



# Models of Safeguarding: costs and outcome

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- The views expressed in this presentation are those of the authors and not necessarily those of the SSCR or the Department of Health
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# Introduction

- Recap models of safeguarding
- Conceptual framework
- Data and methods
  - Outcomes
  - Costs
- Factors linked with substantiating alleged abuse
- Costs of adult safeguarding
- Conclusions

# Models of safeguarding

- Dispersed-Generic (safeguarding work undertaken by operational teams)
- Dispersed-Specialist (safeguarding work undertaken partly by specialist social workers located in operational teams)
- Partially Centralised-Specialist (some safeguarding work undertaken by a central specialist safeguarding team)
- Fully-Centralised-Specialist (all safeguarding work undertaken by a specialist safeguarding team).



# Conceptual framework

- Each Model of Safeguarding is associated with different outcomes and costs.
- Specifically, the analysis aimed to identify associations of Model of Safeguarding with:
  - Any differences in likelihood of a referral being substantiated following an investigation (Enquiry)
  - Possible differences in costs of different approaches to adult safeguarding.



# Data

- Variables derived from Abuse of Vulnerable Adults records
  - five sites
  - Two years (2011-12 and 2012/13)
  - n=27,913 referrals
- Demographics and type of need of the adult at risk
- Type of alleged abuse
- Location of alleged abuse
- Perpetrator of the alleged abuse
- Outcomes of investigations
  - Abuse substantiated
  - Abuse partially substantiated
  - Non-conclusive
  - Not substantiated



# Cost data

- Overall budget
- Numbers of staff (full-time equivalents) at different roles and grades working in any safeguarding team;
- Staff at different roles and grades involved in safeguarding work
- Cost of involving other agencies that were met by the local authority
- Any legal costs or compensations as a result of the outcome of the referral
- Costs of the safeguarding team training
- Other costs, such as venue and meeting costs.

# Analysis methods

- Chi-square tests of significance
  - Cramer's V or Phi estimates of association size
  - Z-tests of the standardised residuals
- Multinomial regression



# Bivariate associations with Outcomes of investigations

- Model of Safeguarding
- Gender of Adult at Risk
- Age group of Adult at Risk
- Ethnicity of Adult at Risk–
- Type of alleged abuse
- Type of need
- Location of alleged abuse
- Relationship with the alleged perpetrator

# Multinomial regression

- Aim to identify factors relating to three outcomes controlling for other variables
  - Abuse substantiated or Abuse partly substantiated
  - Non conclusive
  - Not substantiated
- Two comparisons.
  - Likelihood of Inconclusive compared with the likelihood of substantiated/partially substantiated outcomes
  - Likelihood of referrals resulting in abuse not being substantiated compared with the likelihood of referrals resulting in a abuse being substantiated/partially substantiated

# Factors increasing likelihood that alleged abuse would be substantiated or partially substantiated

## Both comparisons

- Dispersed-Specialist sites
- Physical Abuse
- People with mental health problems and dementia
- Social care staff (as perpetrators)

## Comparing substantiated/partially substantiated against not being substantiated only

- Adults at risk aged between 18-64 (compared with referrals concerning people aged 85 or more)

Factors decreasing or not affecting the likelihood that alleged abuse would be substantiated or partially substantiated

- Referrals where the **alleged abuse took place in the home of the adult at risk** were less likely to be Substantiated/Partially substantiated
- **Gender** did not appear to be associated with referral outcomes
- **Ethnicity** of the adult at risk did not appear to be associated with referral outcomes

# Costs of safeguarding

Four ratios were calculated, to show the cost per:

- referral recorded on the AVA records
- completed referral
- referral where abuse was substantiated
- per person referred (numbers obtained using unique identifiers)

# Costs of adult safeguarding

	Dispersed generic	Dispersed Specialist	Partially Central	Fully Central
Overall estimated budget	£281,000	£1,788,185	£1,654,000	£466,764
Number of referrals	1,876	4,683	6934	2,495
<b>Cost per referral</b>	<b>£150</b>	<b>£382</b>	£238	£187
Number of individuals referred	1,416	1,429	4,934	1,375
<b>Cost per person referred</b>	<b>£198</b>	<b>£1,251</b>	£335	£339
Numbers of completed referrals	780	4683	3750	811
<b>Cost per completed referral</b>	<b>£360</b>	<b>£382</b>	£441	£576
Number of substantiated referrals	289	3,139	640	158
<b>Cost per substantiated referral</b>	£972	<b>£570</b>	£2,584	£2,954

# Conclusions

- Model of safeguarding was found to be associated with the proportions of substantiated referrals
- Alleged abuse in safeguarding referrals to Dispersed Specialist sites were more likely to be substantiated compared with sites operating other models (less cost?)
- Having specialist safeguarding leads in mainstream teams may facilitate better working relationships with other social workers and agencies.
- However substantiating abuse may not lead to better quality of life – more research is needed
- It may be that decisions about local organisation of safeguarding are more affected by local organisational matters

# Thanks for listening

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