



Risk Details

Risk Code	Risk	Responsible Officer	Committee	Issue Type	Risk Treatment	Current Risk Score	Target Risk Score	Eff. of Control
SR13	Not keeping adults safe from harm and abuse	Executive Director Health and Adult Social Care	Adult Social Care Public Health Sub-Committee	Threat	Treat	 Red L4 x I4	 Amber L3 x I4	Revised: Uncertain

Causes

- The council has a duty to keep adults, for whom they have statutory responsibility for, safe from harm and abuse. Brighton & Hove City Council has a statutory duty to co-ordinate safeguarding work across the city and the Safeguarding Adults Board. This work links partnerships across the Police and Health and Social Care providers.
- Under the Care Act, since 2015, the Local Authority has a statutory duty to enquire, or cause others to enquire, if it believes a person with care and support needs is experiencing or is at risk of harm and abuse and cannot protect themselves.
- There has been an increase in safeguarding concerns received, increase in complexity of adult social care packages and unknown demand in the context of Covid-19 recovery
- There is not enough appropriate accommodation and services in the city for those with significant and complex needs or specific needs such as ABI, Physical Disability, Learning Disability or Mental Health
- Due to workforce shortages in the domiciliary care market, challenges to commercial viability and increased pressure for council's responsibility on quality monitoring, there is higher risk of provider failure
- Changes to government legislation and funding, pressures on the health and care system as a whole and pressures on resourcing and budgets across the sector with rising costs in the provider market

Potential Consequence(s)

- Failure to care for and safeguard adults properly could result in death, abuse, neglect or injury to individuals.
- Failure to meet statutory duties could result in legal challenge and reputational damage to the organisation and public trust
- Inequalities could be created in terms of how disadvantaged groups of our community i.e. multiple and complex needs can access care and support services
- Provider market costs continue to rise which could lead to overspend of budget to meet statutory responsibility
- Service users may need to move out of the city to receive services required
- People are placed in inappropriate accommodation which may present a danger or risk to them or others and people may not get the appropriate services and support to address their needs
- Any failure of delivery across the health and care system could impact on costs and pressures throughout the system and frustrate attempts to release efficiency savings and improve system performance.

Existing Controls

First Line of Defence: Management Controls

1. Performance management across adult social care enables a more informed view on current activity and planning for future service changes and reviewed monthly by Finance & Performance Board. A BHCC Safeguarding Adults performance dashboard is provided monthly.
2. Directorate Management Team (DMT) oversee developments and monitor risks.
3. Brighton and Hove Safeguarding Adults Board (BHSAB) work plan and multi-agency partnership commitment. Multi agency safeguarding adult procedures are in place, for preventing, identifying, reporting and enquiring into allegations of harm and abuse, in line with Care Act requirements, endorsed by all 3 Sussex Safeguarding Adults Boards. Front line practitioner and manager events are provided within every Safeguarding Adults Review and our senior management team ensure attendance for reflective and systemic learning and engagement.
4. Dedicated resources for: safeguarding adults S.42 decision making; oversight, specialist advice and guidance of complex people in a position of trust; input into Domestic Homicide multi agency review panel; co-ordination of all Deprivation of Liberty Safeguards (DoLS) referrals in line with statutory requirements; continuous professional development requirements in line with Social Work Professional Capabilities Framework
5. Safeguarding referrals can be made by anyone including other professionals, GPs, Police, neighbours, friends. Safeguarding referrals are assessed by Social Workers.
6. BHCC Quality Monitoring Team oversee process in place to monitor quality of adult social care providers, in partnership with NHS Sussex and Care Quality Commission (CQC), which supports quality and preventative safeguarding objectives. A monthly Service Improvement Panel which is multi agency, meets to discuss emerging themes and preventative responses and is a robust effective risk mitigating factor.
7. A Practice Development Assurance Board is in place and meeting monthly to consider practice development and assurance areas of focus bringing updates from internal partners and data share.
8. Learning from Safeguarding Adult Reviews (SARs), monitored through SARs subgroup of BHSAB and a dedicated Safeguarding Lead post who ensures we are involved in responding, liaising and prompting other internal partners and in contributing to learning and development within our system. Accessibility to service provision is a key consideration in learning from SAR, systemic change where needed and improvement for adults experiencing risk and disadvantage at the fore of the shared multi agency approach.
9. Homelessness Transformation Programme
10. Housing Allocations Policy framework
11. The Health and Wellbeing Strategy is delivering the Joint Strategic Needs Assessment on people with multiple and complex needs as part of its Living Well and Ageing Well Workstreams. The Changing Futures Programme (Sussex wide) is in place with external partners and organisations to consider this area and systemic change, development and training needs to bring the system together to consider development needs in this area.
12. Provider failure business continuity plans are in place
13. Provider partnership working through forums, working groups and partnership boards

Second Line of Defence: Corporate Oversight

1. Pan Sussex Safeguarding Adults procedures group - robust partnership group producing specialist procedural guidance across the Sussex area and protocols and meets quarterly with working groups between to complete multi agency tasks together. Strong multi agency working together is featured consistently and is Sussex wide so takes a broader view. Protocols and guidance designed and issued is often across the County which provides a

stronger collaborative approach.

2. Health & Wellbeing Board oversees Joint Health & Wellbeing Strategy and BHSAB annual report.
3. Adult Social Care & Pub Health Subcommittee oversees effective social care commissioning.
4. Care Governance Board oversees quality monitoring of care services and attended by CQC.
5. Learning Disability Governance Group ensures robust links between directorates for LD services.
6. Service Improvement Panel – with multiagency partners, including CCG, to share inspection results, complaints and other issues for care provider quality.
7. Mental Health Oversight Board
8. Housing Committee
9. Strategic Accommodation Board meets to focus on vulnerable adults and children within the housing strategy
10. Homelessness Reduction Board (HRB) promotes reduction and prevention of homelessness, it is chaired by the Chair of the Housing Committee.
11. Prevent Board
12. Practice Development Assurance Board meets monthly to focus on Social Work Quality Assurance. The Principal Social Worker chairs this and the Safeguarding Adults Lead will attend on Safeguarding assurance matters.
13. The Audit & Standards (A&S) Committee reviewed SR13 in April 2022.

Third Line of Defence: Independent Assurance

1. For the council's in-house registered care services Care Quality Commission (CQC) Inspections on an on-going regular basis.
 2. CQC's programme of inspections of all registered care providers are published weekly and available on CQC's website www.cqc.org.uk. These are monitored for local relevance by the council's Quality Monitoring team.
 3. Brighton & Hove Safeguarding Adults Board (BHSAB) is independently chaired and meets quarterly with the three statutory agencies for city wide safeguarding assurance. The subgroups are always attended by HASC. The Safeguarding Lead is a member of the SAR panel (multi agency, chaired by independent sector) where referrals for reviews are discussed in depth. Input is provided in a robust manner for all reviews and related pieces of work for example multi agency audits and action plan reviews required by SAB.
 4. Internal Audit
- * 2022/23: Care Payments (Reasonable Assurance)
 - * 2021/22: HASC Modernisation Programme (Reasonable Assurance), Direct Payments (Partial Assurance), Home Care (Reasonable Assurance)
 - * 2020/21: Hospital discharge arrangements (Reasonable Assurance), Care System Replacement Project – Eclipse (Reasonable Assurance)

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
Ensure there are appropriate services and support for people with care needs in the city	Assistant Director of Commissioning and Partnerships	50	31/03/24	18/11/21	31/03/24
<p>Comments: There are a number of projects currently underway to recommission a range of services including care homes, home care & extra care, supported living, community support, mental health provision and equipment services. These contracts are due to be over the next 24 months. There is specific work being completed to understand the need in the city and engage with key stakeholders. We have recently reviewed feedback from the service user and carers surveys and action plans are being developed. The Authorisation Panel meets once a week and consists of staff across Adult Social Care and the commissioning and assessment teams meet regularly to understand any current gaps in services and where further commissioning activity is required.</p>					
Ensure there is appropriate accommodation and support for vulnerable homeless and rough sleepers	Assistant Director Housing Needs and Supply	50	31/03/24	18/11/21	31/03/24
<p>Comments: Our Rough Sleeper and Single Homeless Service continues to support vulnerable homeless and rough sleepers across the city.</p>					
<p>In the latest Rough Sleeper count, which took place in November 2021, 37 people were found sleeping rough. This is down 57% compared to the 2019 count.</p>					
<p>The service is currently providing 891 bed spaces to vulnerable homeless and rough sleepers, and the majority of these bed spaces are in supported accommodation where residents receive additional support with their needs, such as mental health.</p>					
<p>Alongside this the service is also:</p> <ul style="list-style-type: none"> • Increasing its Housing First stock to 90 units • expanding its team of Welfare Officers to support people in emergency accommodation • purchasing 30 new homes for rough sleepers as part of its Rough Sleeper Accommodation Programme (RSAP) • leasing 30 properties from private landlords for rough sleepers with a lower level of need • working with No Second Night Out and Off the Street Offer providers to help rough sleepers into settled accommodation • continuing to deliver the Rough Sleeper Initiative (RSI) and revising our Homelessness and Rough Sleeping Strategy Action Plan 					
High quality social work is provided to ensure that adults are effectively safeguarded	Principal Social Worker	75	31/03/24	18/11/21	31/03/24

Comments: The Practice Development and Assurance Board (PDAB) has been operational since December 2021. The Board is responsible for the oversight of all practice assurance and development needs, including the monitoring of training targets and identification of emergent gaps and need.

A new audit framework to evaluate the quality of social work/practice interventions has been developed. Practice audits will evaluate quality across a range of statutory care and support planning interventions. Audit outcomes will inform future practice development and assurance needs. Practice Audits for Q3 2022 have been completed as part of piloting the new framework and will report through the Practice Development and Assurance Board in February 2023. The new practice audit framework will go live across all adult social care assessment services from January 2023. Audits will be conducted within agreed targets and will continue to report through PDAB and DMT on a quarterly basis to ensure that targets are met and that actions are agreed to support practice improvement where necessary.

Provide assurance and support to reduce the risk of provider failure in the city	Assistant Director of Commissioning and Partnerships	90	31/03/24	18/11/21	31/03/24
--	--	----	----------	----------	----------

Comments: Provider failure plans have been updated and signed off by BHCC and NHS Sussex. Alongside this continued governance arrangements are in place through the use of incident management meetings and the role of our public health and quality monitoring and commissioning teams to support providers both in terms of covid related activity and ongoing provider quality issues. The Care Governance Board also provides strategic oversight of quality and provider failure issues jointly with health partners and regulators of services.

Provide assurance of safeguarding adults arrangements across the council and with our partners	Safeguarding Lead	58	31/03/24	01/04/21	31/03/24
--	-------------------	----	----------	----------	----------

Comments: Risk Response Actions:

1. Ensure meaningful learning across the directorates and with our partners from Safeguarding Adults Reviews, Domestic Homicide Reviews, Coroners inquests and case reviews

Dec 22 – 75% completed. All work of the BHSAB continues with the Local Authority a statutory partner. The James SAR (ABI) action plan/Reg 28 progress continues to present some more challenges areas (ABI commissioning pathway for SW undertaking MCA Mental Capacity Act Assessment) being taken forward by the Safeguarding Adults Lead over a period of months and being escalated through the SAB and ICB. This is now progressing to a multi-agency round table discussion with specialist ABI partners, supported by workforce development team which is positive progress. SAR Andrew (LD) has been completed and cross directorate action planning completed with a high level of meaningful engagement and actions from LD assessment and provider services. SAR Craig is in progress and nearing conclusion having held a learning event well attended by HASC safeguarding, assessment services and Principal Social Worker. The thematic SAR regarding women with multiple and complex needs has been completed and is nearing action plan stage and links to the JSNA and changing futures programme who have successfully started a multi-disciplinary team in assessment services to work with people with multiple and complex needs where significant complexity factors and challenges exist, this is beneficial as supports access for this

service user group and acknowledges the complexity. Updates for HASC directorate will be fed into the Practice Development Assurance Board and Safeguarding Development Group to ensure awareness engagement in SAB partnership development work and collaborative oversight. The Brighton and Hove SAB have co funded a SAR review in East Sussex regarding a young adult, with a transitions theme which is very relevant to safeguarding in our area and of useful learning. An increase of SAR referrals continues to be noted locally showing an increased awareness of this process, HASC are engaging with all review referrals and the SAR process via the safeguarding adults lead, providing summaries of information where needed. The Directorate has developed an internal safeguarding development meeting held with the Principal Social Worker Safeguarding Adults Lead and Social Work Practice Managers on a monthly basis and therefore increased oversight of SAR referrals and any areas we can respond to proactively is occurring. % Safeguarding outcomes met is now a corporate KPI which is monitored by the Performance Lead and Safeguarding Adults Lead with engagement from front line teams a key aspect to this measure. Engagement actions with all operational front line social work teams are being completed by the Safeguarding Adults Lead and improvements to the eclipse database are actions which are being brought in to enhance the reporting and accuracy of this data and its narrative.

2. Provide Assurance that mandatory PREVENT training is embedded in all training induction and development plans within the organisation to support effective identifiers and that the referral pathway is known

Dec 22 - 30%. Strategic training updates on this area are included in a set of workforce development mandatory training dashboards (quarterly) % accessed training remains low but efforts will continue to monitor this and work on improvements regarding take up. Communication messages (learning and development and in the loop newsletters) have requested staff completion and highlighted the mandatory nature of this training completion and request). Training levels remain low and have not increased significantly. Oversight of this is currently significantly reduced as the training accessed is picked up via the Learning Gateway which has recently been decommissioned in September.

A variety of improvement measures have been completed in 2022 so far, for example a pathway for Prevent information coming into HASC has been mapped out by the Safeguarding Adults Lead with key internal stakeholders in recent months and is in place. This month this pathway has been reviewed following feedback from the Prevent Lead, which increases the expertise involved in oversight of Prevent information leaving and coming into the directorate at front line operational level. The Channel Lead has provided bespoke training sessions on Prevent to front line assessment teams identified by the Safeguarding Adults Lead which will raise the % training completed figures and importantly, awareness. A Prevent and Safeguarding chapter has been written by the Safeguarding Adults Lead and is now included in the Sussex wide safeguarding adults procedures which should support multi agency awareness of this important area.

3. Provide Assurance that recognising reporting and responding to abuse and neglect is embedded and that safeguarding training (appropriate to role and task) is being provided to staff across the organisation and offered to partners

Dec 22: 45% ongoing monitoring of uptake of safeguarding training is in place within the organisation and continues to be offered to all staff in applicable roles, and to partners, for example causing others training and basic awareness, with refreshers offered proactively by workforce development for front line assessment social work staff. Oversight of this is currently significantly reduced as the training accessed is picked up via the Learning Gateway which has recently been decommissioned in September.

4. Seek Assurance and post acute COVID review to assure there is a comprehensive clear Disclosure and Barring Service (DBS) check and recheck process

in place which reduces risk to the organisation and to the community

Dec 22: Oversight of DBS rechecks is in place in Human Resources.

5. Ensure effective partnership working across directorates and with external partners to deliver a robust supportive and safe process for the Ukrainian Refugee Hosting Scheme

Dec 22 - Since April 22 HASC have actively supported since the development and design of new processes, working with all partners to support the scheme and meet local authority responsibilities, including where potential risk issues and concerns arise regarding hosts either pre placement or once guests are in situ. Safeguarding concerns are picked up proactively with multi agency working groups and collaborative partnership working is strong.

Risk Code	Risk	Responsible Officer	Committee	Issue Type	Risk Treatment	Current Risk Score	Target Risk Score	Eff. of Control
SR37	Adverse impact on health outcomes and business continuity from high levels of disease transmissions and pandemics in the city	Executive Director Health and Adult Social Care	Adult Social Care Public Health Sub-Committee	Threat	Treat	 L4 x I4	 L3 x I4	Revised: Uncertain

Causes

In the event of a health protection emergency (e.g., an infectious disease outbreak, epidemic or pandemic) there is a risk that the Council would not be able to meet its statutory duty to be assured that relevant organisations are managing the incident appropriately to mitigate the impact of harm to the local population and to prevent adverse impact on the business continuity of the Council.

Potential Consequence(s)

1. Harms to physical and mental health from health protection incidents and infectious disease outbreaks including increased health inequalities
2. Compromised ability to deliver Council statutory duties and business as usual including not delivering safe services and meeting needs
3. Trust and confidence and reputation of the council affected
4. Damage to city economy and the wealth of citizens
5. Capacity of staff, providers and contractors tested
6. Health and wellbeing impact on those delivering services
7. Emergency operating arrangements increase budget overspend
8. Sustainability of local tax base affects council's financial position to deliver Corporate Plan

Existing Controls

First Line of Defence: Management Action

1. BHCC Public Health Department in HASC maintains oversight of assurance of local infectious disease and health protection.
2. BHCC Public Health Department works closely with UK Health Security Agency (UKHSA), the national specialist and lead agency for health protection including advice and guidance, in managing outbreaks and incidents. The local authority delivers local leadership for health and wellbeing including working with the UKHSA SE Health Protection Team to manage the local consequences of outbreaks and incidents. In practice UKHSA, the local authority, NHS Sussex and other partners work together as a single public health system. Plans are in place that describe the roles that each organisation delivers including in response to outbreaks and incidents.

3. Brighton & Hove Health Protection & Screening Forum meets quarterly, chaired by lead BHCC Public Health Consultant on behalf of the Director of Public Health, and operates an annual programme that maintains oversight of the local health protection system. Membership includes BHCC Public Health, BHCC Emergency Resilience Team, NHS Sussex, NHS England and UKHSA.

4. Infectious disease population data and outbreaks in vulnerable people's settings including care settings, homeless, schools and other sites are monitored as well as impacts on local population and health and care services. As part of the response data and information is proactively shared with NHS, BHCC and other partners as required. BHCC Care Settings Incident Management Team meetings are held regularly and scaled up if required

5. In event of a health protection incident or outbreak requiring enhanced communications, systems are established within BHCC Comms team in collaboration with UKHSA to provide appropriate internal and external communications, e.g., council website, press releases, councillor and stakeholder briefings and BHCC intranet, joining up with NHS and UKHSA Comms teams as required.

6. Cold weather, heatwave, vulnerable people and pandemic flu plans are updated annually by Public Health in collaboration with Council directorates and NHS partners and care settings emergency response plan is also updated annually by Adult Social Care in collaboration with public health and NHS partners.

Second Line of Defence: Corporate Oversight

1. Annual update on health protection assurance will be provided to the Brighton & Hove Health & Care Partnership Executive Group.

2. The City Council is a core member of the Sussex Resilience Forum (the Local Resilience Forum for Sussex) and the Local Health Resilience Partnership.

3. BHCC Emergency Resilience Team is well connected with neighbouring local authorities and blue-light services.

Third Line of Defence: Independent Assurance

1. UK Health Security Agency (UKHSA) review of local and regional health protection systems and MOU's.

Risk Action	Responsible Officer	Progress %	Due Date	Start Date	End Date
<p>Business Continuity Plans (BCPs) are quality assured and regularly updated with corporate oversight for any current and future pandemics</p>	Head of Safer Communities	75	31/03/23	17/11/21	31/03/23
<p>Comments: Reports are completed for the Executive Leadership team (ELT). The last update was presented at in October 2022. This showed that 71% of business continuity plans are in place and are quality assured. 21 services have not completed business continuity plans. Officers are currently looking at a refresh of the reporting timetable to ELT and a change of date for updating the plans going forward to June each year rather than September. Requests for plans and updates are sent to relevant directors on a quarterly basis.</p>					
<p>Ensure an appropriate service risk assessment is in place, reflecting Public Health/Government guidance which covers measures needed for the prevention of Covid transmission in the workplace</p>	Interim Head of Health and Safety	100	31/03/23	01/04/21	31/03/23
<p>Comments: Complete. Throughout the Covid-19 pandemic the Health & Safety team have worked to interpret government guidance and collate this into a Covid Risk Assessment, as required by the Regulations. This has included a Covid-19 template Risk assessment that services could adapt and a School specific Risk Assessment. It also involved advice and guidance around PPE usage which was incorporated into a PPE rationale. The H&S team also completed a Schoolwide audit and inspection of Covid Risk Assessments to determine legal compliance, as well as an inspection of a number of services/teams across the Council.</p>					
<p>Maintain Health Protection function of Public Health, providing assurance of health protection system and support to Council and commissioned services in managing the consequences of infectious disease and outbreaks. Continue to support prevention and infection control measures in high risk settings.</p>	Director of Public Health	90	31/03/24	01/04/22	31/03/24
<p>Comments: Throughout the Covid-19 Pandemic, Public Health has provided additional support to high risk settings in managing outbreaks and promoting prevention measures. Health protection objectives are to build resilience in these high risk settings having learnt from experience of outbreaks and maintaining services.</p>					
<p>Under the national Living with Covid policy and infection prevention and control guidance, UKHSA are leading on health protection with local Public</p>					

Health roles including consequence management in outbreaks and local assurance. We have also maintained enhanced support for Infection Prevention and Control to support high risk settings in Winter 2022/23. A local Infection Prevention and Control Network for care settings was launched in July 2022 and for homeless settings in August 2022.

Local Public Health continue to monitor data on Covid-19, influenza and other infectious disease ensuring a suitable response to identified risks and issues.

Public Health will continue to be up to date with government guidance and requirements from UKHSA. Also maintaining joint working with Sussex wide colleagues.

Public Health chair the local Health Protection and Screening Forum and an annual report will be produced later in the financial year.

