



**Safeguarding Adults Board. Peter review – Learning Event 23<sup>rd</sup> June 2023**  
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# Peter SAR

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## **Surrey Adults Matter**

*Part of the Making Every Adult Matter approach*

- Peter was referred to SAM in early 2020. He was one of the first 20 clients to be supported in the new approach for adults with multiple complex needs.
- SAM was in its infancy and still learning about the Surrey landscape for Adults with Multiple Disadvantage. We were still trying to embed the new multi - agency approach, collaboration and information sharing principles. The focus was very much on looking at how adults with multiple disadvantage fall between gaps in systems and services. The data was then used to inform the way we work with clients today.
- There have been significant developments in the way we approach our work and additional resources have been provided .How are we doing since this SAR took place ?? What is the learning ?

# SAM in 2023 – where are we now ?

- We hold approximately 50 Team Around the Person Meetings per week
- Attendance at these meetings is excellent and is now “business as usual” across the wider workforce.
- Attendees include; Adult Social Care; Surrey Police; CMHRS; I-Access, substance misuse teams; probation; D&B Housing teams; community safety teams; ASB teams; supported housing providers; GP’S; Housing Associations; Care Co Ordinator’s; Hospital clinicians, alcohol liaison teams; Consultant Psychiatrists; Prison staff; Charity and Voluntary Sector, clients themselves and their families
- Clients often say the TAP is the only time their care is discussed with them. Clients have joined meetings from prison; hospital; mental health units; day centres; and from their own homes with a keyworker or using their own devices

# SAM 2023

## **S A M** **Surrey Adults Matter** *Part of the Making Every Adult Matter approach*

- Regular presentations are made to ASC teams, - social workers often contact for advice on casework and to discuss potential referrals. Presentations to probation, housing, CMHRS and CHARMM meetings.
- Attendance at MARAC; MAPPA, MACC and HHPU –Several clients are prolific offenders
- Surrey is now a Changing Futures area - 4.8 million in funding for multiple disadvantage work. Has meant the creation of trauma informed assertive outreach service. 10 CVS alliances with 20 specialist trauma informed workers, providing outreach to SAM clients and those with MD
- Forward Trust – Hard to House initiative OPPC sponsored
- Cabins – provision of emergency accommodation for MD clients / homeless, winter pressures

## • What were our recommendations from the SSAB and how have these been implemented?

- Guidance on the inclusion in TAP meetings of the adult, their carer or people important to them -
- In relation to the Peter case, we had asked in the TAP about the inclusion of family members. We were advised they were estranged, and his elderly mother would not be able to participate in meetings. It was then a shock in the review period to find family members being discussed.
- We have updated our referral form to include NOK and family members contact details, so that with client consent they may be contact by us and invited to their TAP. This also includes those in advocacy roles.
- Guidance on the inclusion of health professionals within the TAP, particularly for those where there are concerns regarding ABI or cognitive decline associated with long-term substance misuse/ alcohol dependency;
- In the case of Peter, it was working well whilst he was engaging with i-access. Once he was disengaged and transient in his accommodation it became harder to link in with out of area services and to understand his medical needs .Hospitals use different digital information systems, so it is not easy to navigate. We now have much better links with ALN, Hospitals and the Reconnect service for those leaving our prisons.
- We have created a TAP Guidance for professionals soon to be uploaded onto the Healthy Surrey website and disseminated as part of a referral pack. The document outlines the expectations on partners involved in the TAP process and who is to be invited to attend.

- Guidance on when it would be appropriate for partner agencies to request (and share with the TAP) medical or legal expertise in respect of an adult's capacity to make decisions especially if this is regarding care, treatment or residence;
- We have added this into the TAP guidance document. In the case of Peter , the issues around mental capacity to make decisions specific to his circumstances, was raised and assessments conducted several times but with different outcomes. We are still requesting this in TAP meetings and have a pool of medical staff in the wider workforce involved in TAP meetings where appropriate, than we did in 2020 as the service has developed significantly.
- • An escalation process to the SAM Steering Board that requires the swift involvement of a multiagency senior leaders (and budget holders) in resolving disputes or reviewing entrenched cases;
- This has always been the case .Peter was due to be one of those cases escalated in the days after his last prison release but unfortunately his untimely death took place before this could happen. His case had been escalated on a previous occasion during the pandemic when he was not offered accommodation as part of the Covid " everyone in " initiative. He was offered accommodation, but this quickly broke down. We have a risks and issues log in Steering Group, where barriers and blocks in systems and services are regularly reviewed.

- How the SSAB and SAM Steering Board will report emerging themes or safeguarding issues to the Health and Wellbeing Board, including issues arising from lack of resource, disputes or complaints and how the SSAB and Steering Board will disseminate key learning or system improvements back to frontline staff.

We have not experienced any disputes or complaints regarding the Surrey Adults Matter approach thus far. We have included in our TAP guidance for professionals how any concerns might be raised and managed. Multi agency risk assessments are now used for complex cases and updated in TAP meetings as a live document where risk might appear to be escalating. Clients may also be referred to MAPPA where agencies agree this pathway. We are currently developing a Multiple Disadvantage Newsletter where emerging themes and key learning can be shared with frontline staff

# Take away thoughts / SAM learning

- Surrey now has a Multiple Disadvantage Team, supporting adults with multiple and complex needs
- The introduction of the Bridge the Gap, trauma informed outreach service has made a significant difference to how clients can engage better with systems and services when someone walks beside them. Clients can receive 4- 8 hours a week of intensive outreach support – this was not available in 2020
- We now refer clients leaving prison to the Reconnect service when they may have additional health needs and support to access healthcare when transitioning back into the community – this was not available in 2020
- Clients with multiple disadvantage are less able to cope when given accommodation outside of Surrey. It is often setting them up to fail. We regularly see homeless MD clients placed in bed and breakfast in London Boroughs where they do not know anyone , unable to access support and having to either travel back to Surrey to get support or have their case transferred elsewhere . This is setting them up to fail – this area of work needs greater collaboration with housing departments and a pooling of resources for future use – ongoing action for multiple disadvantage work.



# Take away thoughts / SAM learning

- The mental health and housing protocol between housing departments and SABP in Surrey is now live. Ensures no mental health hospital discharges are taking place without HTT input and suitable accommodation.
- Access to a consultant psychologist now embedded in the team
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