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1. Forward by the Independent Chair

– Dr Carolyn Kus

I am pleased to present this year's BSAB Annual Report, which highlights our achievements, outlines future opportunities, and assesses the Board's effectiveness while providing the public with an overview of our work and priorities.

The report has been styled to be informative and to give as much detail as possible of the work of BSAB we have used infographics to make the data more accessible, we have also included citizens stories and learning from these. I encourage you to read and share the report.

As a Board we are responsible for seeking assurances from all partners that vulnerable and at-risk individuals are appropriately safeguarded, and it is important that the public, partners and wider organisations are given an insight and understanding of the work of BSAB. Operating independently, allows the Board to provide unbiased oversight and for open questioning across the partnership. Its primary role is to ensure the safety of vulnerable individuals, and its independence supports objective oversight.

This year, partners have worked collaboratively to address several key areas of concern, including homelessness and rough sleeping, the sharing of data intelligence, and self-neglect. These focus areas are reflected in our strategic priorities, and our new "plan on a page" highlights the actions being taken to address these.

As a Board we are committed to reflecting on our impact and are continually seeking opportunities for learning and development to further strengthen the partnership. This year, particular emphasis has been placed on enhancing governance, updating our induction programme, and providing development sessions for Board members. We have also updated our Board agenda to incorporate themed sessions on key areas of interest or concern.

I would like to acknowledge the ongoing support of partners, citizens, and organisations, and I look forward to our continued working together to achieve our strategic priorities for the citizens of Birmingham.



Dr Carolyn Kus
Independent Chair

“

Working together to make Birmingham a place where vulnerable citizens live without fear of harm and neglect.



2. BSAB Board

Welcome to Birmingham Safeguarding Adults Board (BSAB) Annual Report for 2024-2025.

The Care Act 2014 makes the forming of a Safeguarding Adults Board (SAB) a statutory requirement, the board comprises of senior leaders from key agencies responsible for adult safeguarding in Birmingham. The effectiveness of the board is reliant on the commitment, collaboration and support of key stakeholders, partner agencies and other local and regional Boards. BSAB is independent which enables it to provide effective scrutiny of local adult safeguarding arrangements, the Board meets quarterly and takes a strategic lead in the protection of adults with care and support needs.

The Annual Report (a requirement of the Care Act) gives BSAB the opportunity to share annually their progress, challenges and areas of identified development. As an added element of oversight, BSAB presents the Annual Report to both Overview and Scrutiny Committee, as well as the Integrated Care System through the Place board, on an annual basis. Our main purpose as a Board, is to obtain assurances that local safeguarding arrangements across the partnership are in place and are robust to protect the welfare of local citizens who may be at risk of abuse and/or harm, and to take relevant measures where concerns are raised.



BSAB's membership is made up of senior officers nominated by partner agencies, partners of the Board have delegated authority to represent and to make decisions on behalf of their organisation. Members of the Executive Board are:

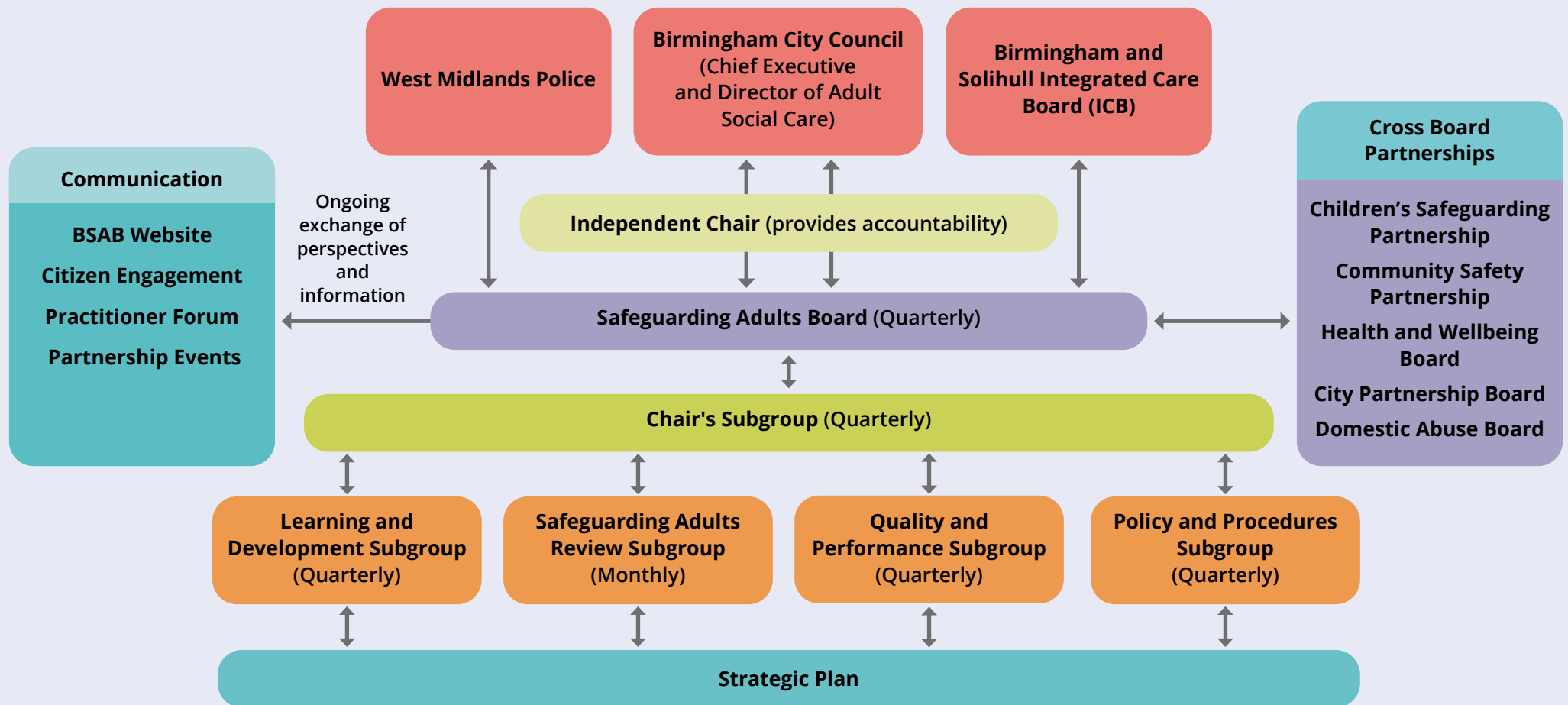
- Birmingham City Council - Adult Social Care.
- Birmingham City Council - City Housing.
- West Midlands Police.
- Birmingham and Solihull Integrated Care System (ICS).
- Healthwatch Birmingham.
- West Midlands Fire Services.
- Voluntary Sector Representation – Women Acting In Today's Society (WAITS).
- Birmingham Community Healthcare Foundation Trust.
- Birmingham and Solihull Mental Health Foundation Trust.
- University Hospitals Birmingham.



BSAB's Board Structure 2024-2025

The diagram below demonstrates our governance model for the work of the Birmingham Safeguarding Adults Board and how we connect with other Partnerships who have wider safeguarding and wellbeing responsibilities for citizens of Birmingham:

The Board Governance Model has been designed within the framework of the statutory requirements, accountabilities and key principles of safeguarding.



3. How is BSAB Funded?

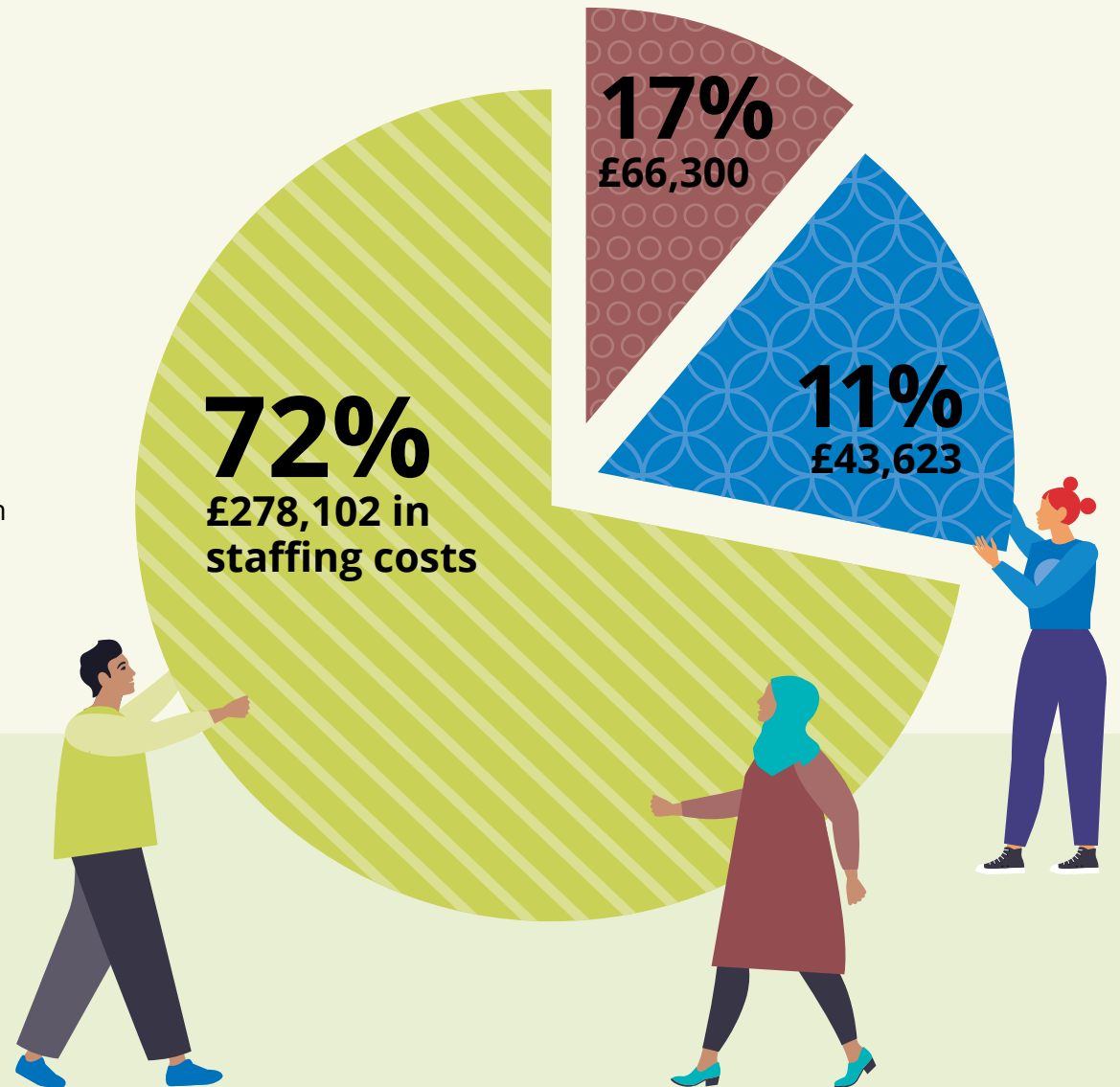
In 2024-25 we had £388,025 to spend. This money represents the contributions from West Midlands Police, Birmingham City Council and combined contributions from Birmingham and Solihull Integrated Care System.

Partners also work together and provide staffing resources where needed in addition to the allocated fund. This was enough money to pay for what we planned to do, and for us to keep some reserved in case we needed to carry out any Safeguarding Adults Reviews.



Financial Contributions 2023-24

-  Birmingham City Council
-  Birmingham and Solihull Integrated Care System
-  West Midlands Police



4. Key Safeguarding Facts for 2024-2025

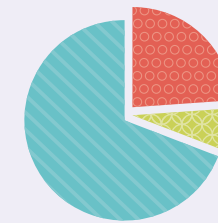
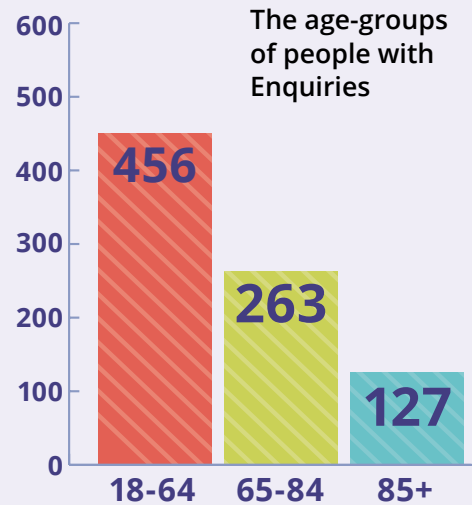
876,858

adults live in
Birmingham



152,753

are aged 65 and over



69%

(486) Enquiries listed the source of risk as someone known to the person at risk

26%

(186) Concluded enquiries involved service providers

5%

(35) Enquiries listed the source of risk as someone not known to the person at risk

2%

Increase in the number of concerns raised, up from 13,627 last year

93%

Decrease in the number of enquiries started, down from 961 started last year

240

Enquiries involved allegations of neglect

187

Enquiries involving allegations of psychological abuse

438

Abuse or neglect occurred in the person at risk's home

158

enquiries involved allegations of physical abuse

267

Enquiries involved allegations of financial abuse

Ethnicity of enquiries raised:

475

White British

277

Black and Minority Ethnic

94

Not Known

By **Concern** we mean the reporting and responding stage in the safeguarding process under the Care Act 2014.

By **Enquiry** we mean the planning and undertaking of the enquiry stage in the safeguarding process under the Care Act 2014.

5. Our Vision and Core Duties

“Working together to make Birmingham a place where vulnerable citizens live without fear of harm and neglect.”



During the period 1 April 2024 and 31 March 2025 the board met 4 times and was supported by the Subgroup Chairs Meeting and three subgroups - Learning and Development, Safeguarding Adults Reviews and Quality and Performance. A fourth subgroup relating to Policy and Procedures was created at the end of the year.

Safeguarding Adults Boards have three core duties as detailed by the Care Act 2014:

- **To publish a Strategic Plan setting out how they will meet their objectives and how their members and partner agencies will contribute. The plan must be developed with the local community involvement and the SAB must consult the local Healthwatch.**
- **To publish an Annual Report detailing what the Birmingham Safeguarding Adults Board (BSAB) has done during the year.**
- **To conduct any Safeguarding Adult Reviews in accordance with Section 44 of the Care Act.**

The Annual Report 2024-2025 provides an overview of the Board's achievement against our Strategic Plan.

The Annual Report, Strategic Plan and the principles of the Board are fully aligned with the six key principles outlined in the Care Act 2014.



Empowerment

I am consulted about the outcomes I want from the safeguarding process and these directly inform what happens.



Prevention

I am provided with easily understood information about what abuse is, how to recognise the signs and what I can do to seek help.



Proportionality

I am confident that the responses to risk will take into account my preferred outcomes or best interests.



Protection

I am provided with help and support to report abuse. I am supported to take part in the safeguarding process to the extent to which I want and to which I am able.



Partnership

I am confident that information will be appropriately shared in a way that takes into account its personal and sensitive nature. I am confident that agencies will work together to find the most effective responses for my own situation.



Accountability

I am clear about the roles and responsibilities of all those involved in the solution to the problem.

6. Progress and Achievements of the Board 2024-2025

For the period 2024-2025 BSAB achieved several key achievements and identified areas for learning and development which has been incorporated into the new strategic plan and identified priorities.

Key Achievements	Key Actions for Next Year
• New strategic plan with agreed priorities. • Plan on a page. • Subgroups new Terms of Reference (TOR) and reporting structures. • New Policy and Procedures subgroup formed. • Proactively sought assurances from partners through continued, constructive engagement at Executive Board meetings. • Kept our information leaflets up to date to inform professionals and citizens on safeguarding. • Continued to strengthen our working with Children's Trust looking to identify areas of commonality for joint working. • Ongoing work with and input into regional and national safeguarding groups and Boards. • Continue to strengthen and develop our dashboard to be more inclusive of partners data to enable us to focus on the wider aspects of safeguarding. • Facilitated development sessions with partners to celebrate what works well and collaboratively identify areas for future focus and improvement. • We have signed up to the regional DWP protocol to strengthen collaboration and proactively identify potential safeguarding concerns. • Held Practitioner Forums with a focus on Trauma Informed Practice. • Published and presented the 2023–2024 Annual Report to Birmingham City Council Overview and Scrutiny Committee, the Integrated Care System (ICS) Place Board, and the Health and Wellbeing Board. • Put in place Ministerial recommendations regarding homelessness. • Invited Newcastle City Council to present their 'Adult at Risk of Exploitation Framework' at an Executive Board meeting to support shared learning and best practice.	• Develop a Comprehensive safeguarding dataset that integrates contributions from all partners. • Develop and launch a BSAB Communication and Engagement Strategy. • Continue to develop and coordinate safeguarding conferences and board development sessions. • Individual Board Members development sessions. • Develop escalation policy and process. • Ensure our Quality Assurance Framework is fully implemented to reduce risk of neglect and abuse. • Review and update the self-neglect guidance. • Promote the use of advocacy.

7. Progress and Achievements of Partner Organisations 2024-2025

Below is information in relation to achievements by key partners and what they plan on working on in the coming year:

Birmingham Community Healthcare NHS Foundation Trust

Key Achievements	Key Actions for the next year
• The BCHC Safeguarding team has made significant progress in enhancing safeguarding practices and embedding a strong safeguarding culture across the organisation. • Key achievements include: Robust safeguarding policies, training, and supervision have been established in line with statutory and local standards, monitored through audits such as the West Midlands Section 11 and Care Act 2014. Internal and multi-agency audits, along with an external 360 audit, have confirmed a sound governance framework and consistent safeguarding controls. • Staff training and development are aligned with safeguarding responsibilities, focusing on compliance, competence, and quality assurance. The team has increased safeguarding visibility by promoting services Trust-wide and setting up divisional safeguarding meetings linked to governance structures. • The 'Think Family' approach integrates adult and children's safeguarding duties, ensuring a holistic response. • Strengthened multi-agency partnerships have improved decision-making and earned positive recognition.	• Continue to fully integrate the Think Family safeguarding approach across BCHC. • Review safeguarding efficiency and productivity to align with national and local NHS standards. • Enhance the safeguarding wellbeing of colleagues by understanding the impact of complex safeguarding issues on the workforce. • Promote and apply the Domestic Abuse Prevention Strategy 2025–2029 to support patients, families, and staff. • Ensure effective implementation of learning outcomes from safeguarding reviews. • Support the Sexual Safety in the Workplace Charter. Embed the Self-Neglect Pathway into BCHC's organisational culture. • Review cases of children not engaged with universal health services (BSCP, 2025–2027). • Support the Mandatory Learning Oversight Group (MLOG) to maintain consistency in safeguarding training. Strengthen evidence that BCHC safeguarding is guided by the lived experiences of adults.

Birmingham Community Healthcare NHS Foundation Trust Continued

Key Achievements	Key Actions for the next year
• A conference on domestic abuse enhanced staff skills, while flexible training delivery blending e-learning and virtual session led to maintaining high compliance (85%+). • Collaboration has been boosted through the Shared Care Record, improving information sharing and safeguarding decisions. Quarterly newsletters support communication and ongoing learning. • Safeguarding is aligned with the Patient Safety Incident Response Framework and Essential Care Accreditation to uphold care quality, especially for adults. Additionally, bespoke training on UK safeguarding laws has been provided for overseas recruits. • These achievements highlight BCHC's commitment to safeguarding excellence and continuous improvement in protecting vulnerable individuals.	• Ensure patient voices are heard and safeguarding quality is reviewed according to the Essential Care Framework. • Continue to enhance data sharing and collaboration within safeguarding networks. • Support and embed key priorities of the Birmingham Safeguarding Adults Board (BSAB) into practice. • Strengthen partnership working and contribute to safeguarding initiatives led by the Integrated Care Board (ICB).

Birmingham Public Health

Key Achievements	Key Actions for the next year
• The Public Health Division has sought to include trauma informed practice training into its offer for staff and specialty registrars on placement with us. • Safeguarding training remains an essential component of our mandatory training for all staff. • Reviewed safeguarding elements within our contract review monitoring arrangements.	• Conduct a safeguarding audit as part of the Regional West Midlands Section 11 process.

Birmingham and Solihull Integrated Care Board

Key Achievements

- We continued to work in collaboration with our safeguarding partners to safeguard, promote health and wellbeing and protect the rights of those in most vulnerable situations within Birmingham and Solihull.
- We have continued to work in partnership on the implementation of the Serious Violence Duty and monitor how it is working in practice.
- We held a successful Level 4/5 training event for all the Designated and Named Safeguarding professionals.
- We have continued to participate in the Domestic Homicide Reviews, Safeguarding Adult Reviews, learning reviews. Themes, trends have been monitored and cascaded the recommendations, learning via 7 min briefings, newsletters, supervision and GP safeguarding forums.
- We continued to work collaboratively with our partners and as a statutory member we remain committed to the BSAB and it's subgroups.
- We have also been monitoring the Birmingham City Council (BCC) adult safeguarding notifications (open and closed), whereby the adult / care provider is ICB funded or notifications relating to providers where the ICB provide adult funded care packages. We monitor themes/trends and flag concerns which are shared with local authority, ICB, CHC, patient safety and quality teams, as well as the ICB mental health and learning disability leads.
- We have undertaken a number of safeguarding audits across Primary Care that focussed on Domestic Abuse, Safeguarding knowledge and how applied in practice, Self Neglect/hoarding and Exploitation and Risk factors.
- An MCA and DOLS assurance tool was developed and shared across the system to identify areas of good practice and also of any challenges/barriers.

Key Actions for the next year

- We will continue to monitor and evaluate outcomes of serious safeguarding incidents and seek assurance that plans have been implemented and lessons learnt.
- We will continue with our Primary Care audit schedule.
- We will continue to raise awareness of Self Neglect and Hoarding.
- We will continue to promote the 'Think Family' approach to safeguarding and awareness of Trauma informed practice.
- We will continue to monitor the themes and trends from the safeguarding notifications.
- We will continue to drive and raise awareness of Adult Safeguarding.
- We will continue to attend the BSAB meetings and other subgroups of the Board.
- We will participate in the regional S11 Care Act Audit.



Key Achievements	Key Actions for the next year
• The safeguarding team has evolved into a well-structured, responsive service with dedicated adult safeguarding leadership. This includes further expansion of the adult team to strengthen support for dementia and frailty pathways. • We have prioritised being responsive to clinical demand, offering enhanced, tailored support to areas experiencing increased safeguarding activity. This has been well received by clinical teams, who have consistently valued the practical, on-the-ground support. • Our visibility and direct engagement within clinical areas have continued to grow, with more teams receiving safeguarding supervision and standalone teaching. This includes a continued focus on a "back to basics" approach to build strong foundations. • The Think Family approach, relaunched in November 2023, is now better embedded, supporting staff to consider the wider context of service users' lives and enabling more joined-up, whole-family working. • A new safeguarding supervision policy has been introduced and now formally includes adult services, reinforcing consistent standards and access to safeguarding oversight across the organisation. • We have refreshed both the Adult Safeguarding Policy and the Level 3 Adult Training, ensuring alignment with current best practice and legislative updates, and supporting staff with relevant, up-to-date knowledge.	• The Quality Assurance Framework (QAF) pilot has been a success, and we are now planning for regular safeguarding QA visits over the next 12 months. These visits allow us to embed safeguarding standards into routine practice and governance. • We remain committed to providing specialist input into complex safeguarding cases, offering advice, supervision, and escalation where needed, and ensuring clinical teams feel supported and guided in their safeguarding responsibilities. • Through all this work, we are embedding safeguarding as business as usual, aligned with the Trust's values of being compassionate, inclusive, and committed. • Our focus remains on supporting clinical staff with practical, accessible safeguarding advice and input – something that continues to be positively received across the organisation.



Key Achievements	Key Actions for the next year
- University Hospitals Birmingham's (UHB) robust governance in relation to Safeguarding adults, driven through its Trust-level Safeguarding Board chaired by the Executive Chief Nurse, was further enhanced in 2024-25 with Safeguarding Sub-Boards being established for each hospital site, chaired by the site's Director of Nursing. This further ensures the flow of targeted information to support improvement, and to provide assurance. - The Safeguarding Team visit the Trust's Emergency Departments and Urgent Treatment Centre daily, supporting staff to ensure that safeguarding action is at the forefront of care delivery, and that knowledge, competency and practise remain current; an in-reach model of safeguarding support continues to be provided Trust wide. - Monthly 7-minute briefings relating to a safeguarding subject have been produced and disseminated Trust wide. These are based on national and local campaigns, or areas of learning from reviews or audits. - An updated training needs analysis, together with updated training packages, ensures that UHB provides current training to a high number of staff, maintaining compliance with the national intercollegiate documents. - The embedding of the Mental Capacity Act and Deprivation of Liberty Safeguards (DoLS) has continued, resulting in an increase in the number of DoLS applications across the Trust. - A robust audit programme has been completed, including Voice of the Adult. The Domestic Abuse (DA) Group has continued to meet monthly to ensure that DA remains high on the Trust's agenda. This is supported by 2 Independent Domestic Violence Advocates (IDVA) who provide support to staff and patients.	- We will be seeking to continue to hear the patient voice, and acting on issues identified. - We will be further reviewing the mental capacity agenda for the Trust, ensuring that staff have access to training and resources to be able to support patients who lack capacity to make a decision. - The Trust will continue to audit the adult safeguarding service. - Priorities for 2025-26 are: - To hear the voice of the child. - To hear the voice of the adult. - To continue to raise the profiles of: - Domestic Abuse and Exploitation - Neglect - Think Family, - Early Help. - We will identify and mitigate our safeguarding risks. - As a learning organisation we will promote and embed learning from local, regional and national reviews. To deliver Safeguarding education and training to our staff. - During 2025-26, UHB will be working alongside Social Care colleagues to ensure that safeguarding referrals are appropriate and that other agencies who can support patients are effectively sign-posted across the Trust. - The Trust will continue to hear the patient voices.

Birmingham City Council - Adult Social Care

Key Achievements	Key Actions for the next year
• Adult Social Care continue to recruit permanent workers to its' workforce. The Safeguarding Triage Team have appointed several Senior Practitioners to support the management team in triaging and responding to concerns about adult citizens with care and support needs who are at risk of or experiencing abuse and/or neglect. Additionally, the Commissioning Safeguarding Officers have also recruited to a vacancy. • In May 2024, the Adult Social Care s42 Enquiry function was moved into the Constituency social work teams. This change has resulted in a reduction in the time taken to undertake Enquiries for citizens with care and support needs at risk of, or experiencing, abuse and/or neglect. • Adult Social Care completed the s11 audit to assess how it is meeting expectations in key areas of safeguarding, which was submitted in March 2025. Furthermore, Adult Social Care welcomed an independent review of its Safeguarding Service through Partners in Care and Health to track progress against areas highlighted by the Care Quality Commission inspection as a pilot site in 2023. • Adult Social Care remains committed to working in partnership with the Birmingham Safeguarding Adults Board (BSAB) and partner organizations. This includes attendance and input at BSAB meetings, development days, and learning events. The BSAB has heard positive citizen stories from partner organizations where input from Adult Social Care in partnership working has made a positive difference in safeguarding Birmingham citizens.	• Adult Social Care is reviewing the safeguarding services received by the citizens of Birmingham. This includes evaluating the advice and information available to citizens and professionals, as well as the referral options to ensure that adults with care and support needs are directed to the appropriate services. • The department is also revising its documentation and paperwork to ensure that citizens receive a proportionate response at the right stage of the safeguarding process. Additionally, Adult Social Care is assessing the structure of its Safeguarding Teams to ensure the right balance of staff to meet the demand, demographics, and emerging themes and trends across the city. • Adult Social Care will continue to collaborate with the Birmingham Safeguarding Adults Board (BSAB) and partner organizations to share information and data that supports safeguarding Birmingham citizens. This includes ensuring that mandatory learning is undertaken by its workforce and that safeguarding training is available, with a focus on embedding self-neglect guidance throughout multi-disciplinary partnership working, as highlighted through recent Safeguarding Adult Reviews. • The department is also committed to recruiting additional staff to its workforce. This includes adding capacity to the Rough Sleeping Initiative (RSI) with funding for an additional worker to enhance the homeless pathway, safeguarding support, and positive outcomes for adults who are homeless through the RSI work. • Furthermore, Adult Social Care is strengthening its performance framework to include clearer timeframe expectations for workers undertaking safeguarding work, alongside continued audit work to monitor standards and deliver outcomes for citizens.

Birmingham City Council – City Housing

Key Achievements

- The City Housing Directorate recognises that good housing is a prerequisite of good health and as such is committed to preventing homelessness, supporting homeless households as well as providing good housing services to the tenants and leaseholders of the largest, local authority social landlord in the UK. In an adult safeguarding context City Housing;
- Of cases opened at prevention stage, 57% of households were supported in maintaining or finding secure accommodation, which is above England, regional and core cities' averages.
- Although a challenging agenda, the level of rough sleeping in Birmingham remains relatively low in comparison with other large cities at 5.1 per 100,000 population.
- BCC Cabinet agreed a revised Temporary Accommodation Strategy in September 2024 focussing on creating additional, affordable supply for residents at risk of homelessness and to reduce the cost of B&B.
- BCC's accommodation finding team were highly commended at the UK Housing Awards 2024, securing over 700 Assured Shorthold Tenancies and 140 leases with private landlords.
- City Housing provides intensive support to residents who have a higher level of need through multi agency working, commissioned services and in 2025 created a new tenant support team and increased neighbourhood working to support and prevent vulnerable adults, including survivors of domestic abuse.
- In addition, the council has embarked on a 1.5bn investment programme to improve council tenant homes right across the city and to bring them to decent homes standard.

Key Actions for the next year

- City Housing continues in its mission to deliver the council's housing strategy, which includes increasing the level of affordable housing, preventing homelessness as well as supporting rough sleepers and homeless households.
- Specific initiatives include continuing to acquire more homes to reduce the number of families in bed and breakfast.
- In our capacity as a social landlord, we are continuing to significantly invest in the quality and standard of our homes as well as the local housing service provided to our tenants.
- Specific initiatives include increasing our neighbourhood working and resident involvement and the continued focus on preventing neglect, which often manifests through hoarding.
- We will also be seeking to acquire domestic abuse housing accreditation in 2025, which is a hallmark of delivering safe and effective responses to domestic abuse.



West Midlands Fire Service

Key Achievements	Key Actions for the next year
• Over the last year, West Midlands Fire Service (WMFS) has developed a safeguarding training programme for staff that includes specialist level support. This will help to embed safeguarding as a priority across WMFS, ensuring that adults with care and support needs across the West Midlands will receive appropriate consideration and support in relation to safeguarding when meeting our staff. • The above-mentioned training includes awareness level through to advanced safeguarding training - meaning that as an organisation we are trained to support and guide staff through the safeguarding process and offer a level of quality assurance in relation to referrals. • Making Safeguarding Personal has been a key part of the training and is included within our safeguarding 'awareness' training, which all WMFS staff complete as a mandatory course.	• West Midlands Fire Service is currently developing specialist safeguarding training for Station Commanders and above, ensuring that we are able to offer support for staff that encounter adults across the West Midlands that require safeguarding support. • We have recently updated our Safeguarding Policy, ensuring that we can adhere to current safeguarding guidelines. • Finally, we are introducing Mental Capacity training for our Prevention Officers, ensuring that WMFS staff that have the most contact with adults with care or support needs can consider capacity.



Key Achievements	Key Actions for the next year
• Birmingham Partnerships areas of responsibilities are Early Help and Vulnerabilities, Crime and Anti-Social Behaviour, Schools and Young People and Licencing. Partnerships officers have become omnicompetent in these areas following the introduction of the District Policing Model. • There are several areas that these teams assist both internal and external partners focussing on Adult Safeguarding: • The team have streamlined the referral process resulting in support services being delivered more effectively and efficiently. • The Partnerships team audit and review ASB logs across Birmingham to ensure optimal service delivery and provide expertise and guidance to Birmingham City Council during ASB case reviews to provide solutions to more complex or persistent disputes. • The number of third-party reporting centres for Hate Crime has been increased across the city, resulting in a variety of locations and community groups to maximise the reach across different demographics. • Work around engaging with diverse communities has led to coproduction with those communities around educating officers, staff and the wider public in relation to needs and vulnerabilities to create a safer city for all. • Work with third sector and statutory organisations to reach those impacted by Dementia lead to a large engagement event in September and forms part of the ongoing work in relation to devising strategies for the police response to assist in preventing risk and harm to vulnerable people and reduce missing episodes. • Through multiple community engagement events, Partnerships have increased active membership of the WMnow messaging service. Enabling instant communication with communities around relevant safety and crime prevention advice, bespoke to the areas and themes that impact them personally.	• With the new alignment of Birmingham’s policing districts, Partnerships officers have become omnicompetent across the key areas of responsibility. This has provided greater resilience and an ability to better manage threat, harm and risk across Birmingham. • Information sharing agreements have terms of reference and now with the omnicompetence of the Partnerships department timely, accurate and relevant data is shared across partner agencies in line with data protection to ensure partners have information they require to support with reducing vulnerability and preventing harm. • Birmingham Partnerships continue to focus on joint statutory obligations with Birmingham City Council.  An illustration at the bottom right of the table shows three people (two women and one man) standing and talking. Above them is a large orange speech bubble with three dots. To their right is a large teal square with white plus signs, resembling a first aid kit. Further right is a tall purple tower with a clock face at the top. At the bottom right, a group of four people are running towards the left.

8. Making Safeguarding Personal

The Care Act 2014 emphasises a personalised approach to adult safeguarding that is led by the individual not by the process. This approach is called Making Safeguarding Personal (MSP) and aims to make safeguarding more person centred and outcome focused and moves away from process driven approaches to safeguarding.

We have continued to seek assurances from our partners on how they are **“Making Safeguarding Personal”** in their organisations and how MSP has continued to be implemented in their organisations. Below are some examples of how we do this:

Citizens Story

We start every Safeguarding Adults Board Executive Meeting with a citizen story to ground and focus the board members to the primary reason we all meet.



Learning Events

Our learning events have focussed on the adult at risk being at the centre of the support and in control of what is happening around them and their chosen outcomes to be achieved.



Self-Neglect Guidance

This guidance was refreshed with multi-agency collaboration from partners to ensure and promote good practices.



Risk Enablement

This was developed with partners to achieve a balance between protection and autonomy that is right for the adult in each case.



We asked partner agencies to share how they worked with an adult with Care and Support needs ensuring Making Safeguarding Personal (MSP) was at the heart of their work. Here are examples from BCHC (Birmingham Community Health Care and Community Trust) and ASC (Birmingham City Council's Adult Social Care).



Citizen Story - Sid (In order to protect the identity of the individuals a pseudonym Sid is being used in this story)

A Journey of Safeguarding Success and Multi Agency working

Sid is a 38-year-old man of mixed Afro-Caribbean and Caucasian heritage. He has lived with paranoid schizophrenia for many years. During this time, he experienced long-term homelessness and often slept rough. This made it very difficult for him to stay in contact with mental health services, take his medication regularly, or look after his physical and emotional health.

Sid's situation was complex. He was socially isolated, his health was getting worse, and he was becoming more vulnerable. Although he was registered with the Homeless Health Exchange and had a support worker from the rough sleepers team, his condition continued to decline. He was often seen on the streets looking unkempt, talking to himself, and behaving aggressively towards staff and the public. These behaviours raised concerns among local businesses, the police, and community safety officers. Safeguarding alerts were raised because it was clear Sid was at serious risk.

A social worker from the rough sleepers service was assigned to support Sid. This was a turning point. Working closely with mental health services, the social worker arranged a Mental Health Act assessment in the community. Sid was detained under Section 2 of the Act, and later under Section 3, which allowed him to receive treatment in hospital.

While Sid was in hospital, the social worker visited him regularly to build trust and carry out a full social care assessment. This flexible, person-centred approach was vital, as Sid had previously struggled to engage with services through traditional appointments.

The assessment showed that Sid had significant care and support needs and was eligible for supported living. The social worker applied for funding, and mental health services agreed to match it as part of Sid's aftercare plan. The application was approved, and Sid moved into a supported living placement after leaving hospital.

A month later, a review was held. Sid said he was happy in his new home and was getting involved with staff and other residents. He joined group activities and showed a strong desire to stay in the placement. Staff noticed improvements in his physical health, and his mental health was being well managed with ongoing support.

Why This Matters

Sid's story shows how effective safeguarding, strong multi-agency working, and flexible, person-centred social work can lead to life-changing outcomes. It highlights the importance of listening to concerns from the community, sharing information, and adapting services to meet people where they are. Without this joined-up response, Sid's needs might have continued to go unmet. Instead, he now has stability, support, and hope for the future.



Citizen Story – Oscar (In order to protect the identity of the individuals a pseudonym Oscar is being used in this story)

A Journey of Safeguarding Success and Multi Agency working

Oscar was 68 years old when he was referred to the District Nursing Service. He had recently fractured a bone after a fall—an incident that occurred while he was under the influence of alcohol. This wasn't a one-off. Oscar had lived for many years with chronic alcohol misuse, and it had taken a toll: on his health, his ability to care for himself, and the condition of his home.

The nurses began visiting weekly to manage his wound care. But it quickly became clear that the wound wasn't the only concern. Oscar's home was in a state of severe disrepair. Years of hoarding had left the property cluttered and unsafe. Hygiene was poor. There were signs of rats. The kitchen was unusable. It was a scene that raised serious concerns about self-neglect.

Oscar lived alone. His only regular visitor was a cousin who travelled from another city once a month. The cousin was kind and encouraging, urging Oscar to accept help. But distance limited how much he could do.

The nursing team tried repeatedly to offer support. They explained the benefits of a Care Act assessment and how a multi-agency approach could help improve his health and living conditions. But Oscar declined every offer. He was polite but firm. He didn't want formal care. A capacity assessment confirmed he understood the risks and consequences—he had the right to refuse.

Still, the nurses were worried. They completed a Multi-Agency Self-Neglect Risk Assessment, which identified a moderate level of risk. There were no immediate safeguarding concerns, but the situation was far from safe. The assessment was shared with his GP and the local authority to ensure a coordinated response.

Weeks passed. Then something changed.

Oscar's mood shifted. He told the nurses that two individuals had been visiting his home. He believed they were taking his belongings and misusing his money. This time, he agreed to let the nurses raise a safeguarding alert. The police were involved, and the visits from the individuals stopped. The safeguarding team formally recorded and investigated the case.

Despite this breakthrough, Oscar continued to refuse further help. He didn't want support with his alcohol use or his living environment. Another capacity assessment confirmed he still had the ability to make these decisions. But the risks remained.

The District Nursing Team didn't walk away. They continued their visits, managing his wound care and keeping a close eye on his wellbeing. They shared updates with other agencies and stayed alert to any changes.

Why This Matters

Oscar's story is one of quiet struggle—of a man living with long-term addiction and self-neglect, but also of professionals who remained committed, even when their offers of help were turned down. It's a reminder of the delicate balance between respecting autonomy and protecting wellbeing. And it highlights the importance of persistence, partnership, and compassion in safeguarding work.

9. What is a Safeguarding Adult Review (SAR)?

When an adult in our area with needs for care and support (whether or not the local authority has been meeting any of those needs) either dies or suffers serious harm, and when abuse or neglect is thought to have been a factor, Birmingham Safeguarding Adults Board (BSAB) may need to review what has happened. This is called a Safeguarding Adults Review, or 'SAR' for short.

When should a SAR take place?

SARs are commissioned when the following criteria has been met:

- **There is reasonable cause for concern about how BSAB members or other agencies providing services, worked together to safeguard an adult who needs care and support; and**
- **The adult has died, and BSAB knows or suspects that the death resulted from abuse or neglect (whether or not it knew about or suspected the abuse or neglect before the adult died); or**
- **The adult is still alive and BSAB knows or suspects that the adult has experienced serious abuse or neglect.**
- **Sometimes BSAB may also arrange for a SAR to take place in other situations where they feel lessons need to be learnt.**

A SAR is a multi-agency review is carried out to determine what agencies involved could have done differently that could have prevented harm or death from taking place.

The aim is not to apportion blame, it is to promote effective learning and improvement to prevent future death or harm occurring, and to improve how agencies work together towards achieving positive outcomes for adults and their families.



SARs Activity in 2024-2025

During this year we received 14 SAR referrals, which were reviewed by the SAR Subgroup:

Number of SAR referral	Outcome of SAR referrals
6	Inappropriate SAR referrals
2	Did not meet SAR criteria - No further action taken
5	Did not meet SAR criteria - Further actions taken
1	Decision to carry out a SAR

During this year **we completed two SAR** which can be viewed on the following links:

[SAR Adam | Birmingham Safeguarding Adults Board](#)

[SAR Karla | Birmingham Safeguarding Adults Board](#)

We are in the process of completing a SAR.

Key learning for agencies has been shared with relevant partners, with emerging themes embedded into BSAB Practitioner Forums to inform practice and drives improvement.

Examples of these includes:

- Improving multi-agency responses to self-neglect.
- Enhancing professional curiosity.
- Strengthening risk assessment and escalation pathways.
- Embedding trauma-informed approaches.
- Use of carers assessments.

For more information about SARs:
[What is a Safeguarding Adult Review](#)



10. Assurance Report 2024-2025

The Board uses different data and intelligence from across the partnership to give both a fuller picture and rounded view of safeguarding in Birmingham, this information is then used to identify key risks and areas where greater focus may be required.

Our Assurance Model looks like this:

BSAB Assurance overview



Partners

What partner agencies told us in partnership meetings and in their annual statements.



Citizens Voice

What the people of Birmingham told us about their experiences.



Reports

Executive Board and Subgroup reports on a range of themes.



Data and Intelligence

What we know from the data we collect and interpret.

Assurance Report 2024-2025

We have continued to seek robust assurances from partners on their activity with each other in ensuring partners are supportively engaging with each other and citizens to protect adults with care and support needs.

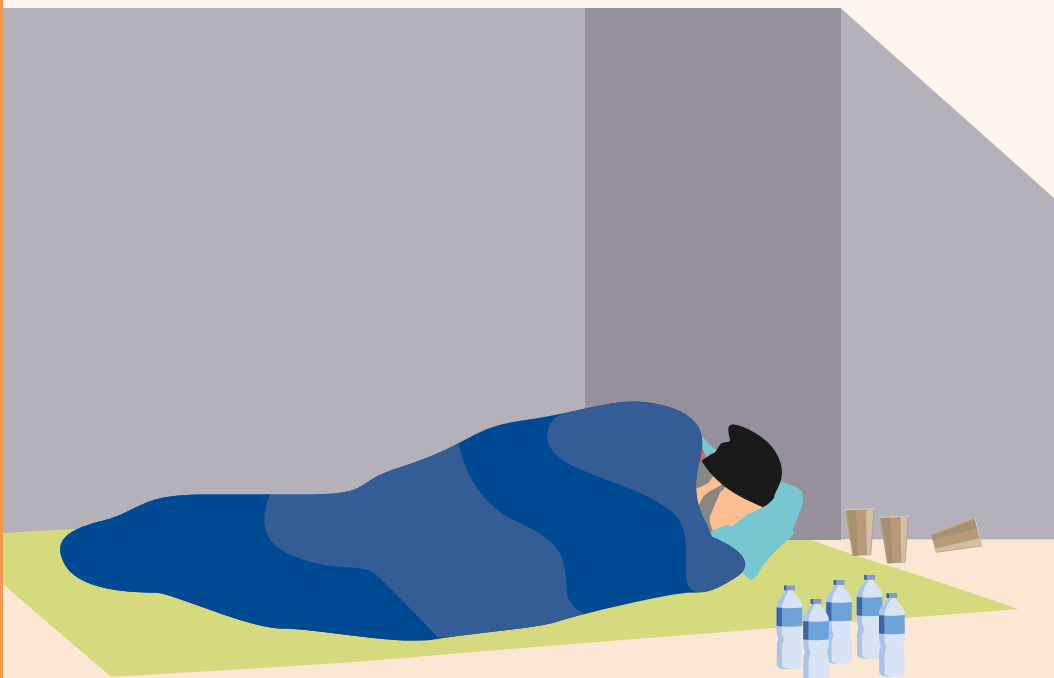
We have sought Assurance on the following:	What did the Assurance tell us?
• ASC updated the board on safeguarding practices and actions being taken, following the CQC inspection. • Safeguarding data, dashboard and Power Bi demographics report. • West Midlands Police – HMICFRS - update on Police action plan. • Regulation 28 report to Prevent Further Deaths Report. • BCC Housing - Homeless Deaths - review and homeless person's mortality review, Private Rented Sector Strategy, Renters' Rights Bill. • ASC commissioning - International Care Worker Recruitment and Integrated quality assurance framework. • CQC - Care Market updates and Closed Cultures. • Citizens voice – regular stories from different partners sharing safeguarding and outcomes. • New NHS Patient Safety Framework. • Subgroup Chairs progress against agreed workplans. • National and Regional Safeguarding policies and impact on the Board.	• ASC gave us assurances on plans for addressing front line issues and learning from recent SARs and how this was being incorporated into learning and development programs. • We received data to inform us of the enquiries about operational staff managing and highlighted areas of future focus. • West Midland Police gave assurances on the actions being taken to respond to the inspection report and progress on recommendations. • Updated on Regulation 28 and actions implemented to prevent further deaths. • ASC Commissioning shared the interventions they were taking to make sure the quality of care within the provider market is both monitored and maintained. • CQC gave updates on the signs, indicators and risk factors for organisational abuse and CQC role. • ICB have put in place the new Patient Safety Framework and are monitoring outcomes.



11. Rough Sleeping in Birmingham

Following a Ministerial letter in May 2024 from the Minister for Housing and Homelessness and Minister for Social Care the BSAB reviewed recommendations

- The BSAB already had a named Board Member for Housing and Homeless and this was continued.
- The Board already had links to the Homeless Partnership and were able to seek assurance.
- Homelessness features as part of the work of the BSAB.
- BSAB will continue to carry out any Safeguarding Adult Reviews for homeless and rough sleeper with care and support needs.



An update from the Board member responsible for Rough Sleeping:

City Housing and Rough Sleeping Services

City Housing, represented on BSAB by the Director of Housing Management, leads Birmingham's rough sleeping response. The [Homelessness Prevention Strategy 2024-2029](#) aims to prevent all forms of homelessness and ensure any occurrence is rare, brief, and non-repeating. Oversight is provided by the Homelessness Partnership Board, chaired by the Cabinet Member for Housing.

Specialist partners deliver 24/7 street outreach and emergency beds, involving health, social care, youth services, addiction support, domestic violence, and housing. The autumn 2024 official count recorded 59 rough sleepers, up from 36 in 2023, mirroring national trends but remaining below the national average (Birmingham: 5.1/100,000 vs. 8.1/100,000).

The Target Protect group supports high-risk individuals through lead workers, case conferencing, and action planning. In 2024-25, 17 people with homelessness links died; each case is reviewed to inform **the Mortality Review process**, with learning shared across BSAB, the Homelessness Partnership Board, and MEAM.

Priorities for 2025-26 include a Supported Housing Needs Assessment and Strategy aligned with the 2023 Regulatory Act, and continued focus on recovery and preventing returns to street homelessness.

12. How do we support learning, development, engagement, and information sharing?

Multi Agency Practitioner Forums and Events:

Practitioner events were held four times in 2024/2025 where learning was shared and opportunities to explore cases in detail.

These included:

- Trauma-informed approaches across all four Practitioner Forums, encouraging practitioners to consider how trauma impacts individuals' lives and how services can respond with empathy, safety, and empowerment.
- A session focussing on learning from SAR Shannon.
- Substance misuse, self-neglect and supporting effective working with citizens.
- Working with citizens who are self-neglecting and have had trauma.



Communication/Engagement:

We continue to share relevant information through various communication methods.

- The Chairs report is shared with all partners and includes regional and national updates.
- We have increased our engagement with other boards and partnerships including:
 - City Partnership Board.
 - Community Safety Partnership.
 - Domestic Abuse Board.
 - Children's Safeguarding Partnership.
 - Health and Wellbeing.
- We have engaged in relation to Safeguarding adults reviews.
- We have engaged in the development of the Board's Strategic plan.
- We have held development sessions to look at what we have learned, what has gone well, what needs to be improved and what our future priorities will be going forward.

13. Future Priorities 2025-2026

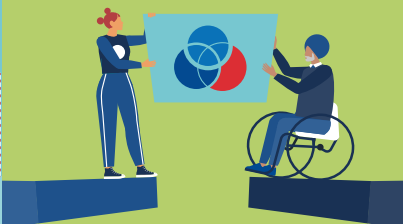
Strategic Priority 1 Communication and Involvement

We will enhance our communication strategies by implementing regular feedback loops and ensuring all voices are heard.



Strategic Priority 2 Prevention and Early Intervention

We will prioritize early intervention and provide timely support to prevent escalation of problems.



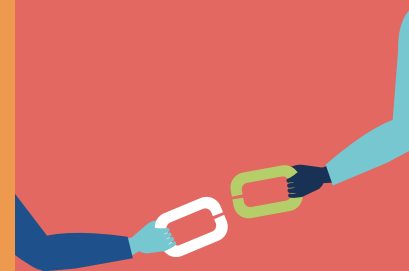
Strategic Priority 3 Shared Learning Through Assurance

We will promote shared learning ensuring lessons learned are integrated into our processes.



Strategic Priority 4 Making Safeguarding Personal

We will actively involve individuals in decision making process and tailoring our approaches to meet their unique needs.



Strategic Priority 5 Systems, Processes and Performance

We will continuously evaluate and optimise our system process to ensure they are efficient, effective and align with our vision.



14. Appendices

Appendix 1 - BSAB Executive Attendance at Board Meetings 2024/2025

The below table shows attendance of each group to meetings that took place, a blank indicates an instance of non attendance.

Number of meetings per Partner										
4	4	1	4	4	2	4	3	4	2	2
Birmingham City Council - Adult Social Care	Birmingham City Council - Housing	Birmingham Healthwatch	Birmingham and Solihull Integrated Care System	West Midlands Police	Birmingham and Solihull Mental Health Trust	Birmingham Community Heath Care Foundation Trust	West Midlands Fire Service	Women Acting in Today's Society	Birmingham City Council - Public Health	University Hospitals Birmingham



Appendix 2 – Partner Feedback

“ Birmingham City Council - Housing

Good housing is a cornerstone of good health, so to work in collaboration with BSAB strategic partners to assure ourselves that we maximise early intervention and prevention. The board also provides oversight to and develops how the city minimises the risk of abuse and neglect in our council homes, as well as safeguard people at risk of homelessness or who are temporarily homeless.

Dave Ashmore – Director Housing Management - Birmingham City Council Housing

”

“ Birmingham and Solihull Integrated Care System

Working with the Birmingham Safeguarding Adults Board (BSAB) from March 2024 to April 2025 has been a truly collaborative experience. The partnership has supported shared learning, strengthened strategic alignment, and fostered a collective commitment to improving safeguarding outcomes for adults at risk across Birmingham.

Dianne Rhoden – Director of Nursing – Safeguarding, Children in Care and Child Death Review

”

“ Women Acting in Today's Society

WAITS presence on the Birmingham Safeguarding Adults Board ensures that the voices of women and families are represented at a strategic level. This role enables us to influence safeguarding policy, advocate for trauma-informed practices, and contribute to a multi-agency approach that protects vulnerable Citizens. By gaining assurance from our partners, we help ensure that safeguarding responsibilities are being met with transparency, accountability, and a shared commitment to safety and wellbeing.

Marcia Lewinson – CEO Women Acting In Today's Society (WAITS)

”



Appendix 2 – Partner Feedback

“ Healthwatch Birmingham

Healthwatch Birmingham is proud to be a Board and subcommittee member. Our statutory role in representing public views on health and social care offers unique and valuable perspective. We help identify concerns about care quality and safety for adults with support needs. Over the past year, we've championed residents' voices, influenced service improvements, and ensured timely care. We look forward to continuing our collaborative work, driving change through lived experience insight.

Andy Cave – CEO Healthwatch – Birmingham

”

“ Birmingham and Solihull Mental Health Trust

I have worked closely with BSAB over the last year and have found the working relationships between BSMHFT and BSAB positive and supportive. I have been given opportunities to discuss pertinent issues relating to our services and feel my views are listened to when representing the Trust.

Melanie Homer – Associate Director of Safeguarding - Birmingham and Solihull Mental Health Trust

”

“ Birmingham City Council - Public Health

I welcome the Birmingham Safeguarding Adults Board Annual Report 2024–2025 and commend the Board's continued commitment to protecting our most vulnerable citizens. The focus on self-neglect, hoarding, care market quality, and trauma-informed practice reflects the complexity of safeguarding challenges in our city. As Director of Public Health, I particularly support the emphasis on partnership working and citizen engagement, which are vital to building resilience and promoting wellbeing. I look forward to contributing to the refreshed strategic plan and strengthening our collective efforts to ensure that all adults in Birmingham can live safely, with dignity and support.

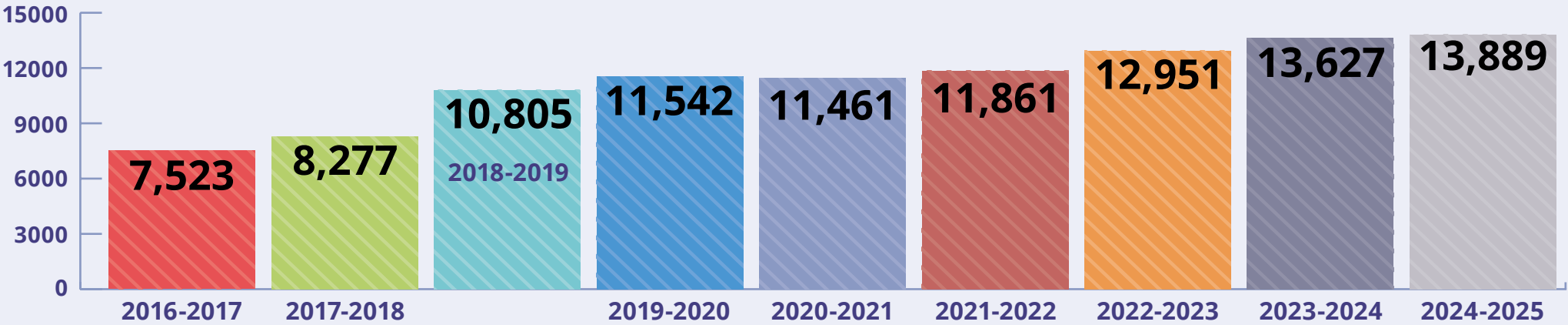
Sally Burns – Director - Birmingham City Council Public Health

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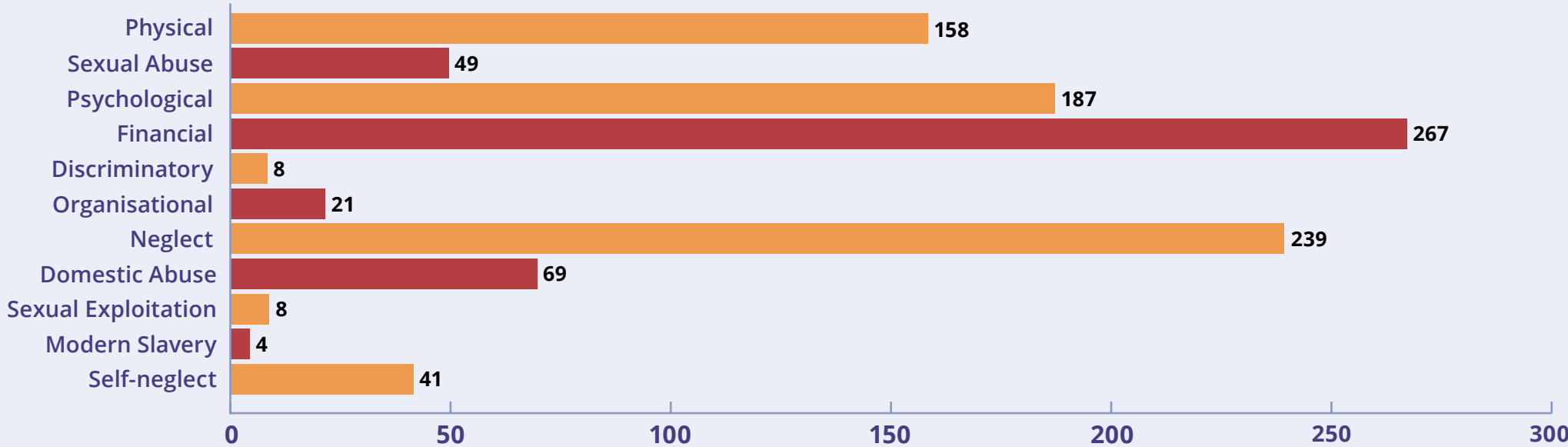


Appendix 3 - Safeguarding Adults Data - Care Act 2014 - Section 42 (1 of 3)

Adult Safeguarding Concerns reported to Birmingham City Council each year from 2017-2025

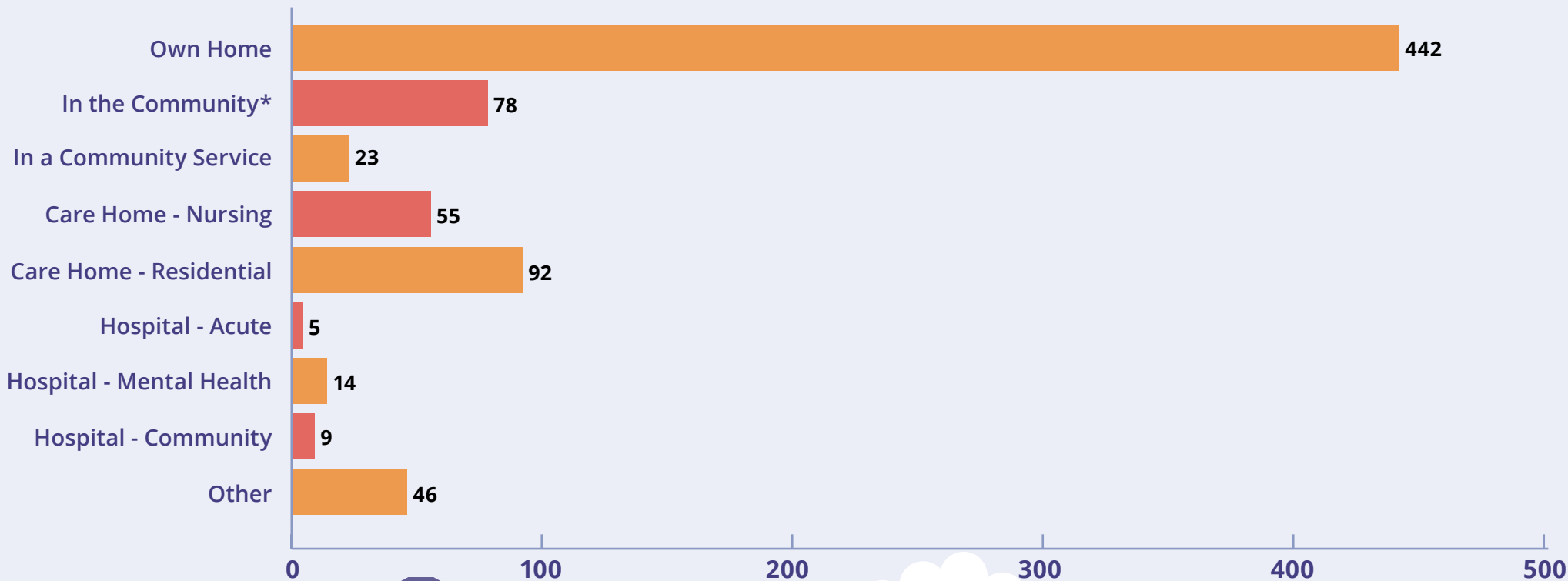


Types of abuse for all Enquiries 2024-25



Appendix 3 - Safeguarding Adults Data (2 of 3)

Location of alleged abuse or neglect in concluded Enquiries 2024-2025



*(Excluding Community Services)



Appendix 3 - Safeguarding Adults Data (3 of 3)

How people felt about whether their Enquiry had achieved what they wanted

Fully achieved	67.9%
Partially achieved	24.2%
Not achieved	7.9%
Not recorded	0%

Proportion of people who were asked the outcome they wanted for their concluded Enquiry in 2024-2025

% of people who told us what they wanted to achieve	78.8%
% of people who were asked but did not say what they wanted to achieve	10.7%
% of people not asked	9.7%
Not Recorded	0.9%

How people felt after their Enquiry

Did the person feel involved?	95.4%
Did the person feel listened to?	96.2%
Did you understand why people did what they did?	94.7%
Do they feel safer as a result?	89.4%
Do they feel happier as a result?	91.3%



15. Glossary

Adverse Childhood Experiences (ACEs) – the stressful or traumatic events in childhood that can affect people as adults.

Anti-Social Behaviour Case Reviews – right for victims to request a review where they believe their report of anti-social behaviour problems has not been properly addressed.

Care Act 2014 – the law that sets out how adult social care in England should be provided:

- s42 the section under the legislation that sets out when a Local Authority has a duty to undertake, or cause others to undertake, a safeguarding Enquiry if an adult with care and support needs may be at risk of, or is experiencing, abuse or neglect and as a result of those needs is unable to take steps to protect themselves.
- s44 the section under the legislation that sets out when a Safeguarding Adults Board should consider when Safeguarding Adult Reviews should be undertaken because the criteria have been met or there is value in doing so.

Care Quality Commission – the independent regulator of health and social care in England.

Child Safeguarding Practice Reviews – an independent review where a child has been seriously harmed or has died and abuse or neglect is known or suspected.

Community Safety Partnership – statutory partnership to reduce crime, fear of crime, anti-social behaviour, alcohol and drug misuse and reducing offending.

Domestic Abuse, Stalking and 'Honour'-based violence (DASH)

– risk assessment tool in relation to the risk of domestic abuse used to support referrals to MARAC. These can have specific risk areas such as the S-DASH with questions focusing on the risks of stalking and harassment.

Deprivation of Liberty Safeguards (DoLS) – procedure to protect the rights of adults in care homes or hospitals who cannot consent to their care and treatment arrangements under the Mental Capacity Act 2005.

Domestic Abuse Housing Alliance – national partnership supporting housing providers response to domestic abuse.

Domestic Homicide Reviews – enable lessons to be established where a person was killed as a result of domestic violence and abuse.

Early Help HUBs – a resource for practitioners working with children and families to find services that can help to support.

Exempt Accommodation – supported housing that is exempt from certain Housing Benefit provisions e.g. a resettlement place or certain accommodation providing care, support or supervision.

Forced Marriage – a marriage where one or both parties do not or cannot consent to the marriage and pressure or abuse is used to force them into the marriage.

Forward Thinking Birmingham – partnership of organisations offering mental health support, care and treatment for under 25s in Birmingham.

Health and Wellbeing Board – sets strategic direction to improve health and wellbeing of people locally.

‘Honour’ Based Violence – abuse that occurs when perpetrators perceive that the victim has shamed the family and/or community by breaking an ‘honour’ code.

Independent Domestic Violence Advocate – works with the victim of domestic violence and seeks to empower them.

Independent Management Review – to detail, analyse and reflect on actions, decisions, missed opportunities and areas of good practice within an individual organisation.

Integrated Care Board – NHS organisation responsible for developing a plan for meeting health needs, managing NHS budgets and arranging health care in a geographical location.

Integrated Care System – partnership between organisations that meet health and social care needs.

LeDeR – learning disabilities mortality review to identify learning where a person with a learning disability and autism has died.

Multi Agency Public Protection Arrangements – management of violent and sexual offenders.

Multi Agency Risk Assessment Conference – meeting to share information of the highest risk domestic abuse cases.

Offensive Weapons Homicide Review – requirement for police, Local Authorities and local health boards in England and Wales to review deaths of over 18s involving, or likely to have involved, an offensive weapon.

Predatory Marriage – a forced marriage where the individuals’ mental capacity to marry is in doubt or is vulnerable to undue influence.

Right Help Right Time assessment – guidance for everyone working with children and families in Birmingham.

S11 audit – under Children Act 2004 – duty on key organisations to self-assess the extent to which they meet the safeguarding requirements and standards to safeguard and promote the welfare of children.

Serious Incident Review – to identify, investigate and learn from serious incidents.

Serious Violence Duty – councils and local services to work together to share information and target interventions to prevent and reduce serious violence.

7 Minute Briefing – a tool for learning based on research suggesting seven minutes is the ideal timespan in which to concentrate and learn.

Think Family Agenda – a way of working that recognises and promotes the importance of a whole-family approach.

Violence Reduction Unit – a partnership organisation that aims to reduce violent crime across the West Midlands.

 youtube.com/@birminghamsafeguardingadul4920

 www.bsab.org

