



WSAB newsletter April 2024

Board Business

The Worcestershire Safeguarding Adults Executive Board now meets twice a year, whilst an operational Board meets four times. The last virtual Executive Board meeting was in March 2024. Part of the Board's role is to understand how any service changes, new policies or inspection findings are being implemented to ensure any potential safeguarding risks which may emerge from these are being considered or addressed. As part of the March Board meeting, we therefore had presentations and discussion on the following areas:

- An update from West Mercia Police on the recommendations from evaluation on the application of Most Appropriate Agency policy. [Link to Most Appropriate Agency Policy](#)
- Information on the new Safeguarding model from Adult Social Care
- Details on the Care Quality Commission assessment of the Herefordshire and Worcestershire Health and Care NHS Trust. [Link to Trusts page on the inspection](#)

Updates and items signed off at Board include the signing off of the updated Self-Neglect Policy, following review. This took account of information from a survey, alongside recent recommendations from Safeguarding Adults Reviews. Further information will be sent out on this when it is published on our website.

Annual Strategy Day and 2024 to 25 Business Objectives

The WSAB held its annual strategic planning meeting in January. At this meeting they utilized local information and feedback to identify priorities for the coming business year. The following objectives were then agreed by the Board.

1. Implement the Learning Framework to ensure SAR learning is embedded in practice. Areas of focus should include:
 - professional curiosity
 - Safeguarding rights
2. Continue to build links with other partnership to support the delivery of shared objectives including:
 - implementation of the Exploitation Strategy with the CSPs and/or SCP
 - Develop a shared approach to implementing recommendations of Domestic Homicide Reviews with the Domestic Abuse Partnership
 - Working with the Children's Partnership and Herefordshire SAB in establishing a robust assurance approach for reviewing the organisational assessments.
3. Implement the new actions identified in the Quality Assurance Framework, in particular:
 - Reviewing the themes identified by organisations through the regional assurance tool

SARs Published over the last six months.

A Safeguarding Adults Review (SAR) is a multi-agency review process which seeks to determine what relevant agencies and individuals involved could have done differently that could have prevented harm or a death from taking place. The purpose of a SAR is not to apportion blame. It is to promote effective learning and improvement to prevent future deaths or serious harm occurring again. The following SARs have been published over the last six months.

John (January 2024)

- [Rapid Review SAR Report – John](#)
- [Learning Briefing for professionals – John](#)

Themes in the SAR– Self-Neglect, Making Safeguarding Personal (MSP), Multi Agency Working (Managing Risk/Information Sharing)

Joseph (December 2023)

- [Rapid Review SAR Report – Joseph](#)
- [Learning Briefing for professionals – Joseph](#)

Themes – Making Safeguarding Personal (MSP), Care Homes, Discharge to Assess, Recordings (MDT), Mental Capacity Act (MCA)

Adult M (December 2023)

- [Learning Briefing for professionals – Adult M](#)

Themes – Making Safeguarding Personal (MSP), Multi-agency working, Mental Capacity Act (MCA), Hoarding

Dee (November 2023)

- [Learning Briefing for professionals – Dee](#)

Themes – Alcohol and substance misuse, Homelessness, Discharge Pathways

Peter (November 2023)

- [SAR Peter](#)
- [Learning Briefing for professionals – Peter](#)

Themes – Professional curiosity, Self-harm, substance misuse, Cuckooing/Home invasion, Exploitation, Multi-agency working, Self-Neglect

Ruth (July 2023)

- [SAR Ruth Executive Summary](#)
- [Learning Briefing for professionals – Ruth](#)

Themes – Multi-agency working, Making safeguarding personal, Professional curiosity, Neglect and Self-neglect

Further details on all SARS published in Worcestershire can be found by following this link: [Worcestershire Published Safeguarding Adults Reviews - Worcestershire Safeguarding Boards \(safeguardingworcestershire.org.uk\)](https://safeguardingworcestershire.org.uk)

Other Updates

In February the Worcestershire Health and Wellbeing Board published Hoarding Disorder Needs Assessment as part of the Worcestershire Joint Strategic Needs Assessment.

It can be found at this link: [Hoarding Disorder Needs Assessment - February 2024 .pdf \(worcestershire.gov.uk\)](https://www.worcestershire.gov.uk/hoarding-disorder-needs-assessment-february-2024.pdf)

This report is the first Hoarding Disorder Needs Assessment. It is focused on epidemiological aspects. Work looking at reviewing existing pathways is ongoing.

In Summary The key takeaways from this report are:

- Hoarding Disorder is a mental health disorder that has only been recognised as a separate condition until very recently (2017 in the classification system used in the NHS). A consequence of this is that our understanding of the prevalence, its causes, its natural history and treatment is poor. It may not even be a single entity.
- Not all clutter indicates Hoarding Disorder. Clutter can be associated with a number of other mental health conditions including dementia. It is important to distinguish between the two as the treatment and management is different.
- Individuals with Hoarding Disorder often have other serious mental health problems, including depression, Generalised Anxiety Disorder, Obsessive Compulsive Disorder and Attention Deficit Disorder.
- Currently there is no mechanism for individuals to be properly clinically assessed to diagnose Hoarding Disorder and other mental health conditions (for example depression) which can be treated.
- The most quoted prevalence is 2.5% of the population yet only a very small numbers are in contact with health and care agencies – this is mostly a hidden disorder. Many individuals who hoard do not have insight to the fact they hoard, despite the evidence before them, or they are afraid to discuss it because of feelings of shame.
- The pattern of behaviour starts at a young age (usually before 19 years of age). Middle and late age onset is very rare, yet most individuals known to services are older. The age at which contact with agencies occurs is usually 50 and above.
- There are no really effective treatments, although there are ways of supporting individuals to manage the condition.
- It has been established that for those with true Hoarding Disorder, a single clear out is highly detrimental and so it is unfortunate and harmful that in the media a different impression of its management is given.
- Hoarding Disorder has major negative impacts on individuals in terms of their physical and mental health (for example increased falls, social withdrawal, and isolation etc.), and their social functioning. Individuals are at greater risk of premature death and older individuals at greater risk of being admitted to a care home.
- Those living in a household where an individual hoards are also at risk of poor mental health and other negative effects.

- Other than the Fire Service, other agencies, including the NHS, do not record when an individual has a Hoarding Disorder. As a system we are therefore 'blind' to what contact there is being made across agencies.



