

Making Safeguarding Personal Within and Across Organisations

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What is Making Safeguarding Personal?

Making Safeguarding Personal is an approach to safeguarding that:

- Is person-led and person-centred
- Is outcome-focussed
- Enhances involvement, choice and control
- Improves quality of life, wellbeing and safety
- It is how professionals are assured by adults at risk that they have made a difference to people (**London Multi-Agency Adult Safeguarding Policy and Procedures**)

Why was Making Safeguarding Personal Introduced?

- Two key adult social care policies, **personalisation and adult safeguarding**, were developed separately and with contrasting aims
- Personalisation is largely concerned with **promoting choice and independence**
- Adult safeguarding is largely concerned with **protecting adults from harm**
- Practitioners need to implement both of these in a joined-up way

Chronology and Development of MSP

- **2010/11:** a Toolkit of Responses was developed
- **2012/13:** MSP pilots in 5 councils
- **2013/14:** 53 councils actively participated, reports, case studies etc published
- **2014/15:** Mainstreamed to all councils in England
- Included in the **Care Act Guidance**
- MSP for Safeguarding Adults Boards – **piloting in 2016**

What Making Safeguarding Personal Can Do

- MSP enables safeguarding to be done with, not to, people
- MSP focuses on achieving meaningful improvements to people's circumstances, rather than just on 'investigation' and conclusion'
- MSP utilises social work skills better than 'just putting people through a process'
- MSP enables practitioners, families and Safeguarding Adults Boards to know what difference is made in outcomes for people

Ensuring the person is at the centre

- Put the adult and their wishes and experiences at the centre
- Seek to enable people to resolve and recover
- Key questions for whoever is undertaking the safeguarding enquiry

What does the person want to happen?

How can we work with people to enable it to happen?

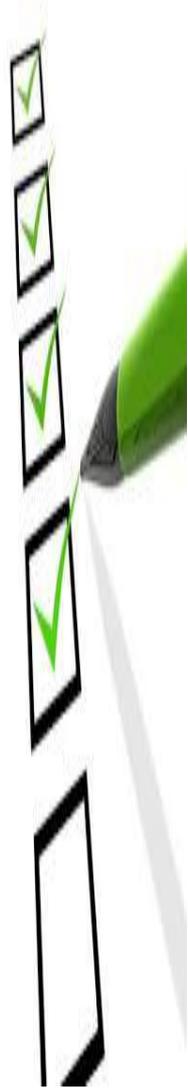
How do we know their outcomes have been understood and our interventions have made a difference?



Does the person feel safer and protected at the start of and throughout the process?

MSP evaluation 2014/15 (RiPFA)

- 95% of respondents thought MSP was **the right approach to be taking**
- People with more direct experience of MSP were more likely to think **the impact on people was beneficial**
- MSP helped improve practice locally, **making the best use of social work skills**
- Identified staff development needs e.g. Mental Capacity Act
- Mixed picture about whether MSP leads to a **greater use of resources and time, or not**
- Recording of outcomes needs more work
- MSP is changing **culture**, which impacts on providers



What kind of outcomes do people want?

- To be and feel safer
- To maintain key relationships
- To gain or maintain control over the situation
- To know that this won't happen to anyone else

Key recommendations

- Learn through sharing **good practice**
- Support a range of methods for **staff learning**
- Ensure that recording systems can evaluate the impact of MSP in order to understand what works well
- Ensure partner/multi-agency commitment to MSP/culture change through Safeguarding Adults Boards
- Use the Care Act to lever broader culture change

Challenges

- Financial climate
- Work to be done on understanding the longer term resource impact of MSP
- Competing imperatives - balancing risks to others and duty of care against wishes of the person

What are we doing in Havering?

- Safeguarding Adults Local Protocol
- Managing Safeguarding Concerns Toolkit
- Prevention Strategy

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What needs to happen now?

- Family Group Conferencing
- Motivational interviewing
- Work with partners to enhance multi-agency practice to ensure all people have the opportunity to discuss the outcomes they want at the start of the safeguarding activity
- Changing hearts and minds