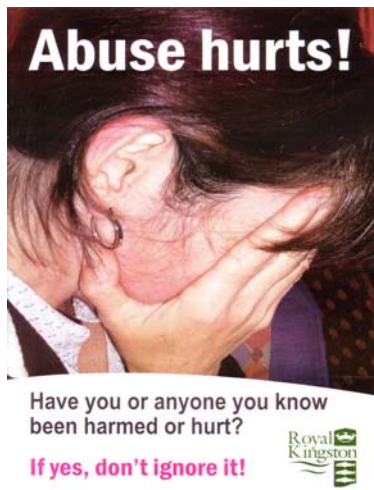


VULNERABLE ADULT PROTECTION COMMITTEE



ANNUAL REPORT 2005 - 2006

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Chair's Introduction

The last 18 months has seen the number of cases of vulnerable adults referred to the Royal Borough of Kingston's Community Care Services continue to increase in response to the increased level of awareness amongst both professionals and the general public of the importance of recognising and reporting the abuse or potential abuse of adults. The Multi Agency Protection of Vulnerable Adults Committee has continued to meet throughout the year and has overseen an increase in the level of training and publicity material relating to adult abuse.

Individual situations continue to stretch the skills of all those involved in protecting vulnerable people and we remain lucky in Kingston that our close inter-agency relationships enable us to work closely together for the protection of the most vulnerable members of our communities and to be able to continue to ensure that we all do all we can to protect them from abuse.

Simon Cole

Chair, Kingston Protection of Vulnerable Adults Committee

Definitions

A Vulnerable Adult is defined in the "No Secrets" guidance as a person aged 18 years or over, who is or may be in need of community care services by reason of mental or other disability, age or illness" and "who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation" (Dept of Health 2000 para 2.3)

"Abuse may consist of a single act or repeated acts. It may be physical, verbal or psychological, it may be an act of neglect or an omission to act, or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented, or cannot consent. Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it" (Dept of Health 2000 para 2.6)

Abusers may be "relatives and family members, professional staff, paid care workers, volunteers, other service users, neighbours, friends and associates, people who deliberately exploit vulnerable people, and strangers" (Dept of Health 2000 para 2.10)

Acknowledgements

Grateful thanks to all those staff, service users and carers from all organizations and agencies across all the sectors who have worked in partnership as members of Royal Borough of Kingston upon Thames' multi agency Adult Protection Policy and Procedure to develop and promote the work of protecting vulnerable adults from abuse.

Introduction

This report is written for members, managers and the staff of all agencies and organisations, family carers and customers involved in the care and protection of vulnerable adults in Kingston

This is the second Annual report to the Vulnerable Adult Protection Committee (VAPC) following its establishment in December 2001. Last year's report focussed the summary of the activities of VAPC committee in Kingston the first overview and summary of Adult Protection referrals and activity, and a training strategy for staff. It also included the objectives for 2005/2006

This report summarises the main work of the committee, also proposes priorities for 2006.

Summary of VAPC agendas and decisions 2005/2006

During the course of the year the VAPC has identified and agreed issues for action including the need for Adult Abuse awareness training, training in interview techniques, and training in the implementation of the POVA list has also been a subject of discussion and the VAPC has agreed a strategy for Adult Abuse training.

The report on Elder Abuse by Daniel Blake and Action on Elder Abuse, the Sexual Offences Act and the draft Mental Capacity Bill have also been a focus of discussion, and changes to the abuse monitoring form flowed from this.

The review of the POVA procedure was completed and sections of the procedure had been sent out to the relevant organisations for comments. The revision included a flow chart of the procedure which could be laminated with a **short order procedure** on the reverse side.

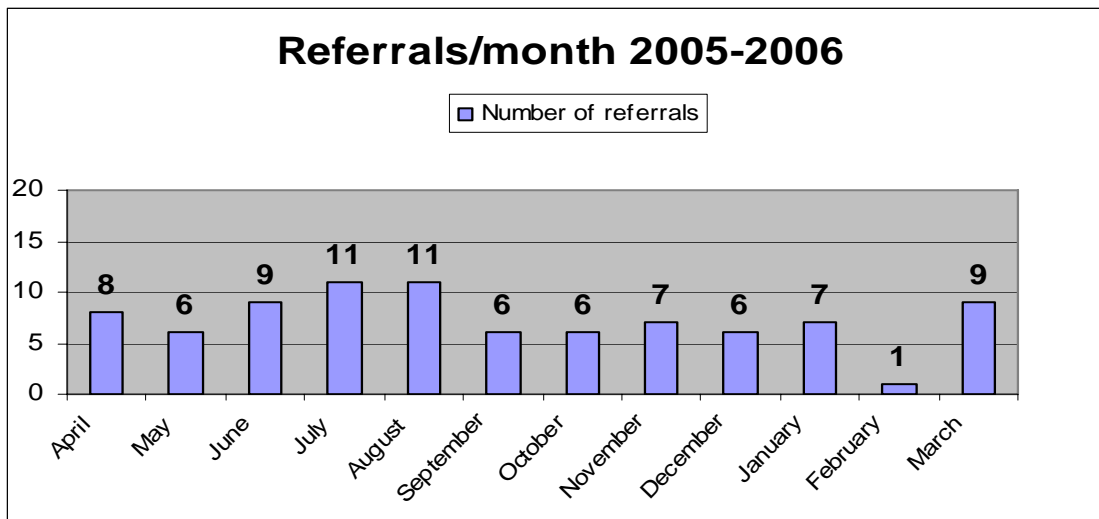
A public leaflet entitled "Abuse Hurts" was released in 2006 and this is available in audio tape, Braille, computer disc, large print formats and other languages on request.

At the last meeting VAPC membership was reviewed and invitations were sent out to individuals who had expressed interest in becoming members of the committee. There was also a discussion about how best to audit Adult Protection activity and outcomes.

Referrals: Monitoring and Statistics.

There has been a decrease in referrals of 23% since the last report (113 to 87) with a drop in numbers of elderly physically frail referrals – 46%, and a drop in the numbers of referrals for people with physical disability from - 42%. Across the remaining client groups however, the figures were roughly the same as last year.

Monthly figures also show a drop over the year and there appears to be a remarkable similarity in the monthly pattern across the year with the peak of referrals coming in the months of June to August and the lowest level in February and March.



Physical Abuse

It is evident from the reports on referrals that physical abuse is a prevalent form of abuse (47%) in particular of people with Learning Disability (31%), and Older People (25%) both whilst living at home (44%) and in care settings (46%).

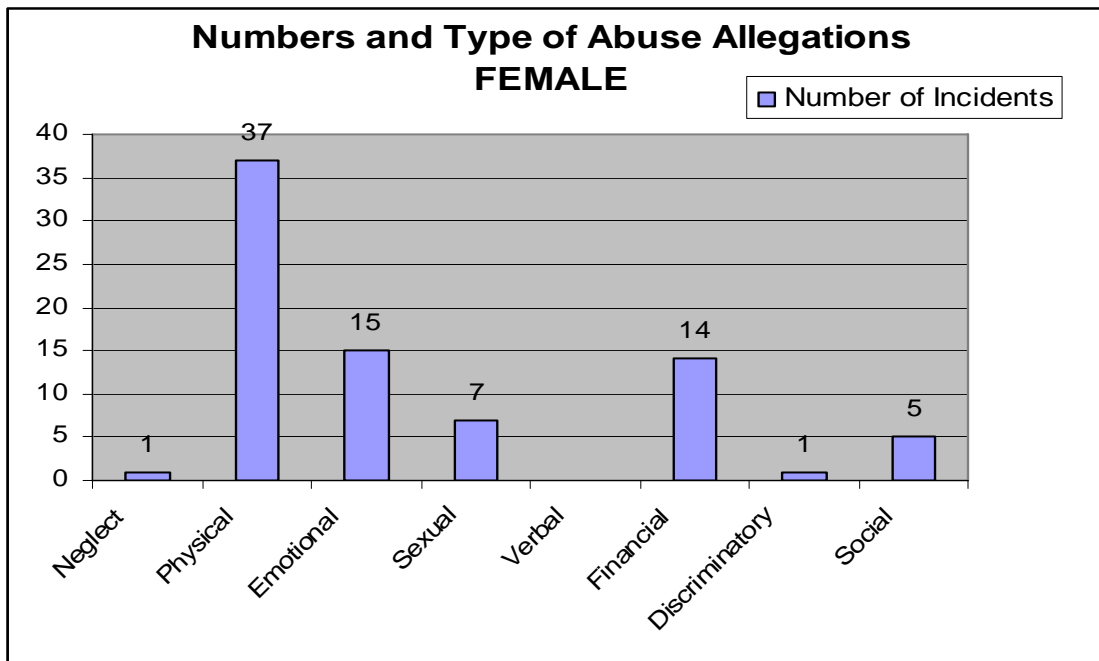
However the differences between male and female service users reflect national trends with female Service Users being at least twice as likely to be abused as male service users – see charts below:

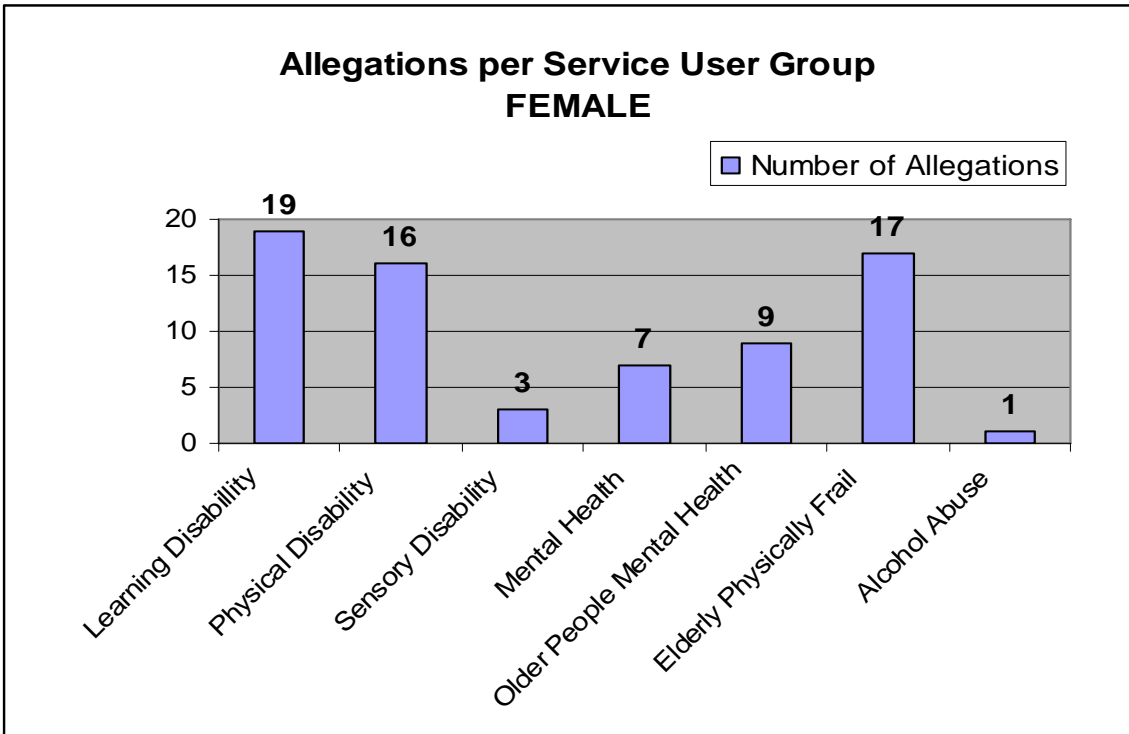
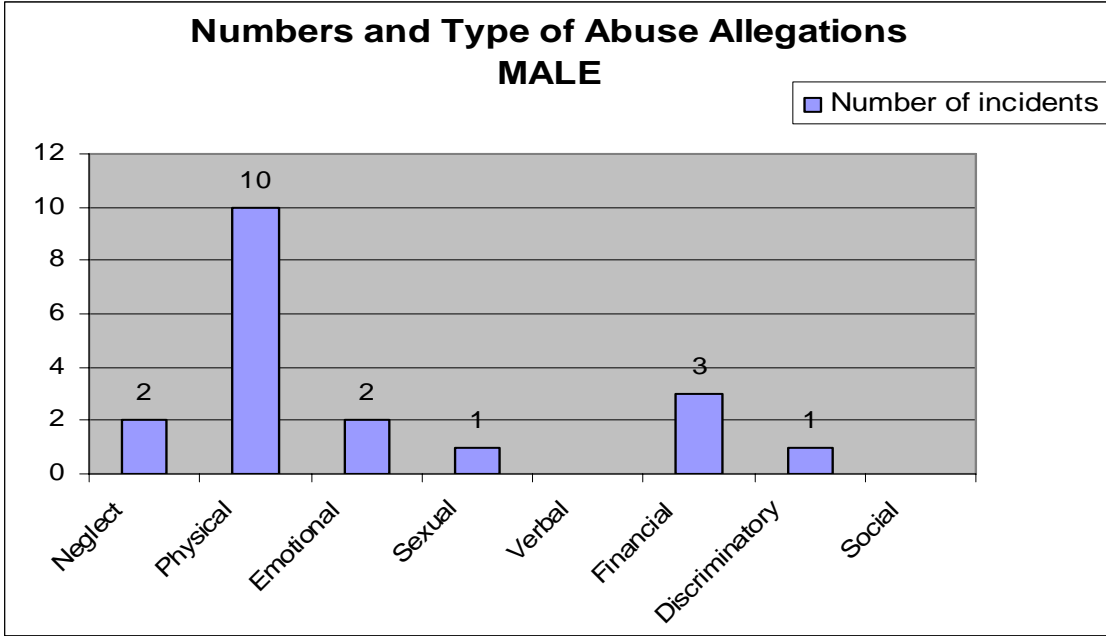
Financial and Emotional Abuse

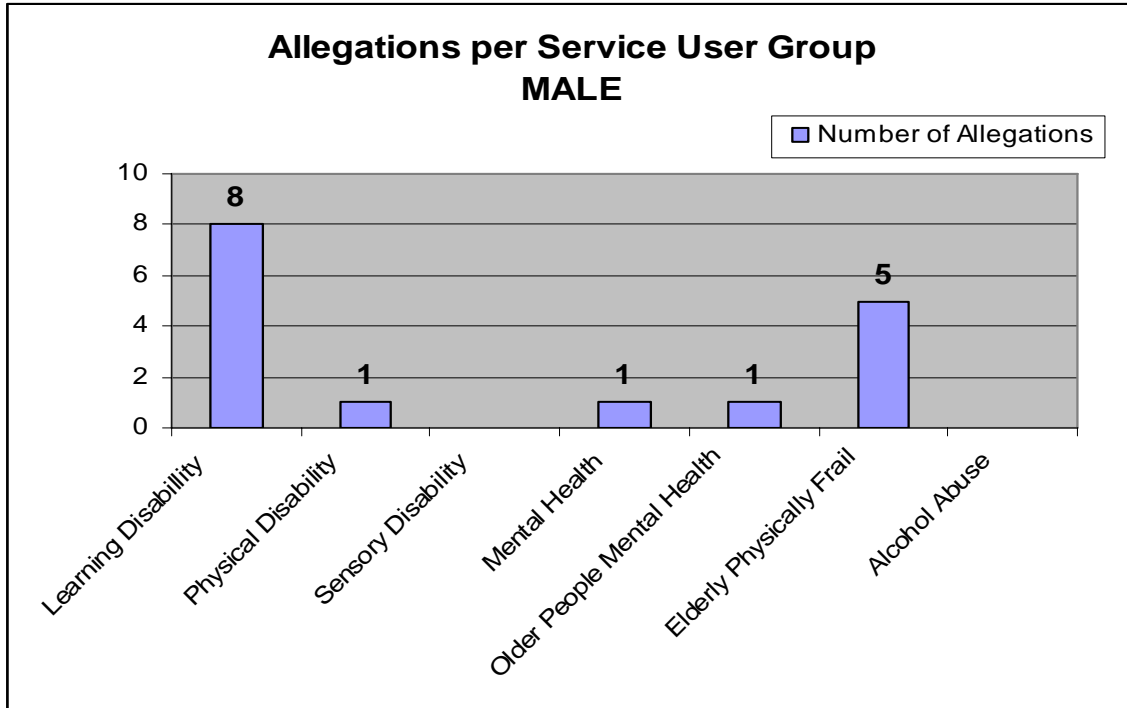
Both of these categories of abuse are important although in terms of the reports. Financial abuse represents 17% of the referrals as does Emotional Abuse (17%).

Whilst emotional abuse is more difficult to identify in some cases the level of financial abuse especially in cases where the Police are involved reflects national concerns particularly from the report on Elder Abuse by the Commons Health Committee (2003/04) which stated

“We advocate that the prevention, detection and remedying of financial abuse should be included as specific areas of policy development by adult protection committees”

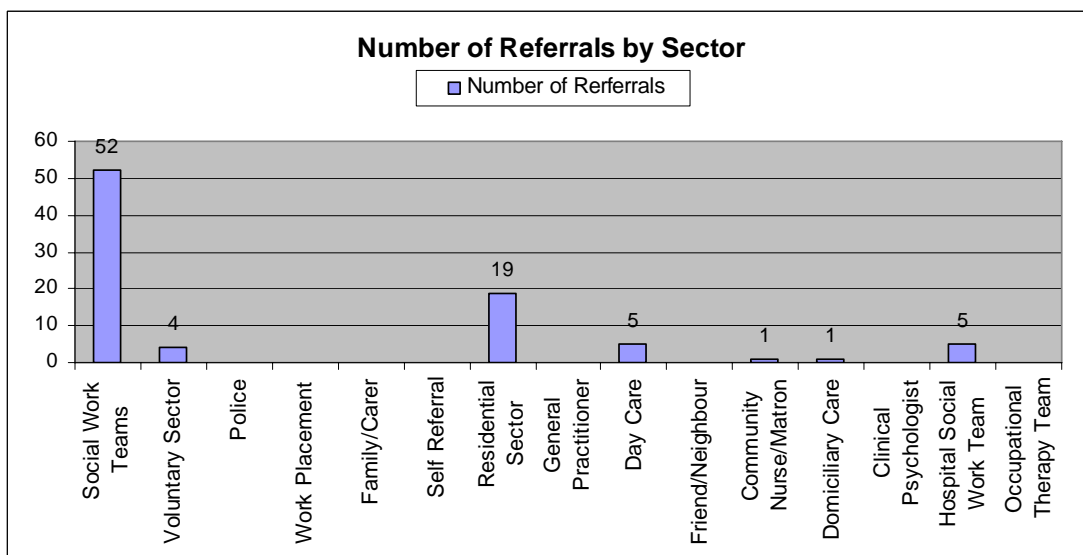






Sources of Referrals

Again this year in comparison to the previous report, the bulk of referrals received were from Social Work Teams and the Residential/Nursing Care sector, with 76 of the total 87 referrals recorded this year, with the remaining coming from Day Care, Community Matrons and Domiciliary Care.



Health Services

Engaging effectively with Kingston's Primary Care Trust in terms of progressing the issues raised in the report produced by Daniel Blake and Action on Elder Abuse¹ must be a priority for next year, as is the on going training for Health staff even though the take up over the past 12 months of the Adult Abuse awareness training courses has had a less than enthusiastic response from Health staff in terms of numbers attending.

A survey of recent POVA courses showed the following attendance:

RBK staff	73%
Health staff	2%
Resource Centre staff	25%

1. Adult Protection in England – An analysis of the current situation regarding Adult Protection referrals. D Blake and Action on Elder Abuse

Training

There have been several well attended courses throughout the year with a total of:

Courses on POVA Awareness

These courses were provided to a wide range of staff including Private and Voluntary providers, front line staff, and health staff

Courses on the POVA List and Employment Law

These courses covered in detail the new legislation around the POVA List and its effect on employment law. It was run in conjunction with Annie Zlotnick and a barrister Jeffrey Gordon.

2 Day courses on POVA Investigation and Interview Techniques

This course examined some strategies for practice in a **multi disciplinary** way with discussions about working in partnership with families of victims, alleged abusers and victims of abuse and identifying techniques (including interviewing skills) for working with difficult abusive situations

It also provided an understanding of the present legal framework for dealing with adult abuse and to be able to work within the context of local policy

Each of these courses received excellent evaluations from the participants and the trainer was Annie Zlotnick MA MSW who is a well respected trainer in the London area with many years experience.

In total 132 people attended the courses with attendance from staff in the Private and Voluntary Sector, and Resource Centres. The remainder were from Social Care staff.

Colin Lang

Development Officer

Assessment and Care Management

POVA committee member