# 7 Minute Briefing – Black Country Adults Audit – Fire Risk

### What can you do now?

- Always consider the use of MDTs,
   Speak with your manager if you are unclear on how to initiate an MDT.
- Communication and information sharing is key to managing risks effectively and achieving positive outcomes for people.
   For guidance please consult this helpful SCIE Resource
- Ensure you are aware of the <u>WMFS Safety advice</u> for professionals and carers and are using this in your practice
- Be clear on whether your referral is for care and support or safeguarding. Consult the <u>Walsall</u> <u>decision making support guidance</u> if you are unsure.

### **Background**

During April – June 2022, Walsall coordinated and participated in a Black Country Audit (Walsall, Wolverhampton, Sandwell and Dudley) on Fire Risk. West Midlands Fire Service chaired and led the audit and the panel met to analyse the findings on the 23rd and 30th June 2022.

The following agencies, across the 4 areas, took part in the audit:

Adult Social Care
West Midlands Fire Service
GPs (via CCG Lead)
West Midlands Ambulance Service
Black Country Healthcare
NHS Foundation Trust
Local Hospital Trusts
West Midlands Police
Housing

### Aim of the audit

The purpose of the audit was to assess the multi-agency partnership's response to adults with care and support needs with associated fire risk. It used the following key lines of enquiry:

- Were relevant agencies aware of the identified fire risk?
- Was the Mental Capacity Act applied in relation to managing the risk?
- Was the need for advocacy considered and, if appropriate, offered?
- Was there evidence of effective application of Making Safeguarding Personal (MSP)?
- Were risks responded to and reduced in a timely way?

Was case recording clear, comprehensive, and reflective of work undertaken and focused on the experience and desired outcomes for the adult?

Was there effective multi-agency working to safeguard and mitigate risks for individuals, regardless of the outcome?

### **Areas for Development cont.**

• Safeguarding referrals were identified as areas for improvement in several cases. Sometimes it was about making a clear distinction between referrals for care and support and safeguarding. It was also about making earlier safeguarding referrals to ASC. In one case, emergency services should have taken responsibility for making a safeguarding referral, rather than only one agency doing this. This was to make sure a referral was made, and the agencies involved did • Multi-ag not assume someone else inco would do this.

# 6 2 3

## Areas for Development

volved did

• Multi-agency working was inconsistent. This was sometimes expressed as needing to join up services, make use of MDTs, and improving how the system works together and manages risks.

- Communication and information sharing was identified as an area for improvement in five cases. It was apparent in these cases that agencies were not aware of important information held by their partners, and often it would have helped develop a more effective approach.
- Missed opportunities to prevent fire were identified in four cases
- Earlier referral to WMFS was identified in three cases and was linked to missed opportunities.

# **Good Practice**

The audit highlighted that there was some good practice with the understanding and application of the mental capacity act

Overall the multi-agency audit team judged 5 cases Good, 2 of these had elements of improvement, 4 cases Requires Improvement with 2 of these having elements of good practice, and 3 cases unable to grade due to limited information available for audit

Overview

adults (3 per area) with care and support

The sample of cases comprised of 12

needs with an associated fire risk

There was evidence that agencies were effective in building a rapport with adults and applying making safeguarding personal in practice

Agencies were working well within their own organisational boundaries and there were some examples of good multi-agency working

Improved outcomes were seen where Multi-disciplinary Teams (MDTs) were held







