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

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