place after the new Colindale offices are operational.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

5.1.1 The BSAB Annual Report 2016/17 reinforces the commitment of all partner agencies, as reflected in their Corporate Plans, to ensure the effective safeguarding of vulnerable adults. The performance of the MASH will be monitored and evaluated to ensure improvements to service. A full set of performance indicators and evaluation criteria will be developed as part of the implementation phase.

5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

5.2.1 It is anticipated that the MASH will improve efficiency and reduce duplication and offer a better service for residents. Approximately £110k has been identified to fund the Council elements of the MASH on a pilot basis for one year. Longer term funding will be considered through the Council’s medium-term financial strategy process.

5.2.2 The Police have also confirmed that they will be able to resource the Adult’s MASH in a co-located model, with a dedicated team of Police Officers working as part of the Adults MASH. The Police National Computer and secure access lines will also be supplied.

5.2.3 A number of agencies have indicated an ‘in principle’ agreement to work as either a virtual or co-located part of the MASH team. For example, Trading Standards and Drug and Alcohol Services have already indicated that they will be co-located MASH members. Barnet Homes has indicated that housing staff can work with the MASH as required and can be co-located. Fire and criminal justice services have indicated that they will work as virtual team members.
5.2.4 Work is underway with health partners to identify the resources and capacity that they will make available to support the Adults MASH, as a core statutory partner. Local NHS providers such as the Royal Free have indicated that they will work as virtual team members. The project group has learned that Adult MASHs already in operation cite the importance and value of mental health and community nursing expertise being part of the co-located team. Specialist mental health expertise could work jointly with the Children’s and Adults MASHs once they are adjacent in the Colindale offices; and in this way also support the implementation of the Barnet Children’s Services Ofsted improvement plan.

5.3 Social Value

5.3.1 Not applicable

5.4 Legal and Constitutional References

5.4.1 Under the Council’s Constitution, Article 7, the terms of reference of the Health and Wellbeing Board include the following responsibilities:

- To promote partnership and, as appropriate, integration, across all necessary areas, including the use of joined-up commissioning plans across the NHS, social care and public health. To explore partnership work across North Central London where appropriate.

- Specific responsibilities for overseeing public health and developing further health and social care integration

5.4.2 The Care Act 2014 statutory guidance identifies the MASH model as one approach to ensure mechanisms are in place to prevent abuse and neglect, take positive interventions, and prevent the deterioration of a situation concerning an adult at risk of abuse or neglect.

5.5 Risk Management

5.5.1 Lessons learned from Adult MASHs elsewhere in the country have shown that MASH models enable improved risk management of adult safeguarding, especially complex cases. They also support better risk management by improving information sharing and reducing silo working. One or two MASH models have found that after implementation the MASH experiences an increase in demand of up to 30%. In order to mitigate this risk additional capacity can be deployed using the funds referred to in paragraph 5.2.1.

5.5.2 In the detailed implementation planning of the Adult MASH, close attention will be paid to ensuring effective and timely information sharing, & robust information sharing agreements to ensure that cases are dealt with promptly and that the risks of ineffective information sharing do not arise. Barnet Safeguarding Adults Board has signed the Pan-London Adult Safeguarding Information Sharing Agreement to mitigate this risk. This agreement has also been signed by pan-London organisations such as the MPS and NHS
England (London).

5.5.3 For the MASH to be effective in safeguarding adults at risk, clearly understood thresholds will be required. Thresholds will be set according to the pan-London policy and procedures, statutory and best practice guidance and lessons learned from other organisations.

5.5.4 The London Safeguarding Adults Board published a report setting out the lessons learned from 27 Safeguarding Adults Reviews (SARs) carried out in London (available here). Consistent themes from these reviews were: poor information sharing; unclear pathways and routes for escalation between organisations; inconsistent understanding and application of thresholds across organisations; services working in parallel; and a lack of co-ordination across organisations. As in Children’s Safeguarding, Adults MASHs are a model designed to improve multi-agency working and reduce risk in all these areas.

5.6 Equalities and Diversity

5.6.1 The 2010 Equality Act outlines the provisions of the Public Sector Equalities Duty which requires Public Bodies to have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010.
- Advance equality of opportunity between people from different groups.
- Foster good relations between people from different groups.

5.6.2 The 2010 Equality Act outlines the provisions of the Public Sector Equalities Duty which requires Public Bodies to have due regard to the need to:

5.6.3 The broad purpose of this duty is to integrate considerations of equality into day to day business and to keep them under review in decision making, the design of policies and the delivery of services.

5.7 Corporate Parenting

5.7.1 Not applicable

5.8 Consultation and Engagement
5.8.1 The Safeguarding Adults Board consults and engages with service users through the Safeguarding Adults Service Users Forum and consults with service users, carers and partner agencies in developing its strategy and business plan priorities.

5.8 Insight

5.8.1 Not applicable

6. BACKGROUND PAPERS

6.1 Barnet Safeguarding Adult Board Annual Report 2016-17 - Adults and Safeguarding Committee, Tuesday 19th September 2017

6.2 Care and Support Statutory Guidance, especially para 14.14

6.3 London-wide Safeguarding Adults Policy and Procedures

6.4 Adults and Safeguarding Committee – 22 January 2018 – item 9; Barnet multi-agenda adult safeguarding hub Development paper

https://barnet.moderngov.co.uk/ieListDocuments.aspx?Cid=698&Mld=9234