

Bristol, North Somerset, South Gloucestershire, Somerset and Bath and North East Somerset Safeguarding Boards

Adult Safeguarding

Outcome and Performance Self-Assessment Audit 2019/20

**Introduction**

The objective of the self-assessment tool is to assist Safeguarding Adults Boards to assess, monitor and evidence progress and achievements in relation to meeting adult safeguarding requirements.

There is now a greater emphasis on the involvement of the adult at risk in the process and of the outcomes which are achieved through Making Safeguarding Personal. While the quality of the services provided remains an important consideration, this relates more to the functioning of the organisations. Taking an outcomes focus to the self-assessment process will help to demonstrate achievements and improvements made by SAB partners as well as areas for improvement.

The self-assessment must be completed by all Board members. It can be completed once for organisations which cross multiple Safeguarding Adult Boards boundaries but there is an opportunity at the end of the survey to provide locally specific information.

The completed self-assessment tool will be available to all five SABs for organisations which work in only one or two of the areas. This means the information provided may be included in reporting to any or all of the five SABS.

**Please send you completed tool to:**

**Somerset –** [**ssab@somerset.gov.uk**](mailto:ssab@somerset.gov.uk)

**Due to this tool being used by other SAB questions 9,10,11 and 13 in Section 1 – “About the Organisation” are not relevant and have therefore been blanked out**

**Method / Approach**

This Outcome and Performance Self-Assessment Audit aims to address key objectives and outcomes to enable Safeguarding Adults Boards (SABs) to be assured that adults whose situations mean they may be at risk of abuse or neglect are being kept safe.

These four themes also reflect the six principles in the ***Statement of Government Policy on Adult Safeguarding* (2013)**

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| * Empowerment | * Protection |
| * Prevention | * Partnership |
| * Proportionality | * Accountability |

The aim is for the Audit to be used to provide a consistent approach to quality and performance, which is particularly useful with organisations and agencies who work across local authority boundaries.

Organisations are required to make a judgement as to how well each question is being achieved based on the following rating:

Areas with an **AMBER** or **RED** rating must be supported by action to be taken to ensure improvement, by whom and when.

**GREEN** rating (Good)

Your organisation meets the requirement consistently across it.

**AMBER** rating (Requires Improvement)

Your requirement is met in part; there may be both good areas and areas for improvement.

**RED** rating (Inadequate)

Your organisation does not meet this requirement.

**About the Organisation**

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| **1.** | **Name of organisation** |  |
| **2.** | **Date of completion** |  |
| **3.** | **LSAB areas covered** | Bristol  Bath and North East Somerset  North Somerset  Somerset  South Gloucestershire |
| **4.** | **Name of person completing the audit** |  |
| **5.** | **Role of person completing the audit** |  |
| **6.** | **Email address of person completing the audit** |  |
| **7.** | **Type of organisation** | Ambulance Service  Care Quality Commission  Carer’s Organisation  Community Health  Day Care  Domiciliary Care  Drugs/Alcohol Service  Education/Training Establishment  Fire and Rescue  Integrated Health and Social Care  Hospital  Housing  Local Authority  Mental Health  Nursing Home  NHS Commissioner  Police  Primary Health  Probation  Prison  Residential Care  Secondary Health  Voluntary Organisation  Other (please specify) |
| **8.** | **Total number of staff currently employed (both part and full time) who work in Bristol, South Glos, B&NES, North Somerset and Somerset.** | 0-9  10-49  50–199  200-999  1000+ |
| **9.** | **How many safeguarding adult concerns has your organisation raised within Bristol from 1st April 2018-31st March 2019?** |  |
| **10.** | **How many safeguarding adult concerns has your organisation raised within B&NES from 1st April 2018-31st March 2019?** |  |
| **11.** | **How many safeguarding adult concerns has your organisation raised within North Somerset from 1st April 2018-31st March 2019?** |  |
| **12** | **How many safeguarding adult concerns has your organisation raised within Somerset from 1st April 2018-31st March 2019?** |  |
| **13.** | **How many safeguarding adult concerns has your organisation raised within South Gloucestershire from 1st April 2018-31st March 2019?** |  |
| **14.** | **Does a senior member of staff within your organisation have specific responsibility for safeguarding?** | Yes  No |
| **15.** | **If you answer yes to question 13 tick all that apply** | Safeguarding is part of that person’s job description  They have undertaken appropriate training for this role  Staff are made aware of this person’s role |
| **16.** | **Does a senior member of staff within your organisation have specific responsibility for the Mental Capacity Act (MCA)?** | Yes  No |
| **17.** | **Does a senior member of staff within your organisation have specific responsibility for Deprivation of Liberty Safeguards (DoLS)?** | Yes  No |
| **18.** | **If you answer yes to question 15 tick all that apply** | MCA/DOLS is part of that person’s job description  They have undertaken appropriate training for this role  Staff are made aware of this person’s role |

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| **Principle 1 Empowerment** |
| What does good looks like?  **Making Safeguarding Personal has been embedded across the whole of the organisation with a clear focus on the Adult at Risk with outcomes clearly reflected in data. Processes are designed to take into account views and a programme of adult’s feedback and information gathering timed to influence development of service plan. All areas of organisation include client informed decisions and evidence of adult influencing service plan development, strategic developments, strategies and policies and where people lack decision making capacity, by their representatives or advocates. Advocacy is available for adults with care and support needs who are (or may have been) experiencing abuse and have substantial difficulties in representing themselves?**  **The organisation utilises a wide variety of communication methods ensuring adults at risk and hard to reach groups also understand the right to be safe. The information is kept up to date, refreshed and modified to fit the client group.** |

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|  | **Question** | **Criteria** | **RAG** | **Evidence** |
| **1.** | **How have you implemented Making Safeguarding Personal – has this been effective?** | *Prompts: does the organisation operate a person-led, outcome-focused approach?* | **Red**  **Amber**  **Green** |  |
| **2.** | **Is there a clear focus on the desired outcomes of the adult at risk? Do performance reports include outcome measures? Are adults asked at the end of the process what their experience of it was?** | *Please describe process and provide data and an example.* | **Red**  **Amber**  **Green** |  |
| **3.** | **How has your service changed as a result of feedback from adults at risk this year?** | *Please describe process and give an example.* | **Red**  **Amber**  **Green** |  |
| **4.** | **Can you be assured that adults at risk are seen and consulted with at the earliest point in the safeguarding process?** | *Please describe process and give one example.* | **Red**  **Amber**  **Green** |  |
| **5.** | **How assured are you that adults accessing your service/s have sufficient access to appropriate advocacy?** | *Please describe process and give one example.* | **Red**  **Amber**  **Green** |  |
| **6.** | **How do you promote the perspectives of adults accessing your services/carers and their inclusion in strategic developments, strategies and policies?** | *Please describe and give at least one example.* | **Red**  **Amber**  **Green** |  |
| **7.** | **Does your organisation have accessible information available to adults at risk and their families about safeguarding when English is not their first language? Is Information provided in a range of formats?** | *Please describe what written information is available and the range of formats available – e.g. different languages, easy read, audio etc. and give at least one example.* | **Red**  **Amber**  **Green** |  |
| **8** | **How effectively does your organisation practice risk enablement?** | *Please describe what written information is available and the range of formats available – e.g. different languages, easy read, audio etc. and give at least one example.* | **Red**  **Amber**  **Green** |  |
| **9.** | **What are your priorities for improvement in this area this year?** |  | | |
| **10.** | **Are there any immediate actions required?** |  | | |

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| **Actions to be taken to ensure compliance with Principle 1** | **Date for completion** | **By whom** |
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| **Principle 2 Prevention** |
| What does good look like?  **The organisation utilises a wide variety of methods to ensure members of the public, adults at risk and their families understand abuse and neglect, the right to be safe and know what to do. The information is kept up to date, refreshed and modified to fit the client group. The agency constantly looks for ways to reach new audiences and keeps messages fresh and appealing. The effectiveness of this is recorded, reviewed and built upon or changed if needed. Early intervention and prevention activities are core to the agencies problem solving approach. Any safeguarding related matters are dealt with in adherence to safeguarding arrangements. Concerns are identified and referrals including self referrals are made in a timely way to reduce risk to adults and children where a multi-agency approach has ensured the right agencies are involved to support issues. Adult and their families are able to make complaints with ease and are supported by the agency to do this by an easy to access complaints and resolution procedure. There are commissioning arrangements that ensure that safeguarding responsibilities are met through commissioning and contract monitoring. Within these documents there are clauses that relate to safeguarding (policy, procedure and training) that the organisations sign agreeing to comply with them. The commissioned service provides data to provide assurance of this together with evidence that the service user’s feedback informs the service provided. Quality in commissioned services is monitored.** |

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|  | **Question** | **Criteria** | **RAG** | **Evidence** |
| **1.** | **What methods do you use to raise awareness of abuse, neglect and self-neglect with members of the public?**  **How effective were these in 2018-19?** | *Please describe process and provide data and an example to illustrate effectiveness.* | **Red**  **Amber**  **Green** |  |
| **2.** | **What methods do you use to raise awareness of abuse, neglect and self-neglect with adults and their family members accessing your services?**  **How effective were these in 2018-19?** | *Please describe process and provide data and an example to illustrate effectiveness.* | **Red**  **Amber**  **Green** |  |
| **3.** | **What methods do you use to raise awareness of abuse, neglect and self-neglect with staff?**  **How effective were these in 2018-19? For example, consider how confident are staff in implementing the local self-neglect Policy?** | *Please describe process and provide data and an example to illustrate effectiveness.* | **Red**  **Amber**  **Green** |  |
| **4.** | **How do you ensure that your awareness raising work is accessible?** | *Please describe what information is available and the range of formats available – e.g. different languages, easy read, audio etc. and give at least one example.* | **Red**  **Amber**  **Green** |  |
| **5.** | **How have you worked with other organisations to identify early interventions which will support people to be safe and protected from harm or that supports early identification of risks so that protective action can be taken?** | *Please describe process(es) and give at least one example.* | **Red**  **Amber**  **Green** |  |
| **6.** | **What do you provide to ensure adults with care and support needs develop assertiveness, self-esteem and respect, resilience and confidence?** | *Please describe.* | **Red**  **Amber**  **Green** |  |
| **7.** | **If your organisation commissions services, do your commissioning processes have safeguarding throughout?** | *Please describe.* | **Red**  **Amber**  **Green** |  |
| **8.** | **If your organisation commissions services, do your contracting and contract monitoring processes have safeguarding throughout? How do you know these are effective?** | *Please describe.* | **Red**  **Amber**  **Green** |  |
| **9.** | **If your organisation commissions services, how do you use service user’s feedback to inform commissioning, contracting and monitoring?** | *Please describe.* | **Red**  **Amber**  **Green** |  |
| **10.** | **What are your priorities for improvement in this area this year?** |  | | |
| **11.** | **Are there any immediate actions required?** |  | | |

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| **Actions to be taken to ensure compliance with Principle 2** | **Date for completion** | **By whom** |
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| **Principle 3 Protection** |
| What does good look like?  **The organisation has robust systems in place to recruit staff and evidence that they are fully supported to understand, be competent in and learn from their involvement in the safeguarding process and SARs. The organisation’s processes ensure that adults benefit from and are protected as a result of staff confidence and understanding of abuse and key safeguarding issues. The quality of referrals is monitored and the organisation learns from feedback. An understanding of mental capacity and both ‘functional and executive’ capacity is evidenced throughout capacity assessments which have a real impact on the lives of individuals assessed. The organisation works proactively with relevant services to achieve positive outcomes both adults and children.**  **Staff are fully aware of all the relevant processes and feel confident and empowered to use them in order raise concerns about practice or safeguarding decisions.** |

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|  | **Question** | **Criteria** | **RAG** | **Evidence** |
| **1.** | **Does your organisation have clear and accurate systems to record all actual, alleged and potential harm, abuse and neglect?** | *Please describe system and how it is recorded.* | **Red**  **Amber**  **Green** |  |
| **2.** | **How do you ensure that staff are recruited safely?** | *Please describe process including requirement to obtain references, how many, DBS checks and procedures for checking professional registration etc..* | **Red**  **Amber**  **Green** |  |
| **3.** | **What arrangements do you have in place to ensure that your staff are competent in Safeguarding Adults? This will include access to levels of adult safeguarding training appropriate for their job roles, how it is recorded and monitored.** | *Please describe training/ requirements/minimum standards/requirements of the organisation and how competency is monitored and assessed. Please include other training related to safeguarding adults such as MCA/DoLS, Prevent, Domestic Abuse, Forced Marriage, FGM, Honour Based Crime, Self-Neglect, Hate Crime etc* | **Red**  **Amber**  **Green** |  |
| **4.** | **When raising concerns, how have you assured/improved the quality of section 42 referrals made to the Safeguarding Adults team?** | *Please describe and give an example.* | **Red**  **Amber**  **Green** |  |
| **5.** | **How do you ensure your staff are able to fulfil their responsibilities as part of the safeguarding process?**  **This will include the supervision arrangements in place for staff.** | *Please describe including frequency.* | **Red**  **Amber**  **Green** |  |
| **6.** | **When your organisation has been involved in the Safeguarding Adult process, how did you ensure that it made a real difference to the individual?** | *Please describe and give an example.* | **Red**  **Amber**  **Green** |  |
| **7** | **When your organisation has been involved in the Safeguarding Adult process, is there evidence of feedback on the safeguarding concern being provided and informing organisational practice?** | *Please describe.*  *Please give examples of how this feedback was shared within the organisation to help learning about both thresholds and safeguarding decisions/processes.* | **Red**  **Amber**  **Green** |  |
| **8.** | **Mental Capacity assessments have been repeatedly identified as requiring improvement in agencies across the region – how have you addressed this within your organisation? Have you been effective?** | *Please describe how this has been addressed and provide details and an example to provide assurance that this has been effective. Please include how staff are supported and evidence an understanding of both executive and functional capacity.* | **Red**  **Amber**  **Green** |  |
| **9.** | **How have you implemented the findings of the Safeguarding Adults Reviews that have been published by your local LSAB(s)?** | *Please describe* | **Red**  **Amber**  **Green** |  |
| **10.** | **What progress have you made in ensuring that an individual’s cultural and diversity needs are recognised and considered when receiving a service?** | *Discuss how this is used to inform safeguarding, including taking measures to promote equality and reduce inequalities in access to and outcomes from service* | **Red**  **Amber**  **Green** |  |
| **11.** | **How effective are your Think Family approaches? ie If you identify through your work with an adult that a child may be at risk how effectively is this managed and coordinated with children’s services?** | *Please describe* | **Red**  **Amber**  **Green** |  |
| **11.** | **Is the process and procedure for managing Prevent concerns known by staff?** **How do you know that staff are aware of these documents and know how to access them?** | *Please describe* | **Red**  **Amber**  **Green** |  |
| **12.** | **Do you have a whistle blowing policy which all staff are aware of that will assist them in escalating concerns and reporting poor practice?** | *Please describe* | **Red**  **Amber**  **Green** |  |
| **13.** | **Are staff aware of the Escalation Procedure and how to use it? How is the importance of challenge embedded within the culture of your organisation?** | *Please describe* | **Red**  **Amber**  **Green** |  |
| **14.** | **What are your priorities for improvement in this area this year?** |  | | |
| **15.** | **Are there any immediate actions required?** |  | | |

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| **Actions to be taken to ensure compliance with Principle 3** | **Date for completion** | **By Whom** |
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| **Principle 4 Proportionality** |
| What does good look like?  **The organisation has embedded principles of Making Safeguarding Personal and Mental Capacity Act and can demonstrate how these influence safeguarding activity on a case by case and policy level leading to person centred action being taken in accordance with the wishes of the adult at risk. Those actions and policies reflect the values of promoting the least restrictive actions and interventions whilst maintaining responsibilities to wider cohorts of adults who may be at risk of abuse and neglect. Organisations can demonstrate changes in practice since the implementation of the Care Act which serve to support person centred decisions and proportionate decision making**. |

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|  | **Question** | **Criteria** | **RAG** | **Evidence** |
| **1.** | **Do you use audits to evidence whether safeguarding practice in your organisation is consistent and proportionate?** | *Please describe and give examples of audits taken place this year* | **Red**  **Amber**  **Green** |  |
| **2.** | **How do you ensure that positive risk taking is facilitated?** | *Please evidence* | **Red**  **Amber**  **Green** |  |
| **3.** | **How do you use data to monitor the safeguarding approaches taken by your organisation?** | *Please describe* | **Red**  **Amber**  **Green** |  |
| **4.** | **What are your priorities for improvement in this area this year?** |  | | |
| **5.** | **Are there any immediate actions required?** |  | | |

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| **Actions to be taken to ensure compliance with Principle 4** | **Date for completion** | **By whom** |
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| **Principle 5 Partnership** |
| What does good look like?  **The organisation has up to date policies, protocols and guidance, both single and multi-agency. The organisation ensures that staff are kept up to date with changes to local and regional policies and this is evidenced in both policy and practice. Staff have access to the information sharing protocol and regional safeguarding guidance and are using them routinely in their practice. There is evidence that information is shared with and by the organisation when appropriate and records demonstrate decision making about sharing information. Relationships with partners are effective and staff work together to ensure safety and wellbeing. Adults at risk and their families understand how and when their information will be shared, and experience joined up working from the professionals involved in their care.** |

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|  | **Question** | **Criteria** | **RAG** | **Evidence** |
| **1.** | **Does your organisation have an up to date information sharing protocol? Is it fit for purpose – and how do you know this?** | *Please describe* | **Red**  **Amber**  **Green** |  |
| **2.** | **Is the newly updated regional safeguarding policy and local guidance reflected in your internal guidance and procedures?** | *Please describe* | **Red**  **Amber**  **Green** |  |
| **3.** | **Are your staff aware of these documents and know how to access them?** | *Please describe* | **Red**  **Amber**  **Green** |  |
| **4.** | **What are your priorities for improvement in this area this year?** |  | | |
| **5.** | **Are there any immediate actions required?** |  | | |

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| **Actions to be taken to ensure compliance with Principle 5** | **Date for completion** | **By Whom** |
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| **Principle 6 Accountability** |
| What does good look like?  **The purpose of this partnership is to hold each other to account and ensure safeguarding remains high on everyone’s agenda. The main responsibilities of the Board and its partners are therefore to co-ordinate, share data and quality assure the safeguarding activities of member agencies. This is done so when requested and promptly. The role of the organisation is clear in relation to their responsibilities to the Local Safeguarding Adult’s Board with attendance at all SAB Board Meetings, Sub and Task Groups by the Board member or delegated representative who understand what is expected of them and others. This will include: reading all Board Papers; providing input and feedback; taking responsibility for actions and information dissemination of all that is relevant across their agency; has processes in place to test and check that Board Information is reaching front line professionals; and that the commitment at Board level translates to changes in front line practice.** |

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|  | **Question** | **Criteria** | **RAG** | **Evidence** |
| **1.** | **Has your organisation’s attendance at the relevant LSABs been from a senior representative with the competency and knowledge for the role and decision making authority? How do you monitor whether they are contributing effectively?** | *Please provide details - names and positions, explaining how attendance and participation are monitored and information and actions from meetings are bought back into your organisation.* | **Red**  **Amber**  **Green** |  |
| **2.** | **How are actions and information from the SAB disseminated within your organisation? How can you be assured of the effective reach of this process?** | *Please describe* | **Red**  **Amber**  **Green** |  |
| **3.** | **Does your organisation respond to all requests from the SAB for data and information related to adult safeguarding including engagement with reviews and audits?** | *Please describe with examples* | **Red**  **Amber**  **Green** |  |
| **4.** | **Does your organisation respond to all requests from the SAB for data and information related to adult safeguarding including engagement with reviews and audits?** | *Please describe with examples* | **Red**  **Amber**  **Green** |  |
| **5.** | **How do you ensure that DOLS and Community DOLS applications are made and/or undertaken in a timely and appropriate way for adults in your service?** | *Please provide details* | **Red**  **Amber**  **Green** |  |
| **6.** | **How many internal enquiries/serious incident reviews about an adult at risk have you undertaken between 1st April 2019 and 31st March 2019? What are the key themes relevant to adult safeguarding, from these and how have you implemented changes as a result?** | *Please provide details*  *Number:*  *Themes:* | **Red**  **Amber**  **Green** |  |
| **7.** | **What are your priorities for improvement in this area this year?** |  | | |
| **8.** | **Are there any immediate actions required?** |  | | |

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| **Actions to be taken to ensure compliance with Principle 6** | **Date for completion** | **By Whom** |
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| **Learning from Serious Cases** |
| What does good look like?  **Learning from serious events that have taken place locally is a key responsibility for all members of the partnership. Where relevant to an organisation’s role/responsibilities it is critical that organisations demonstrate that the recommendations from reviews of service cases can be evidenced as being implemented, or where not yet fully implemented, that progress is being made.** |

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|  | **Question** | **Criteria** | **RAG** | **Evidence** |
| **1.** | **Your organisation uses the “case study” of ‘Tom’s’ circumstances in training** | *Please describe with details* | **Red**  **Amber**  **Green** |  |
| **2.** | **Your organisation has arrangements in place to ensure that work with individuals with complex support needs is shaped by shared goals and clear leadership, and that it has arrangements in place to monitor that its approach is successful and address practice concerns highlighted** | *Please describe with examples* | **Red**  **Amber**  **Green** |  |
| **3.** | **Your organisation has arrangements in place to ensure that, when working with someone with an acquired brain injury, that the this injury and mental capacity is foregrounded in all professional assessments and referrals and that family involvement is prioritised with a view to understanding the continuities, the discontinuities and the unpredictable and complex process of reconstructing the self which arise from such a critical injury.** | *Please describe with examples* | **Red**  **Amber**  **Green** |  |
| **4.** | **Commissioning organisations only. As a commissioning organisation you have set out how local practice and priorities match good practice concerning the support of people with brain injury, dual diagnoses (Department of Health 2002), and the expectations of the National Suicide Prevention Strategy for England (Department of Health 2012).** | *Please describe* | **Red**  **Amber**  **Green** |  |
| **5.** | **Commissioning organisations only. Your organisation knows how many people that it has placed outside of Somerset, either directly or on its behalf.** | *Please complete Column 1 in Appendix 1* | **Red**  **Amber**  **Green** |  |
| **6.** | **Commissioning organisations only. As a commissioning organisation you are committed to ensuring that all placements receive a face to face review with the person at least annually.** | *Please describe* | **Red**  **Amber**  **Green** |  |
| **7.** | **Commissioning organisations only. Your organisation has arrangements in place to review all the care and support of people placed outside of Somerset on an annual basis.** | *Please complete Columns 2-6 in Appendix 1* | **Red**  **Amber**  **Green** |  |
| **8.** | **Commissioning organisations only**. **Your organisation has arrangements in place to monitor the quality, and where necessary improve, the quality of Reviews of people that it has placed outside of Somerset** | *Please describe* | **Red**  **Amber**  **Green** |  |

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| **Actions to be taken to ensure compliance with learning from serious cases** | **Date for completion** | **By Whom** |
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Appendix 1

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|  | **1** | **2** | **3** | **4** | **5** | **6** |
| **Location Type** | **Number of people placed outside of Somerset by, or on behalf of, your organisation** | **No. Reviews Due** | **No. Reviews Completed** | **No. Reviews that were face to face** | **% reviews completed** | **% of reviews that were face to face** |
| Care home – Nursing |  |  |  |  |  |  |
| Care home – Residential |  |  |  |  |  |  |
| Hospital – Acute |  |  |  |  |  |  |
| Hospital – Community |  |  |  |  |  |  |
| Hospital – Mental Health |  |  |  |  |  |  |
| In a community service |  |  |  |  |  |  |
| In the community |  |  |  |  |  |  |
| Own Home |  |  |  |  |  |  |
| Other |  |  |  |  |  |  |
| Total |  |  |  |  |  |  |