

1.23 Safeguarding Adults Policy & Procedures

Information Box	
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Committee	Quality & People Committee
Policy Owner	Director Of Operations
Lead Author	Head of Quality & Continuous Improvement
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Introduction

As part of our mission to be an outstanding provider of high-quality care, support and housing services that helps vulnerable members of society achieve their aspirations and lead fulfilling lives, Safeguarding is of paramount importance. The values of the organisation; Person Centred, Respectful, Open, Understanding and Dedicated form an integral part of meeting this mission at all times.

It is the responsibility of all staff and volunteers to protect, safeguard and promote the welfare of adults at risk. All staff and volunteers must recognise that Safeguarding is everyone's business and responsibility, this St Anne's Safeguarding Adult Policy and Procedure represents the commitment of us all to work together to safeguard adults at risk and that we will demonstrate a 'Zero Tolerance' approach to all forms of abuse.

The Care Act 2014 uses the term Adults with needs for care and support to refer to people in receipt of support. Throughout this document the term Adult at risk will be used in reference to people experiencing safeguarding concerns, this language is consistent with that used in the Joint Multi-Agency Safeguarding Adults Policy & Procedures, West Yorkshire, North Yorkshire and York.

St Anne's Safeguarding policy is underpinned by the principles of Making Safeguarding Personal which is a person-centred approach which means that adults are encouraged to make their own decisions and are provided with support and information to empower them to do so. This approach recognises that adults have a general right to independence, choice and self-determination including control over information about themselves. Staff should strive to deliver effective Safeguarding consistently with these principles considered. They should ensure that the adult has accessible information, in a communication format which is preferable to them, so that the adult can be supported to understand the information given to them and make informed choices about Safeguarding: what it means, risks and benefits and possible consequences. Staff will need to clearly define the various options to help support them to make a decision about their safety.

All Managers of services must ensure that staff have instructions of how to access the most up to date, online version of the local procedures which apply to the area in which the service is based and that these instructions are placed at the front of the Worksite Information file.

All allegations will be taken seriously and dealt with appropriately through our disciplinary procedures where necessary.

Aims

- To provide a framework for reporting Safeguarding issues promptly and correctly according to the procedures required by the Local Authorities in which St Anne's operates services
- To ensure that staff at every level in the organisation understand Safeguarding matters, their role and responsibility in managing these and how they should respond when issues arise
- To prevent and protect adults with needs for care and support from, all forms of abuse
- To ensure that the organisation learns from Safeguarding issues and shares that learning in order to try and prevent similar issues arising in the future.

What Is Abuse?

There are commonly ten types of abuse. This might be:

- something that happens once or repeatedly
- a deliberate act or something that was unintentional, perhaps due to a lack of understanding
- a crime

There are many different kinds of abuse, these are just examples:

Physical Abuse	Not only but including, being hit, kicked, nipped, punched being locked in a room or inappropriate restraint
Sexual Abuse	Not only but including, being made to take part in a sexual activity when the adult has not, or is not able to, give their consent, or being made to look at or watch pornographic material
Psychological Abuse	Not only but including, being shouted at, ridiculed or bullied, as well as being made to feel frightened
Financial or Material Abuse	Not only but including, stealing someone's money or belongings, or misusing them for someone else's benefit
Neglect	The failure to provide care or support which results in someone being harmed, including pressure sores grade 3 or above
Discriminatory Abuse	Not only but including, treatment or harassment based on age, gender, sexuality, disability, race or religious belief
Modern Slavery	Not only but including, human trafficking, forced labour, and domestic servitude
Organisational Abuse	Any of the above forms of abuse being caused by an organisation
Domestic Violence and Abuse	This occurs between partners or by a family member. (There is a separate policy relating to Domestic Violence and Abuse)
Self-neglect	Covers a wide range of behaviours, such as neglecting to care for one's personal hygiene, health or surroundings and includes behaviours such as hoarding, (there is a separate policy relating to Hoarding)

A Safeguarding response in relation to self-neglect may be appropriate where a person is declining assistance in relation to their care and support needs, and the impact of their decision, has or is likely to have a substantial impact on their overall individual wellbeing.

Organisational Safeguarding Leads

The Director of Operations is the organisational Safeguarding Lead. They are accountable to The CQC and St Anne's Board to assure them the following measures are in place. They are responsible for;

- Ensuring Safeguarding policies are fit for purpose, follow national and local guidance and used correctly by staff
- Ensuring all staff are trained in Safeguarding
- Ensuring procedures are implemented, and monitoring action taken
- Reporting any issues/themes required to Board
- Sharing lessons learnt that can be used to improve the effectiveness of Safeguarding procedures
- Ensuring any relevant bodies/regulator/key people are informed as appropriate e.g., Charities Commission, CQC etc.

The Safeguarding Lead Trustee is a member of St Anne's Board and also provides another level of assurance to the Board that the organisational approach to Safeguarding is appropriate.

The Safeguarding Concerns Manager is the Area Manager, cover must always be arranged for periods of absence to ensure this responsibility is met.

First Line Managers are responsible for;

- Ensuring the client or family member where appropriate are asked what their desired outcome is from raising the safeguarding concern.
- Ensuring systems are in place for reporting Safeguarding issues or raising concerns.
- Ensuring their staff team provides a person-centred service, delivered through robust support planning and positive risk assessment, which empowers each client and ensures the risk of abuse occurring is minimised
- Ensuring their staff are vigilant for any indication of abuse
- Ensuring every member of staff receives appropriate training as necessary
- Ensuring staff have understood training delivered by St Anne's and can put this into practice
- Briefing their team about the details of the procedure for making Safeguarding adults concerns and supporting enquiries which applies to their area
- Ensuring every member of their team understands and can put into practice that procedure if it becomes necessary

- Ensuring new staff have understood Safeguarding training provided by St Anne's
- Ensure new staff understand local requirements and can put them into practice
- Ensuring all Safeguarding concerns related to their service are reported in a timely manner and that policies and procedures are correctly followed
- Arranging cover when they are not available to ensure that Safeguarding issues are highlighted through the incident reporting system and appropriate advice sought
- Enabling and supporting relevant staff to play an active part in the Safeguarding adults process
- Ensuring that any staff delivering a service to the adult at risk are kept up to date on a need-to-know basis and do not take actions that may prejudice the investigation
- Ensuring that where Safeguarding concerns have been raised, lessons are learned, and appropriate responses made to try and prevent further re-occurrence

St Anne's staff must ensure that their systems, processes, policies and procedures serve to minimise the risk of abuse. They must work to develop a culture where the needs, interests and welfare of the adult at risk come first and put in place safeguards to prevent abuse from occurring.

Prevention also involves staff and volunteers working together to ensure that practice is carried out with dignity, respect, compassion and choice. Prevention involves developing a culture where poor practice is always challenged and the needs and rights of the adult at risk are always promoted.

Prevention of abuse must always be the first priority. Where abuse occurs or is suspected, it must always be responded to in line with the Safeguarding Adults Multi-Agency Policy and Procedures for the Local Authority in which St Anne's operates and meet the requirements of the Care Act 2014.

Practice must be in line with the Mental Capacity Act 2005, risks must be assessed and adults at risk should be supported to make informed decisions about how these risks are managed.

Responsibilities of All St Anne's Staff and Volunteers

Prevention of abuse is a core responsibility of all staff and volunteers that provide care and support to adults at risk. However, overall responsibility for Safeguarding in the organisation remains with the Chief Executive Officer.

The responsibilities of all St Anne's staff and volunteers include ensuring that:

- All staff and volunteers report all concerns to Managers quickly and raise concerns with the Local Authority where appropriate
- All staff and volunteers work in partnership with other agencies to meet the Safeguarding needs of the adult at risk
- Information is shared between agencies in accordance with information sharing policies and protocols
- St Anne's keeps and provides accurate records in relation to Safeguarding concerns, actions taken, and their outcomes including the completion of incident reports via the Incident Reporting System and relevant progress notes
- First Line Managers, Area Managers, and the Executive Leadership Team, support Risk Management Responses and the Formal Enquiry Process, including attendance and participation at strategy meetings and case conferences
- Decisions are reached in line with the Mental Capacity Act 2005 and the associated Code of Practice
- All staff support adults at risk to end abuse and to access support that enables them to achieve resolution and recovery from their experiences

Training

To ensure that St Anne's can oversee the quality of training and ensure that learning outcomes from training are appropriate, it is expected that all training completed by staff will be delivered by the organisation or it's contracted partner providers e.g., contracted online training provider.

It is recognised that Safeguarding training can differ between Local Authorities and Commissioners, and that often it is a contract requirement to comply with local Safeguarding protocol. In order to do this, the organisation recognises that staff will need to be familiar with these local protocols through training. Local Authorities and local Safeguarding Teams will advise on their requirements of individual services.

St Anne's requires all staff to update Safeguarding training annually. St Anne's face to face Safeguarding of Vulnerable Adults training is mandatory during induction and then every three years, with staff being able to complete online refresher training through the organisation's online training provider or Local Authority training on an annual basis in between.

It is the responsibility of the service Manager to ensure staff are fully inducted in relation to Safeguarding during their initial induction and attend St Anne's and Local Authority Safeguarding training at the required intervals.

St Anne's training will focus on providing safe but stimulating person centred services.

Safeguarding training will include:

- Recognition of all kinds of abuse
- Relevant St Anne's policies and procedures
- The professional responsibility to report abuse or suspicion of abuse in a timely manner
- The requirements of the Care Act 2014
- The protection staff receive under St Anne's Whistleblowing procedures - which incorporate the Public Interest Disclosure Act 2018

St Anne's training will be reviewed regularly to ensure it meets level 1 Safeguarding training requirements and complies with:

- Current legislation, guidelines and best practice
- Local Authority and Safeguarding Teams requirements
- St Anne's policies and procedures

Principles and Values

The following principles are embedded in St Anne's policy and should be followed by all staff.

Empowerment	Adults are encouraged to make their own decisions where they are able, they should be provided with support and information to make these decisions and where they are able to give this, their consent is needed for decisions and actions designed to protect them.	Clients are consulted about the outcomes they want from the safeguarding process and these directly inform what happens.
Protection	It is every person's duty of care and/or moral responsibility to act upon suspicions of abuse and to ensure that adults at risk receive the support and protection to which they are entitled. Adults are offered ways to protect themselves, and there is a coordinated response to adult safeguarding.	Clients are provided with help and support to report abuse. They are supported to take part in the safeguarding process to the extent to which they want and are able to be.
Prevention	Prevention of abuse is the primary goal. Members of the public, agencies, service providers, individual staff and volunteers, and communities all have a role in preventing abuse from occurring. Strategies are developed to prevent abuse and neglect that promote resilience and self-determination.	Clients are provided with easily understood information about what abuse is, how to recognise the signs and what they can do to seek help.

Proportionality	It is everyone's responsibility to ensure that a proportionate and least intrusive response is balanced with the level of risk and the nature of the allegation/concern. Proportionate decisions need to take into account the principles of empowerment and protection.	Clients are confident that the professionals will work in their best interests and only get involved as much as needed.
Partnership	Partnership means working together with Safeguarding Teams, professional colleagues and partner agencies to prevent and respond effectively to incidents or concerns of abuse.	Clients are confident that information will be appropriately shared in a way that takes into account its personal and sensitive nature. They are confident that agencies will work together to find the most effective responses for their individual situation.
Accountability	This involves each individual staff and volunteer fulfilling their duty of care, with clear lines of accountability. Including them understanding what is expected of them, recognising and acting upon their responsibilities to each other, and accepting collective responsibility for safeguarding arrangements. There must be transparency in delivering safeguarding responses and decisions.	Clients are clear about the roles and responsibilities of all those involved in the solution to the problem.

Raising a Concern

Raising a Safeguarding Concern means reporting your concerns that a person over 18 years of age who:

- has or may have needs for care and support (whether or not the Local Authority is meeting any of those needs)
- is experiencing, or is at risk of, abuse or neglect, and as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it.

Any person can raise their concerns with the Local Authority. This means that the adult experiencing abuse or neglect can raise their concerns themselves, but so can their friends, family members, unpaid carers, other members of the public, paid carers, professionals and organisations.

Where concerns have arisen within an organisation that provides care and support such as St Anne's, the concern raised to the local Safeguarding Team will usually be raised by the First Line Manager or Area Manager. This should happen immediately where it is urgent and serious, and on the same working day in relation to all other concerns.

If the First Line Manager / Area Manager is unavailable, and this could cause an undue delay, then any member of staff or volunteer may need to raise a Safeguarding concern in their place.

(The new combined West, North Yorkshire and York Safeguarding procedures refer to a Safeguarding Concerns Manager. For the purposes of local reference, the St Anne's Area Manager is the Safeguarding Concerns Manager)

When a Concern is not accepted by the Adult Social Care Team

Where concerns have been reported and an enquiry is not felt necessary by the local authority the FLM should **not** view this as an escalation of risk or support need. Where a safeguarding concern has been reported and not accepted the FLM should find other means to raise the risk to the client or increase in their needs to the local authority. This may be through the following means:

- A referral to the Adult Social Care team for an assessment of need
- An email to the Adult Social Care team manager outlining the risk and concerns regards the persons safety or needs
- An email to the commissioning manger to raise concerns
- To arrange an MDT meeting with all professionals involved
- Discussion with Area Manager on escalating the risk to the appropriate external partner for support and information sharing purposes

If a safeguarding concern is not accepted due to any reason, please report this to your Area Manager and update the progress notes on The Incident Reporting System with the next steps.

The Role of the Area Manager / Safeguarding Concerns Manager

The Safeguarding Concerns Manager is the Area Manager within each service under each Local Authority Safeguarding Procedure. This role has responsibility for ensuring that concerns of possible abuse and neglect are responded to and reported appropriately.

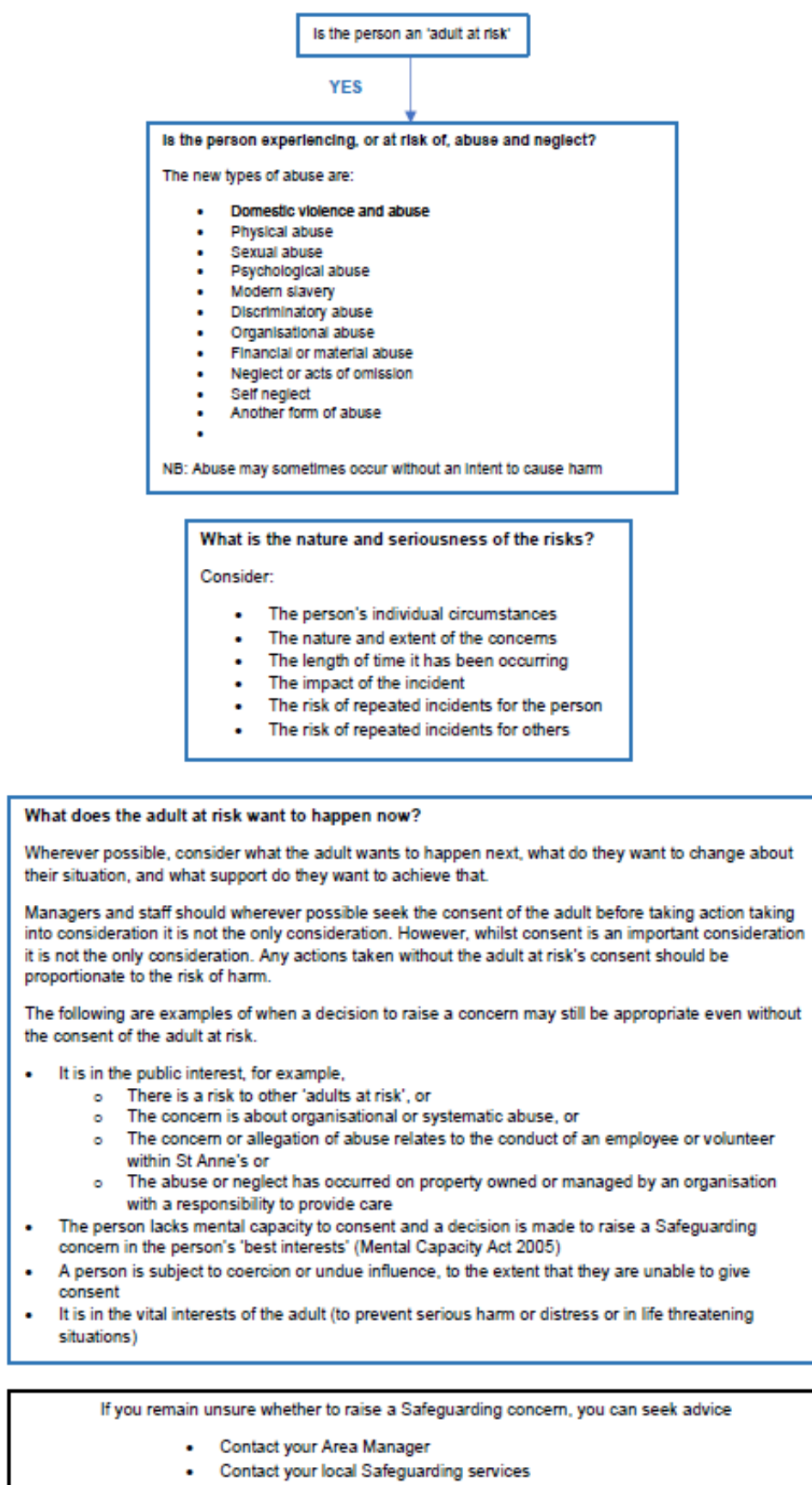
The following flowchart summarises the key responsibilities for managing Safeguarding Concerns by the Area Manager / Safeguarding Concerns Manager. However, where actions are needed urgently or no Safeguarding Concerns Manager is available, **any member of staff or volunteer may need to raise a concern**, in which case they should also follow this guidance.

Deciding Whether to Raise a Safeguarding Concern

Each Safeguarding Team in each Local Authority will have its own approach and threshold about what and how concerns are raised. Some Safeguarding units will want every concern that is raised at St Anne's sending to them to action an "Enquiry". Others will want a proportionate response and other actions undertaken locally such as a "protection plan" being implemented, risk assessment, support and care plans being reviewed, and this being communicated to the Safeguarding Team for approval or further action under the "Enquiry" part of the process.

Some local Safeguarding Teams may pass the "Enquiry" part of the process back to St Anne's to investigate and then either steer and advise or agree or disagree with the outcome.

It is important that Managers understand and follow the local guidance and procedures. When deciding whether a Safeguarding Concern should be raised with your local Safeguarding unit, consider the following four key questions on the following page:



Whistle-Blowing – Public Interest Disclosure Act 1998

Sometimes members of staff may become aware of Safeguarding Concerns or allegations but be concerned about the impact on their employment or working relationships if they were to report them.

Where people have these concerns, they should refer to St Anne's the "Whistleblowing" Policy. Advice is also available from:

- Protect Advice line - whistle@protect-advice.org.uk

Initial Enquiry

Once a Safeguarding Concern has been raised with the Local Authority, an Initial Enquiry will be undertaken to determine the appropriate response within the Safeguarding procedures. Different Safeguarding Teams may refer to this stage differently.

An Initial Enquiry involves:

- gathering information about the allegations/concerns
- establishing the wishes and best interests of the adult at risk
- establishing the need for representation/independent advocate
- checking whether a response within the Safeguarding procedures is appropriate and proportionate to the concerns raised
- protection from the abuse and neglect, in accordance with the wishes of the adult at risk
- making decisions about further actions that should be taken with regard to the person or organisation responsible for the abuse or neglect; and
- enabling the adult at risk to achieve resolution and recovery

Central to this approach is the need for the local Safeguarding Team to work with the adult at risk and St Anne's to agree their desired outcomes, to confirm the cause for concern and agree the actions to be taken.

Once initial enquiries are completed the local Safeguarding Team should then determine with the adult at risk what, if any, further action is necessary and acceptable. Actions may include those being undertaken by the adult at risk to Safeguard themselves, as well as those undertaken by the Local Authority as Commissioners, St Anne's and other organisations.

Where the concern is not resolved by the initial enquiries, the local Safeguarding Team will need to decide on the most proportionate response.

It is important that St Anne's staff understand that risk assessment, Safeguarding planning and the provision of support to enable the adult at risk to be in control of decisions about their own life, are core elements throughout the Safeguarding process.

Risk Management

Where there is no need for a Formal Intervention, but there are actions needed to Safeguard an adult at risk or others, then a Risk Management Response may be appropriate.

Risk Management Response is a term used to describe a range of possible responses that protects the person or supports them to manage the risk of abuse or neglect.

These responses may include:

- assessment of care and support needs
- carers assessment
- unscheduled review of care and support
- mediation
- multi-agency risk assessment
- social work intervention
- family group conferences
- Designated Adults Safeguarding Manager Interventions (Designated Safeguarding Lead) (where a Formal Enquiry is not being undertaken)
- commissioning actions
- contracts enforcement actions
- service, quality assurance actions
- serious incident processes

The actual response taken will need to take into consideration the desired outcomes of the adult at risk, and the nature of the assessed risk to the individual and or others.

Whichever approach is taken, St Anne's staff will need to ensure the following factors are central to the response:

- considering the need for representation / independent advocacy
- working towards the wishes and desired outcomes of the adult at risk
- evaluating risk
- taking actions to safeguard the adult (and or other adults/children)
- reaching decisions in line with the Mental Capacity Act
- recording issues and actions

It will also be necessary to evaluate whether the actions are addressing the risk, promoting wellbeing and responding to the desired outcomes of the adult at risk. If this is not the case, an alternative approach will need to be considered to achieve these aims.

Formal Enquiry

These processes Formal Enquiry are undertaken by the local authority Safeguarding Teams. They have been included briefly in St Anne's policy to give an idea of the scope and range of options available to the differing Safeguarding Teams with which St Anne's works.

St Anne's Managers and staff should always refer to the local Safeguarding policies and procedures available in their geographic area.

A Formal Enquiry is needed where it has been decided that it is necessary to go through a formal process of establishing the facts and gathering evidence, so as to be able to identify and/or provide a basis for the Safeguarding actions required. This is sometimes referred to as a Safeguarding Adults Review. Different Safeguarding Teams St Anne's works with have different stages and wording but this is often referred to as the strategy stage.

Strategy Meeting or Discussion

The purpose of a strategy meeting or discussion is to review the Safeguarding plan for the adult at risk (or others) and to plan a formal enquiry to determine what, if any, further Safeguarding actions are required.

A Safeguarding Coordinator will chair the strategy discussion or strategy meeting. The Safeguarding Coordinator will be a senior person from the Local Authority who has overall responsibility for managing the formal enquiry. The strategy meeting is a confidential meeting and any discussions or minutes from this meeting cannot be shared without permission of the chair.

The Strategy Discussion or Meeting will need to include:

- sharing information about the Safeguarding concern/allegation
- consideration of the wishes and desired outcomes of the adult at risk, and/or their best interests where they lack the mental capacity in relation to relevant decisions
- agreement of how the adult at risk will be involved and included within the formal enquiry and any support they may require
- assessment of the risk to the adult at risk or others, including children
- agreement of a Safeguarding plan
- agreement that a formal enquiry rather than a risk management response is the most appropriate and proportionate response
- planning a formal enquiry, coordinating the involvement of other organisations where required

The approach taken by the strategy discussion/meeting should be to support the adult at risk to manage the risks they face. This includes offering support to develop or maintain a private life including relationships with people of their choice.

The Safeguarding Coordinator will need to decide who to involve in a strategy discussion/meeting. It is a requirement that St Anne's Managers receiving requests and invitations to participate in a strategy meeting should regard the request as a priority. If the Manager of the service cannot attend, then another Manager at the same level should attend. If no one from the organisation is able to attend a meeting, they should provide information as requested and make sure it is made available to the Safeguarding Coordinator in advance.

It may be appropriate to invite the adult at risk to a strategy meeting or to part of it, to contribute their views and needs directly. If they are not present it is important that their views are known, so that these can be considered within any planning. This will be for the Safeguarding Coordinator to decide. St Anne's Managers should check in advance of any meeting they are invited to.

There will be occasions where St Anne's Safeguarding Lead will be required to attend from St Anne's at the request of the Safeguarding Coordinator.

Safeguarding Formal Enquiry

A Safeguarding Formal Enquiry is undertaken in order to:

- identify what actions are required to safeguard an adult from the risk of abuse and neglect
- establish facts and gather evidence in relation to an allegation of abuse or neglect
- support an ongoing assessment of risk
- support the development of a Safeguarding plan

The formal enquiry should recognise the right of the adult at risk to develop or maintain a private life including relationships with people of their choice. The formal enquiry should be carried out in a way that is impartial and fair to all concerned and allows people to respond to allegations made about them.

Case Conference

The purpose of the Case Conference is to review the findings of the formal enquiry, identify risks and agree Safeguarding actions required to respond to the concerns.

A Case Conference may take the form of a Case Conference Meeting or a Case Conference Discussion. In both cases, it will need to:

- consider the evidence gathered through the formal enquiry
- determine whether, on the balance of probabilities, abuse has occurred
- assess the level of any ongoing risk
- agree a Safeguarding plan where required
- agree outcomes, taking into account the adult at risk's wishes and best interests
- decide how any Safeguarding plan is reviewed and monitored

The decision as to whether there needs to be a Case Conference Meeting, or a Case Conference Discussion will need to be taken locally by each team.

Exiting the Safeguarding Adults Procedure

There will need to be clear lines of communication between St Anne's staff and Managers and local Safeguarding Teams when a situation or issue is no longer being monitored or dealt with under formal Safeguarding procedures.

St Anne's staff and Managers will still need to ensure the person is supported to keep them safe and this may include new ways of working or increased levels of support and monitoring. This may occur at earlier stages not just when situations come out of formal Safeguarding.

Record Keeping and Confidentiality

Detailed factual records must be kept by St Anne's staff and Managers should follow St Anne's policies and procedures for recording and storage of records.

Information Sharing

Information sharing between St Anne's and local authority Safeguarding Teams is essential to safeguard adults at risk of abuse, neglect and exploitation.

Decisions about what information is shared and with whom, will be taken on a case-by-case basis and using Caldicott Principles. Whether information is shared with or without the adult at risk's consent, the information shared should be:

- necessary for the purpose for which it is being shared
- shared only with those who have a need for it
- be accurate and up to date
- be shared in a timely fashion
- be shared accurately
- be shared securely

There are only a limited number of circumstances where it would be acceptable not to share information pertinent to Safeguarding with relevant Safeguarding partners.

These would be where the person involved has the mental capacity to make the decision and does not want their information shared AND:

- nobody else is at risk
- no serious crime has been or may be committed
- the alleged abuser has no care and support needs
- no staff are implicated
- no coercion or duress is suspected
- the public interest served by disclosure does not outweigh the public interest served by protecting confidentiality
- the risk is not high enough to warrant a multi-agency risk assessment conference referral
- no other legal authority has requested the information

If there is reluctance from one partner to share information on a Safeguarding concern the matter should be referred to St Anne's Caldicott Guardian who will then agree a referral to the relevant Safeguarding Adults Board if appropriate. It can then consider whether the concern warrants a request, under Clause 45 of the Care Act 2014, for the 'supply of information'. Then the reluctant party would only have grounds for refusal if it would be 'incompatible with their own duties or have an adverse effect on the exercise of their functions'.

Complaints

Managers will need to check what the local arrangements are in each area in which St Anne's operates in the event that any person is dissatisfied with practice undertaken under the local procedures in place.

Most Safeguarding procedures, including those under the Safeguarding Adults Multi-agency Policy and Procedure for West and North Yorkshire and York, ask that concerns are raised with the relevant organisation and make a complaint using St Anne's complaints procedures.

New Areas of Safeguarding Awareness and Responsibility

We also have separate policies for:

- Safeguarding Children and Young People
- Domestic Violence and Abuse (Staff and Clients)
- Tenant and Client Antisocial Behaviour
- Prevent

Forced Marriage, Honour Based Violence Modern Slavery, Hate Crime, Mate Crime, MAPPA, HSE, CQC

The Care Act 2014 and revised Safeguarding procedures in the areas St Anne's operates have brought many new areas of potential concern that will need to be considered by St Anne's staff and Managers.

It is important that advice is sought from contacts within local Safeguarding Teams in relation to those that are unfamiliar or new.

A brief summary of the linked agendas to Safeguarding are covered below.

Forced Marriage

Forced marriage is against the law and occurs when, one or both spouses do not consent to a marriage and some element of duress is involved. Duress might include both physical and/or emotional/psychological pressure. Forced marriage is recognised as an abuse against human rights and will also constitute abuse within the context of St Anne's and local Multi-Agency Safeguarding Adults Policies and Procedures if the person is also an adult at risk.

The Forced Marriage Unit is a joint initiative between the Home Office and the Foreign and Commonwealth Office providing specialist advice and guidance. The Forced Marriage Unit provides comprehensive resources and information, including the following guidance:

- Multi-Agency Practice Guidelines: Handling Cases of Forced Marriage (June 2009)
- Forced Marriage and Learning Disabilities: Multi-Agency Practice Guidelines (Dec 2010)

The guidance recommends forced marriage of an adult at risk, should be dealt with within the Safeguarding Adults procedure. The One Chance Rule is that sometimes there will only be one chance to help a person facing forced marriage, hence reference should be made with urgency to the Multi-Agency Practice Guidelines listed above.

The police should always be contacted for advice in relation to suspicions or concerns about forced marriage.

The Forced Marriage Unit website provides a wealth of information and guidance www.fco.gov.uk/forcedmarriage , together with a helpline: 020 7008 0151

Honour-Based Violence

So-called 'honour-based violence' is a crime or incident, which has or may have been, committed to protect or defend the perceived honour of the family and/or community.

Honour-based violence can take many forms, it is used to control behaviour within families to protect perceived cultural and religious beliefs and/or honour. Examples may include murder, fear of or actual forced marriage, domestic violence, sexual abuse, false imprisonment, threats to kill, assault, harassment and forced abortion.

Women are predominantly (but not exclusively) the victims, and the violence is often committed with a degree of collusion from family members and/or the community.

Honour-based violence is a crime and should be reported to the police. If the person has needs for care and support, and is unable to protect themselves as a result, a Safeguarding concern should be raised.

Modern Slavery

Modern Slavery can take many forms including the trafficking of people, forced labour, servitude and slavery. Any consent victims have given to their treatment will be irrelevant where they have been coerced, deceived or provided with payment or benefit to achieve that consent.

The term 'modern slavery' captures a whole range of types of exploitation, many of which occur together. These include but are not limited to:

Sexual Exploitation: This includes but is not limited to sexual exploitation and abuse, forced prostitution and the abuse of children for the production of child abuse images/videos. Whilst women and children make up the majority of victims, men can also be affected. Adults are coerced often under the threat of force, or other penalty

- **Domestic Servitude:** This involves a victim being forced to work, usually in private households, performing domestic chores and childcare duties. Their freedom may be restricted, and they may work long hours often for little pay or no pay, often sleeping where they work
- **Forced Labour:** Victims may be forced to work long hours for little or no pay in poor conditions under verbal or physical threats of violence to them or their families. It can happen in various industries, including construction, manufacturing, laying driveways, hospitality, food packaging, agriculture, maritime and beauty (nail bars)
- **Criminal Exploitation:** This is the exploitation of a person to commit a crime, such as pick pocketing, shoplifting, cannabis cultivation, drug trafficking and other similar activities. Other forms of exploitation may include organ removal, forced begging, forced benefit fraud, forced marriage and illegal adoption.

For information and advice about, refer to the Modern Slavery Helpline:

0800 0121 700 www.modernslavery.co.uk/who.html and for St Anne's strategic approach to Modern Slavery there is a statement on the website.

Modern Slavery should be reported to the police. If the person has needs for care and support, and is unable to protect themselves as a result, a Safeguarding concern should be raised.

Hate Crime

Hate crime is taken to mean any crime where the perpetrator's prejudice against any identifiable group of people is a factor in determining who is victimised. Hate crime is a form of discriminatory abuse.

Hate crimes happen because of hostility, prejudice or hatred of people due to:

- disability
- gender identity
- race, ethnicity or nationality
- religion or belief
- sexual orientation

It should be noted that this definition is based on the perception of the victim or anyone else and is not reliant on evidence. Apart from individually charged offences under the Crime and Disorder Act 1998, local crime reduction partnerships can prioritise action where there is persistent anti-social behaviour that amounts to hate crime where appropriate.

The police and other organisations work together to ensure a robust, coordinated and timely response to situations where adults at risk become a target for hate crime.

Hate crime should be reported to the local community safety initiative. If the person has needs for care and support, and is unable to protect themselves as a result, a Safeguarding concern should also be raised. In the event that a person is at immediate risk, contact the police.

Mate Crime

There is no statutory definition of mate crime in UK law. The term is generally understood to refer to the befriending of people, who are perceived by perpetrators to be vulnerable, for the purposes of taking advantage of, exploiting and/or abusing them. This can strongly be associated, but not exclusively associated, with people with a learning disability or mental health condition.

Mate crime involves additional and complex issues to understand which sometimes resonate with cases of domestic abuse. The perpetrator is likely to be perceived as a close friend, a carer or a family member and will use this relationship for exploitation.

A person experiencing mate crime can sometimes be unaware of any hidden motives. People with a learning disability or mental health conditions may have less control and ability to develop and maintain friendships and this can lead to an acceptance of unequal relationships. The relationship is likely to be of some duration and, if unchecked, may lead to a pattern of repeat and worsening abuse.

There are features of mate crime which can provide significant challenges to recognise and provide support for victims:

- **Social isolation:** targeted individuals often lack the support network that many people take for granted and the level of social isolation in which some people live, at the margins of society
- **Lack of support from agencies:** people who are targeted are often those who do not meet the criteria for a high level of services
- **Fear of reporting:** when victims do recognise that something is wrong, they may be too afraid to report it
- **Use of threats to control victims:** threats are a common feature of hate crimes across the board but seem to play a particularly strong role in cases of mate crime, where the perpetrators want to control the victim
- **Accusations of sexual misconduct:** accusations of a sexual nature are a very common feature of mate crime and are often used by perpetrators to justify an escalation in violence

Mate crime should be reported to the local community safety initiative. If the person has needs for care and support, and is unable to protect themselves as a result, a Safeguarding concern should also be raised. If a person is at immediate risk, contact the police.

Multi-Agency Public Protection Arrangements (MAPPA)

The purpose of MAPPA is to help reduce the re-offending behaviour of sexual and violent offenders in order to protect the public, including previous victims, from serious harm. It aims to do this by ensuring that all relevant agencies work together effectively to:

- identify all relevant offenders
- complete comprehensive risk assessments that take advantage of coordinated information sharing across the agencies
- devise, implement and review robust risk management plans; and
- focus the available resources to best protect the public from serious harm

The police, probation and prison service (MAPPA responsible authorities) are the responsible authorities required to ensure the effective management of offenders; however, NHS, social services, education and housing all have a duty to cooperate under the Criminal Justice Act (2003).

Where an offender is managed through the Multi-Agency Public Protection Arrangements, and they present a risk to an adult with care and support needs, consideration should be given to raising a Safeguarding concern with the Local Authority and involving the Local Authority in the multi-agency risk management plan.

The Health and Safety Executive (HSE)

The Health and Safety Executive (HSE) and Local Authorities are responsible, under Section 18 of the Health and Safety at Work Act 1974 for making adequate arrangements for the enforcement of health and safety legislation with a view to securing the health, safety and welfare of workers and protecting others, principally the public.

In relation to Safeguarding adults at risk from abuse, HSE is responsible for enforcing work- related health and safety legislation in hospitals, nursing homes and day care centres.

Local Authorities previously enforced the Health and Safety at Work Act in respect of certain non-domestic premises, including residential care homes. This has now passed to CQC (see later).

The supporting role of the HSE (and Local Authority Health and Safety Departments) should be considered in all investigations of abuse that occur within health and care service settings. Health and safety offences are usually prosecuted by HSE, the Local Authority or other enforcing authority in accordance with current enforcement policy.

The Crown Prosecution Service (CPS) may also prosecute health and safety offences, but usually does so only when prosecuting other serious criminal offences, such as manslaughter, arising out of the same circumstances.

Health and safety concerns should be reported to the relevant organisation. However, consideration should be given as to whether abuse or neglect is indicated, and whether a Safeguarding concern should also be raised.

CQC

Enforcing safety and its links to Safeguarding and keeping adults safe and the roles and responsibilities of CQC and HSE have changed recently. The [memorandum of understanding](#) between CQC, the Health and Safety Executive (HSE) and Local Authorities (LAs) agreed that from 1 April 2015, HSE and the LAs won't normally lead this work.

The [new regulations](#) allow CQC to take enforcement action when CQC identify issues that they were previously unable to take action against. The CQC fundamental standards are more focused, with the following regulations allowing CQC to prosecute directly when they are breached as they constitute a criminal offence. This enables CQC to move directly to prosecution without first serving a Warning Notice when those regulations are breached, and it is deemed appropriate to hold a provider such as St Anne's to account.

- Need for consent
- Safe care and treatment
- Safeguarding service users from abuse
- Meeting nutritional needs
- Duty of candour
- Display of ratings

Making Safeguarding Personal

Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and St Anne's working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances.

St Anne's staff and Managers should always promote the adult's wellbeing in their Safeguarding arrangements. People have complex lives and being safe is only one of the things they want for themselves. Staff should work with the adult to establish what being safe means to them and how that can be best achieved. Outside professionals and St Anne's staff should not be advocating "safety" measures that do not take account of individual well-being, as defined in Section 1 of the Care Act 2014.

St Anne's Safeguarding procedures focus on achieving an outcome which supports or offers the person the opportunity to develop or to maintain a private life. This includes the wishes of the adult at risk to establish, develop or continue a relationship and their right to make an informed choice. Practice should involve seeking the person's desired outcomes at the outset and throughout the Safeguarding arrangements and checking whether the desired outcomes have been achieved. St Anne's has developed a Safeguarding Desired Outcomes Statement to help with this as part of the revised procedures.

Intervention should be proportionate to the harm caused, or the possibility of future harm. As well as thinking about an individual's physical safety it is necessary to also consider the outcomes that they want to see and take into account their overall happiness and wellbeing. For example, someone with mental capacity may choose to overlook a relative taking money from them when they do the shopping for the sake of their relationship with that relative, because the relationship has the overall effect (outcomes) of improving the life of the adult, including their safety, happiness and mental well-being.

The assessment of risk should be based on the fact that some risk is an inevitable consequence of life. The objective is not necessarily to eliminate risk, but to reduce risk to enable a person to safely maintain their independence and well-being wherever possible.

Assessments of risk should be undertaken in partnership with the person at risk, who should be supported to weigh up risks against possible solutions. People need to be able to decide for themselves where the balance lies in their own life, between living with an identified risk and the impact of any Safeguarding plan on their independence and/or lifestyle.

It is important to talk sensitively to the adult at risk both in terms of the alleged abuse and what resolutions they want. Provide support and reassurance whilst being careful not to ask leading questions, the views of the adult at risk should be taken seriously and acted upon in an appropriate manner, seek what person would like to happen, always being aware of any capacity issues, make person aware of the steps that will be taken and remember that individuals have a right to privacy; to be treated with dignity and to be enabled to live an independent life.

Risk Assessment and Management of Risk when Supporting Clients

Risk assessments in relation to Safeguarding from abuse, neglect and exploitation of people using services should be integral in all assessment and planning processes, including assessments for self-directed support and the setting up of personal budget arrangements for clients. Please see St Anne's Client Positive Risk Assessment Procedure.

Assessment of risk is a dynamic and ongoing process. It should be kept under continual review so that adjustments can be made in response to changes in the level and nature of the risk. The primary aim of a Safeguarding adults risk assessment is to assess:

- current risks
- potential risks

A risk assessment will determine:

- what the actual risks are – the likelihood and seriousness of an incident occurring (or reoccurring)
- the views of the adult at risk in relation to the risk of harm
- the person's ability to protect themselves
- the factors that increase or reduce the risk of harm

Safeguarding Plan (the “Protection Plan”)

The Safeguarding Plan records the agreed arrangements to manage the assessed risk.

Sometimes this is called the “Protection Plan”. It should be drawn up in partnership with the adult at risk and with an understanding of the potential wider impact of the Safeguarding Plan on their independence, lifestyle and wellbeing. It should include consideration of the following issues:

- what support the adult at risk would like to receive
- what action can be provided to Safeguard the adult at risk
- what, if any, action must be taken to protect other parties
- what contingency arrangements can be put in place if required
- arrangements for review
- a summary record of the steps taken and action to keep the person safe

Where a person with mental capacity declines the Safeguarding Plan, all reasonable efforts should be undertaken to understand the person's reason for declining support, and to consider how the plan could be amended considering their concerns and wishes. If a person initially declines support, they should be provided with the opportunity to change their mind, at any time. The person may need to be consulted over a period of time as relationships develop. If a person lacks the mental capacity in relation to the Safeguarding Plan, a 'best interests' decision will be required in line with the Mental Capacity Act 2005.

Safeguarding Adults Procedure

The Safeguarding procedures explain the process for raising a Safeguarding concern and the process that is followed once that concern is received.

A flow chart has been provided at **Appendix 1**, Managing Safeguarding Concerns Flowchart A which helps describe the process.

Ensure the Safety of the Person at Risk

You should, where possible, ensure the safety of the person at risk. You may also need to inform the police (if a crime has taken place or is taking place) or seek medical attention for the individual.

It is important when a situation is reported to the police, that the individual who has needs for care and support (previously referred to as the adult at risk), potential witnesses or the person alleged to have caused harm are not questioned by anyone, so as not to undermine any police investigation required. For the same reason, it is important that forensic and other evidence is not contaminated.

At the same time, whilst not questioning the person it may still be necessary to spend time with them, to listen to them and to provide any emotional support they need.

Other Responsibilities

Evidence may be present even if you cannot actually see anything. Therefore:

- Try not to disturb the scene, clothing or victim if at all possible
- Secure the scene, for example, lock the door
- Preserve all containers, documents, locations, etc.

If in doubt, contact the police and ask for advice.

Although a Safeguarding Enquiry to the Local Authority will usually be made by the St Anne's Safeguarding Concerns Manager, this responsibility may be required of any member of staff (or volunteer), particularly where:

- Contacting the Safeguarding Concerns Manager would result in undue delay and thereby place someone at risk
- The Safeguarding Concerns Manager has been contacted and they have not taken action
- You have authority in your own right to decide whether to raise a Safeguarding Adult Concerns and professional or service practice allows for this.

Even if this is done quickly you must inform a St Anne's Manager as soon as possible and if out of hours please inform the Advice Line.
Gather information in order to inform your decisions

If you are made aware of Safeguarding concerns or allegations, you must take them seriously, however trivial they might initially seem.

You may need to gather information in order to decide whether you should make a Safeguarding adult's enquiry to the Local Authority, in order to determine the most appropriate action to keep the person safe. This may involve for example, checking relevant records, ascertaining concerns from colleagues, gathering background information, etc.

This is not the investigation stage. Gather only the information you need in order to make the decision about whether to raise a concern and to keep the person safe.

Take action to ensure the immediate safety of the individual who has needs for care and support (previously referred to as the adult at risk)

The Safeguarding Concerns Manager must consider whether there are any immediate actions they need to take in order to keep the person, or others, safe from harm.

This involves taking actions in relation to the individual who has needs for care and support (previously referred to as the adult at risk) and others, including:

- Making an immediate evaluation of the risk to the adult at risk
- Taking reasonable and practical steps to safeguard the adult at risk, as appropriate
- Considering if an immediate police presence is required to keep any person safe
- Liaising with the police where an immediate police presence is required or to discuss any risk management issues
- Arrange any necessary emergency medical treatment; note that offences of a sexual nature will require expert advice from the police
- Making sure that other clients (and staff/volunteers) are not at risk

It also involves taking actions in relation to the person alleged to have caused harm, including:

- Liaising with the police wherever possible regarding actions that may impact upon a subsequent criminal investigation, such as where the protective arrangements may forewarn the person alleged to have caused harm of an impending criminal investigation and potentially prejudice the collection of evidence
- Ensuring that any staff (or volunteers) who have caused harm are not in contact

Do not discuss the concern with the person alleged to have caused harm (PATCH), unless the immediate welfare of the adult at risk or vulnerable people makes this unavoidable.

If the person alleged to have caused harm is a member of staff and an immediate decision is required to suspend them, the person has a right to know in broad terms what allegations or concerns have been made about them. Care, however, should be undertaken not to jeopardise any resulting police or Safeguarding investigation and these parties may request that full details of the allegation are not immediately shared with the person alleged to have caused harm.

The person alleged to have caused harm should be provided with appropriate support throughout the process to participate and enable their views to be recognised.

If the allegation involves agency staff, the agency should also be notified of the Safeguarding concern having been made.

If the person alleged to have caused harm is another client, action taken may include removing them from contact with the adult at risk. In this situation, arrangements must be put in place to ensure that the needs of the person alleged to have caused harm are also met.

If the person alleged to have caused harm is also an adult at risk, they should be provided with appropriate support in a person-centred, planned way.

If the person alleged to have caused harm is a young person or has a mental disorder, including a learning disability, and they are interviewed at the police station, they are entitled to the support of an appropriate adult under the provisions of the Police and Criminal Evidence Act 1984 Code of Practice (Refer to local Police and Criminal Evidence Act procedures and agreements). Please contact your Area Manager if you need advice and guidance around providing support to a client in this situation.

Complete a Safeguarding Adults and Children at Risk – Raising a Concern via the Incident reporting system

- A Safeguarding “Concern” may or may not lead to an “Enquiry” by the local Adult Safeguarding Team but must always be recorded internally
- An Incident Reporting System form must be completed every time a member of staff has a concern about a Safeguarding issue; Area Managers must be notified of this. The form can be accessed via St Anne’s Intranet page or on St Anne’s mobile phones
- If the incident becomes an Initial or Formal Enquiry by the local Adult Safeguarding Team. The local team may require completion of an additional form, the relevant section on Incident Reporting System should be updated
- It is important that St Anne’s monitors all concerns; all Incident Reporting forms will be audited
- It is important that learning takes place
- The First Line Manager will need to check after 3 months and close the case with Safeguarding if not done already and update any records as necessary in the client’s support plan and on the Incident Reporting System around practice changes as a result. It is important that any learning is recorded on the Incident Reporting System

Deciding Whether to Report an Incident to the Police

If a crime has been, or may have been, committed, seek the person’s consent to report the matter immediately to the police.

If the person has mental capacity in relation to the decision and does not want a report made, this should be respected unless the person is unduly influenced or intimidated, to the extent that they are unable to give consent, or there is an overriding public or vital interest issue, such as a duty of care to others at risk.

The client with support from staff will be expected to complete a “Client Desired Outcomes Statement – Safeguarding”. They should have access to a leaflet about Safeguarding that they can understand. A reminder about this is on the form.

If the person does not have mental capacity in relation to this decision, act in the person’s best interests.

The police may also be contacted later, if more information becomes available and it becomes apparent that a crime has been committed. If the matter is to be reported to the police, discuss risk management and any potential forensic considerations.

Complete a Client Desired Outcomes Statement – Safeguarding

A fundamental change in Safeguarding procedures nationally with the introduction of the Care Act 2014 requires that clients are fully involved and empowered in Safeguarding decisions. See section Making Safeguarding Personal (P22) of St Anne’s policy.

When the Safeguarding Concerns Manager becomes aware of a concern, they will ask that the client is supported to complete a Client Desired Outcomes Statement". **(Appendix 2).**

There will be occasions when this is not practical or realistic and serious events dictate a quicker approach. The return of this form to the Safeguarding Concerns Manager and an acknowledgment of the client's decision must be taken into account in the process.

A copy of the concerns form and any linked Client Desired Outcomes Statement must be kept by Managers and uploaded onto The Incident Reporting System.

Deciding Whether to Make a Safeguarding Enquiry

In deciding whether to make an external enquiry consider the following questions:

- Is the person an "individual who has needs for care and support as defined by the Care Act?
- Does it appear likely that the individual who has needs for care and support is experiencing harm from abuse or neglect?
- Has the person given consent for a Safeguarding Adults concern to be made?
- Has the person the mental capacity to consent?
- Are the circumstances such, that it is appropriate to raise a concern without the person's consent?

Where required, take advice from your Safeguarding Concerns Manager.

Appendix 3 - The Safeguarding Decision Tool – has been designed to help decision making around whether to make an enquiry or not.

A record must be made of the concern, the wishes of the individual who has needs for care and support and of the decision about whether or not to raise a concern, with reasons. This shall be included in the initial incident report or subsequently in 'Progress Notes' on the Incident Reporting System.

A record should also be made of what information was provided to the individual who has needs for care and support about the decision.

As well as deciding whether to make a Safeguarding concern, the Safeguarding Concerns Manager must also decide whether to follow other relevant organisational reporting procedures.

Ensure Key People are Informed

Where relevant, the Safeguarding Concerns Manager should ensure that the relevant Managers and staff inform:

- CQC if the adult is living in a care home, receiving personal care or another registered resource or service
- The Commissioner's Department for the adult at risk (where relevant)
- Child Protection Services if children are also at risk from harm – refer to St Anne's Safeguarding Children and Young People Policy
- Relatives of the adult at risk, according to their wishes, or in their 'best interests' where they lack the mental capacity to make this decision for themselves
- Their Line Manager (and Safeguarding Adults Lead if different) of their decisions and actions in line with these procedures
- Their Human Resources Advisor if the allegations or concern relate to a member of staff

Provide Support for the Person Raising a Safeguarding Concern

Incidents of alleged or actual abuse can be very distressing. People who have witnessed abuse or had abuse disclosed to them may need support in their own right.

In an Emergency or Out of Hours

Wherever possible, staff should consult their Line Manager/Safeguarding Concerns Manager.

In exceptional circumstances those working outside office hours will need to be aware of the circumstances under which the police should be called in an emergency. See advice previously around involving police.

Out of office hours you must inform the Emergency Support Line of any action you have taken at the earliest opportunity or if you require any advice or support. Additionally, if the safeguarding concern would constitute a serious incident, then the Emergency Support Line should be contacted to ensure the Senior Manager on call is aware.

Regular Updates and Learning from Practice

Regular discussions must take place at team meetings at least twice a year to ensure all team members, and particularly any new team members, fully understand the policy and local procedures; and are kept aware of how to make reports if required and are confident to do so if required.

Any areas of concern arising from these briefings should be reported to the Area Manager without undue delay.

Teams should learn from anonymised cases to learn and improve practice in keeping people safe and supporting them to manage risk appropriately.

Safeguarding should also be a regular item in formal PDR/supervision.

Poster and Leaflet (A4) – Appendices 4 and 5

A poster summarising St Anne's Safeguarding Adults Policy and guide and have been produced to promote the principle of good reporting.

The guides summarise the actions to be taken should a member of staff be unaware of the procedures which should be followed for their service.

First Line Managers must:

- Ensure a poster is displayed prominently in the service
- Distribute leaflet as required

Stocks of both the poster and the leaflet should be requested from the Administration Team.

Should a member of staff have any doubt about what to do, they should refer to St Anne's Safeguarding Adults Policy in the first instance.

Regular Review

The St Anne's Quality Committee meets at least four times a year.

The St Anne's Quality Committee exists to prevent and minimise the risk of abuse to all its clients and families and to protect its clients and families effectively when abuse has occurred or may have occurred. The committee is committed to learning and sharing learning from experience.

The Committee monitors all individual cases of alleged abuse from referral and /or reporting of an incident through to strategy meetings and final outcome to ensure that all appropriate actions have been taken and to advise interventions if necessary. It also analyses the data from incidents using the Incident Reporting System to ensure that the appropriate actions are being taken to investigate concerns and refer as per the legislation and local Safeguarding procedures (depending on the Local Authority concerned).

The St Anne's Designated Safeguarding Lead will review the procedures annually, in the light of all incidents, to test their effectiveness and consider whether any changes are necessary.

All cases will be utilised as learning in order to further develop our processes and ensure staff understanding and preparedness.

Results of reviews and investigations, the learning from them and how this is utilised to improve practice and Safeguarding, will be reported to the Board as part of St Anne's overall governance.

Full records of reviews and reports to the Board will be kept.

Criminal Convictions and DBS – see St Anne's Recruitment and Selection of Staff Policy

Having a criminal conviction is not necessarily a barrier to employment with St Anne's. However, candidates who are successful at interview for a front-line service role will be subject to a criminal record check from the Disclosure and Barring Service (DBS).

A judgement will then be made about their suitability for the role, subject to the satisfactory completion of the recruitment process in accordance with St. Anne's guidance on employing people with convictions.

The interview chair must verify the ID documents necessary for the DBS system. Upon completion, the individual and St Anne's will receive the disclosure document and one of the following will apply:

- i. The disclosure may confirm information already provided and the Director confirm an appointment if the references are satisfactory
- ii. The disclosure may reveal new information and further discussions, or checks will be undertaken before a decision is taken to proceed with an appointment
- iii. Before a decision is taken not to proceed with an appointment on the basis of the disclosure, the chair will discuss the position with the applicant
- iv. A Director will confirm whether an appointment should or should not proceed and complete the organisational decision log

Area and First Line Managers will be responsible for following any guidelines issued by the CQC pending the receipt of a satisfactory DBS disclosure.

The applicant must provide Recruitment with a copy of the Disclosure, either by forwarding the original onto Recruitment or to the Manager, who will take a copy and forward the verified copy to Recruitment.

Further to the applicant's appointment, the employee will then have their DBS renewed every three years. All St Anne's staff will have their DBS renewed every three years.

Appendix Documents

Appendix 1 - Managing Safeguarding Concerns Flowchart

Appendix 2 - Client Desired Outcomes Statement

Appendix 3 - The Safeguarding Decision Tool

Appendix 4 - Safeguarding Poster

Appendix 5 – Safeguarding Mini Guide Leaflet

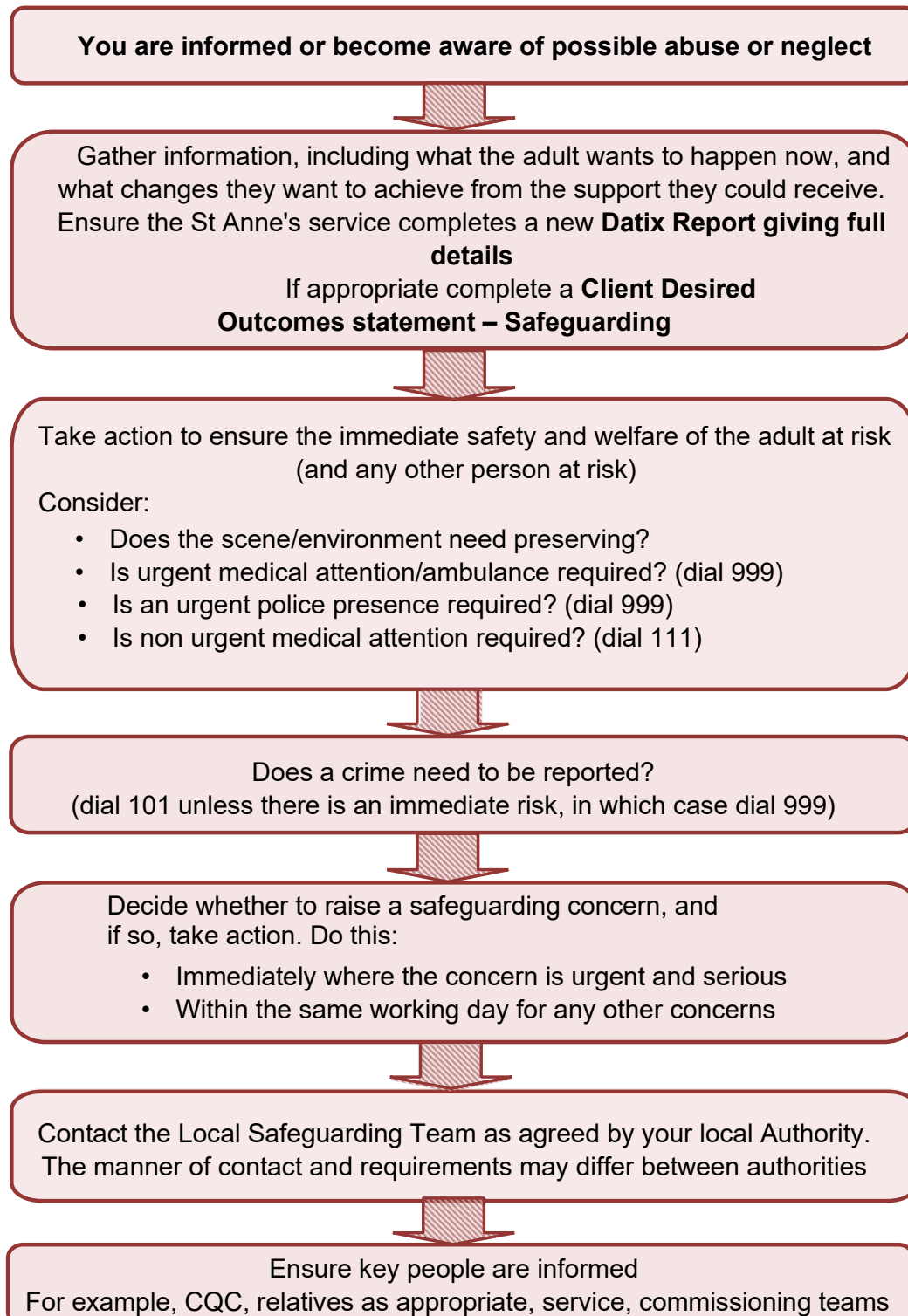
Appendix 6 - Glossary of Terms

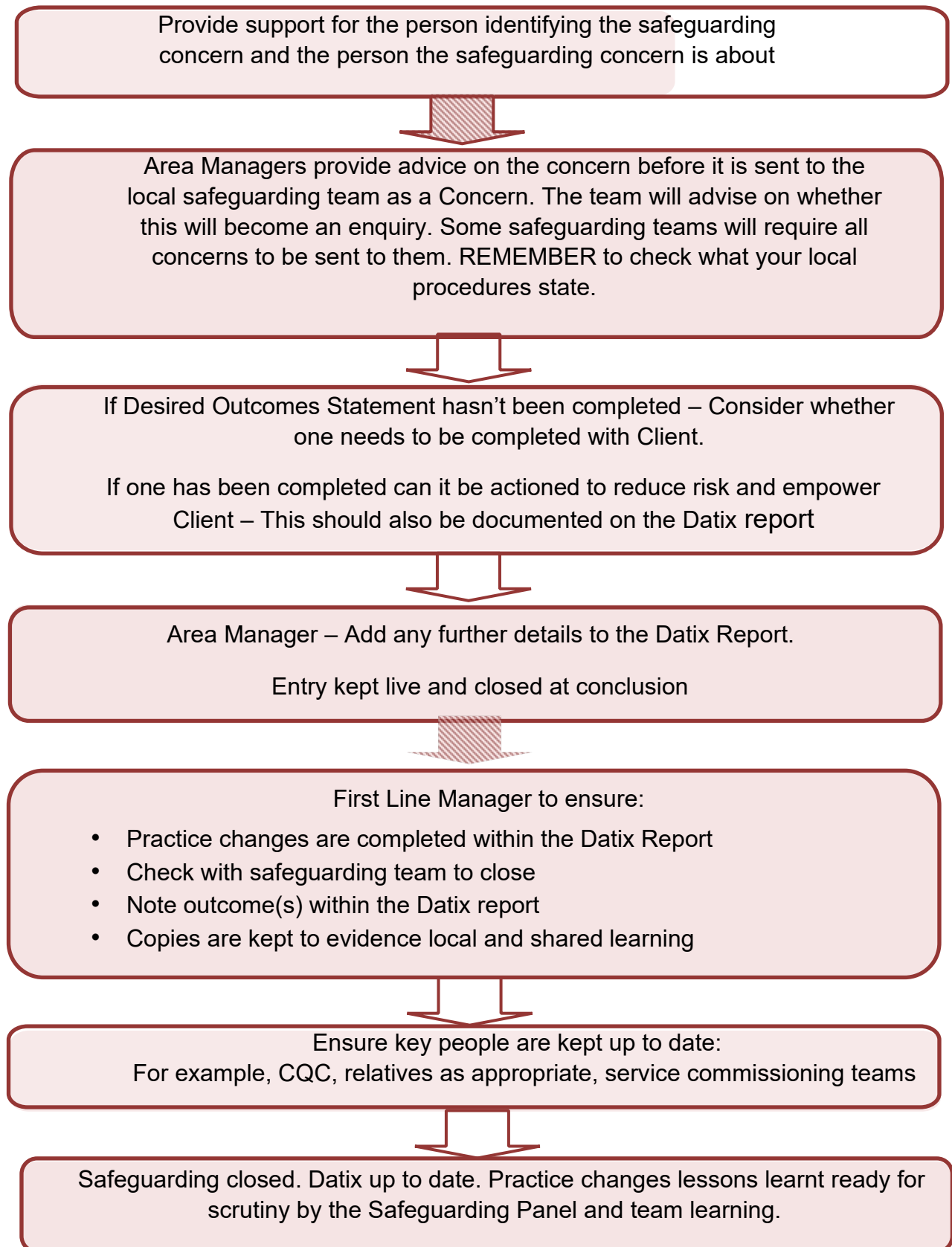
Appendix 7 - Local Safeguarding Adults Procedure Details

Appendix 8 - Local Safeguarding Team Contact Numbers

Appendix 1 Flowchart A: Managing safeguarding concerns flowchart

Where abuse is alleged or suspected you should follow the safeguarding concerns flowchart below.





Appendix 2**St Anne's Community Services****Client Desired Outcomes Statement**

Safeguarding concerns have been raised about a possible risk of abuse or neglect to you or to the person you represent (a client). When safeguarding adults concerns are raised St Anne's must make enquiries to find out if any action is required (Care Act 2014). As part of these enquiries St Anne's wishes to check:

- a) Whether you wish safeguarding enquiries to be made
(Your wishes will be respected, but in certain circumstances action may be necessary to keep others safe)
- b) Whether you would like actions to be taken to help you manage the risks you may face
- c) What things you would like to change as a result of the concerns being raised *(These are referred to as the desired outcomes you wish to achieve as a result of the safeguarding concerns being raised)*

Statement of Your Views and Wishes

Do you want further Safeguarding Concerns/Enquiries to be made in your case?

Yes ☐ No ☐

Do you want action to be taken to help you manage any risk you face?

Yes ☐ No ☐

Please use your own words to tell us what you would like to change as a result of safeguarding concerns being raised (your desired outcomes):

1. _____
2. _____
3. _____
4. _____

Your Name: _____

If someone has helped you, please give their name: _____

Date: _____

Keeping in Touch with You

Your personal contact is:

If you have any questions, comments or concerns, you can contact them by:

You will be given a copy of the document "Safeguarding – Easy Read" or "Safeguarding – Client and Staff Guide".

This person will keep you informed about what is happening. If the name of your personal contact changes we will let you know.

How would you like to be contacted? _____

Changing Your Desired Outcomes

Sometimes people change their mind about what outcomes they want. This is your right. If you do change your mind about the outcomes you want, at any point before the safeguarding work is complete, please let us know as soon as possible. You can use the space below to tell us, in your own words, what you would now like the outcomes to be as a result of safeguarding concerns being raised:

1. _____
2. _____
3. _____
4. _____

Your Name:

If someone has helped you, please give their name:

Date: _____

Achievement of your desired outcomes (Please tick):

Fully achieved	
Partially achieved	
Not achieved	

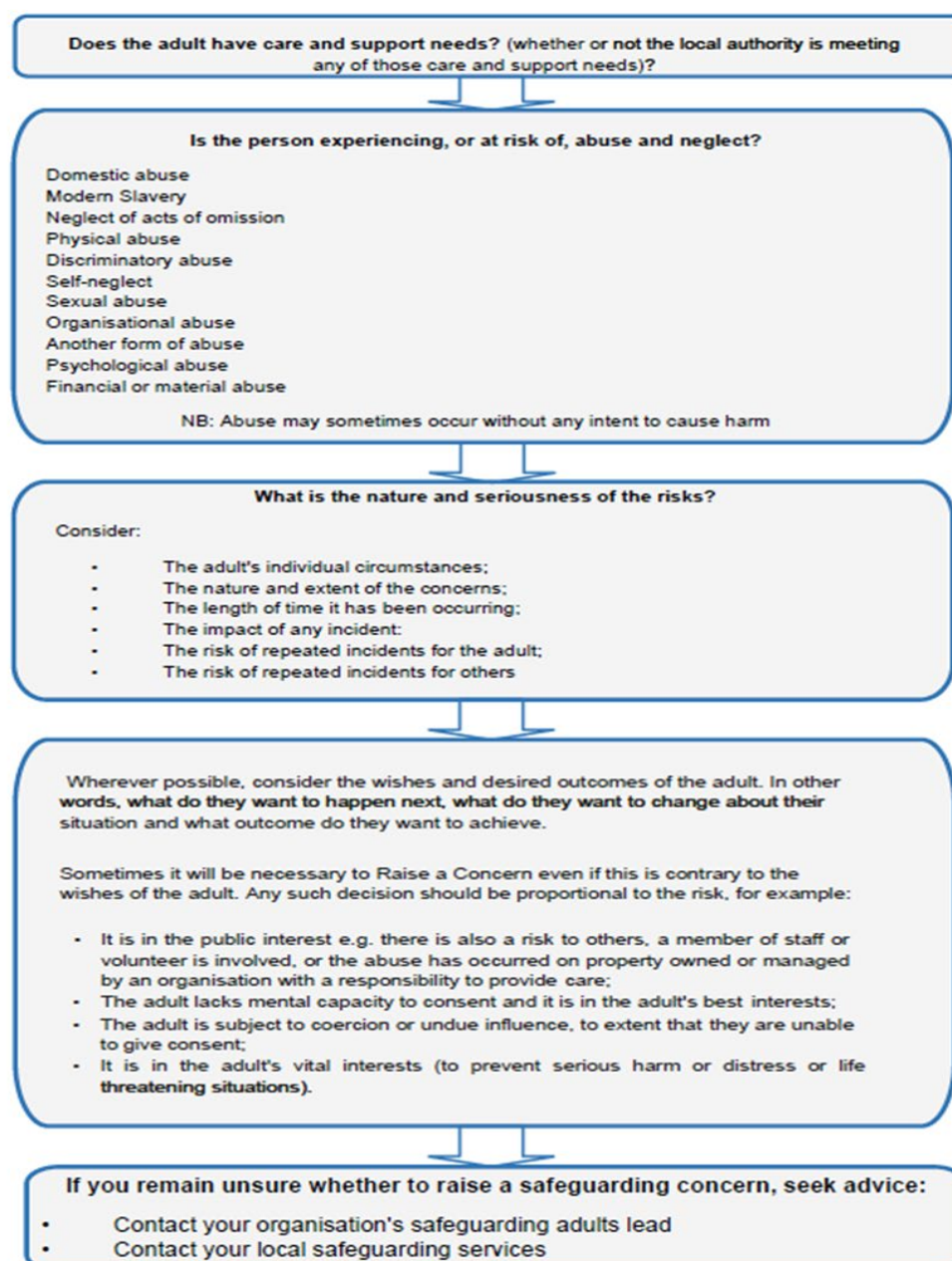
Date: _____

Appendix 3

Decision Support Tool for Raising a Safeguarding Concern

This practice guidance can be used to support decision making as to when it is appropriate to raise a safeguarding concern with the local authority.

Flowchart B: Key questions when deciding whether to report a safeguarding concern



Appendix 4 – Safeguarding poster

SAFEGUARDING ADULTS/ CHILDREN AT RISK: SAFEGUARDING GUIDE



It is essential that you know St Anne's Safeguarding Policies for Adults (and Children and Young People, where relevant), and any local policies and procedures which apply in your area (please see sections 1.23/ 1.24 in the Staff Manual for full details).

Remember:

- Abuse can happen to anyone who is unable to protect themselves from harm.
- Anyone is capable of abuse, including; relatives, partners, friends, care workers or strangers
- It can happen anywhere

Abuse can be:

- Physical – such as being hit, kicked, being locked in a room or inappropriate restraint
- Sexual – such as being made to take part in a sexual activity when the adult has not, or is not able to give their consent
- Psychological – , such as being shouted at, ridiculed or bullied, as well as being made to feel frightened.
- Financial or material abuse– such as stealing someone's money or belongings, or misusing them for someone else's benefit
- Neglect – involves the failure to provide care or support which results in someone being harmed.
- Discriminatory abuse, involves treatment or harassment based on age, gender, sexuality, disability, race or religious belief
- Modern Slavery includes human trafficking, forced labour, and domestic servitude
- Organisational—abuse or poor practice throughout an organisation
- Domestic violence and abuse - when abuse occurs between partners or by a family member
- Self-neglect - covers a wide range of behaviours, such as neglecting to care for one's personal hygiene, health or surrounding and includes behaviours such as hoarding.

SUSPECT ABUSE/ HAVE WITNESSED IT/ OR HAVE BEEN TOLD - ACTIONS

Take seriously what you hear—do not cross-examine or make assumptions.
Seek help from colleagues or Management Advice Line if risk still exists—make the client safe and do not disturb the scene.
Get medical help, if needed.
Report the incident to your manager, or other senior manager, immediately.
If the manager is the suspected person a more senior manager **MUST** be contacted.
If out of hours, ring Management Advice Line.
If no one is available dial 999 and speak to the police.
Apply any local multi-agency policies in force.

Ensure you get support and supervision.

Continue with good practice
Be aware of people's rights and choices.

Do not destroy the evidence if there is any
- e.g. by washing or changing victim's clothes.

Fill in the St Anne's safeguarding concerns form within 24 hours of what you have heard, seen or suspect.

DO NOT WAIT - IT IS YOUR DUTY TO REPORT IT!

St Anne's Contact Numbers

FLM :

Office:

Mobile:

Management advice line 07887 608913
Emergency Support line (5pm -9am):
0113 281 6979

Area Manager (Safeguarding Lead):

Mobile:

Local Contact Numbers (e.g Local adult
Protection team/ contracts/ commissioning:

Appendix 5 – Safeguarding Guide

Contact

If you need support with information, please contact us:

St Anne's Community Services
Unit 5,
12 Fountain Court,
Bruntcliffe Way,
Morley
LS27 0JG

 Tel: 0113 2435151

 Email: info@st-annes.org.uk

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Safeguarding Handy Guide





*A life without limits for
the people we support*

What do you do if you suspect abuse?

Suspect Abuse? Don't wait... Report it

Do you suspect or have you witnessed or been told about someone being abused?

NO

Continue with good practice

YES

- Take seriously what you hear—do not cross-examine or make assumptions
- Seek help from colleagues or Management Advice Line is risk still exists—make the client safe and do not disturb the scene
- Get medical help, if needed
- Report the incident to your manager, or other senior manager, immediately
- If the manager is the suspected person a more senior manager MUST be contacted
- If out of hours, ring Emergency Support Line
- If no one if available dial 999 and speak to the Police
- Apply any local multi-agency policies in force



St Anne's contact telephone numbers:

FLM: Office: _____
Mobile: _____

Emergency Support Line 0113 281 6979

Area Manager
(Safeguarding Lead): _____

Office: _____
Mobile: _____

Local contact telephone numbers:
e.g Local Adult Protection Team / Contracts /
Commissioning

- Do not destroy the evidence if there is any –e.g. by washing or changing victim's clothes.
- Fill in the St Anne's safeguarding concerns form within 24 hours of what you have heard, seen or suspect.

- Ensure you get support and supervision
- Continue with good practice
- Be aware of peoples rights and choices

www.st-annes.org.uk



Appendix 6

Glossary of Terms

Abuse is a violation of an individual's human and civil rights by any other person or persons. It can take many forms, including physical, sexual, emotional/psychological, financial, neglect, discriminatory, organisational abuse. It may also include domestic violence, modern slavery and self-neglect.

ADASS - Association of Directors of Adult Social Services is the national leadership association for directors of local authority adult social care services.

Adult At Risk means an adult at risk of abuse or neglect. This is usually an adult who has care and support needs, and who is unable to protect themselves from abuse or neglect because of their care and support needs. In a small number of cases, it may include an adult with support needs, such as an unpaid carer of someone with care and support needs.

Advocacy is taking action to help people say what they want, secure their rights, represent their interests and obtain services they need. The adult at risk may be represented by a friend or family member in relation to a safeguarding concern, or where appropriate the local authority may arrange for an independent advocate. An independent advocate may work or volunteer for a commissioned independent advocacy service.

Carer refers to unpaid carers, for example, relatives or friends of the adult at risk. Paid workers, including personal assistants, whose job title may be 'carer', are called 'staff' within this policy and procedure.

Case Conference Discussion may take place where a Case Conference Meeting is not required. It is held to discuss the findings of the Formal Enquiry and to put in place a Safeguarding Plan. This can take place in a number of ways, including a face to face meeting, by telephone or by email.

Case Conference Meeting is a multi-agency meeting that may be held to discuss the findings of a Formal Enquiry and to put in place a Safeguarding Plan.

Concern describes an awareness of risk. A safeguarding adults concern is an awareness of the risk of abuse or neglect faced by an adult who is unable to protect themselves from that abuse or neglect due to their care and support needs.

Clinical Governance is the framework through which the National Health Service (NHS) improves the quality of its services and ensures high standards of care.

CPA - Care Programme Approach requires health trusts, in collaboration with social care services, to put in place specified arrangements for the care and treatment of people with mental health problems in the community.

CPS - Crown Prosecution Service is the government department responsible for prosecuting criminal cases investigated by the police in England and Wales.

CQC - Care Quality Commission is responsible for the registration, regulation and inspection of health and social care services in England.

Designated Safeguarding Lead is a role filled within the Safeguarding adults procedure with responsibility for coordination and management oversight of allegations relating to an employee, volunteer or student. This is being phased out in some LA to avoid confusion. The St Anne's Designated Safeguarding Lead is the Quality and Safety Director.

Disclosure and Barring Service (DBS) is the public body set up to help prevent unsuitable people from working with adults with care and support needs or with children. The Disclosure and Barring Service keeps a list of people who are not allowed to work with adults with care and support needs.

DoLS - Deprivation of Liberty Safeguards are a legal safeguard for people who cannot make decisions about their care and treatment when they need to be cared for in a particularly restrictive way. They apply to people in care homes or hospitals when they are deprived of their liberty.

EDT - Emergency Duty Teams are social services teams that respond to out-of hours concerns, where intervention is required to protect a child or adult at risk, and where it would not be safe or appropriate to delay that intervention until the next working day.

Eligibility is the entitlement, based on level of care and support needs, to the provision of care and support services by a local authority. The decision to carry out a Safeguarding enquiry does not depend on the person's eligibility, but should be taken wherever there is reasonable cause to think that a person with care and support needs is experiencing, or is at risk of, abuse or neglect.

Enquiry is the process of gathering information to determine what action should be taken in the case of an adult who is at risk of abuse or neglect. This could involve a wide range of responses, from a simple discussion with the person to a more complex Formal Enquiry.

Enquiry Duty the duty on the local authority to make enquiries to establish if any action is required in the case of an adult at risk.

Formal Enquiry is the process of establishing the facts and gathering evidence in relation to a Safeguarding concern. A Safeguarding Coordinator will be appointed to oversee the Formal Enquiry, this will involve Strategy Discussions/Meetings to plan the enquiry, and a Case Conference Discussion or Meeting to review the findings and establish the need for a Safeguarding Plan.

Initial Enquiry is initial response of the local authority after a concern of abuse or neglect has been raised. It involves gathering information to determine what action, if any, should be taken. The subsequent action may involve a Formal Enquiry or Risk Management Response.

HSE - Health and Safety Executive is a national independent regulator that aims to reduce work-related death and serious injury across workplaces.

IDVAs - Independent Domestic Violence Advisers are trained support workers who provide assistance and advice to victims of domestic violence.

IMCAs - Independent Mental Capacity Advocates are a legal safeguard for people who lack the mental capacity to make specific important decisions, including making decisions about where they live, serious medical treatment, Safeguarding adults, care reviews and Deprivation of Liberty Safeguards (DoLS). IMCAs are mainly instructed to represent people where there is no one independent of services, such as a family member or friend, who is able to represent the person.

Informed Consent is the voluntary agreement of a person who has mental capacity to a course of action based on an adequate knowledge of the purpose, nature, likely effects and risks of that intervention, including the likelihood of its success and any alternatives to it.

Large Scale Enquiry is the term used to describe the response within the Safeguarding adult procedure where a number of adults are at risk from the same source of risk. This may be required, for example, where there are concerns about how a service provider is caring for a number of its service users.

MAPPA - Multi-Agency Public Protection Arrangements are statutory arrangements for managing sexual and violent offenders.

MARAC - Multi-Agency Risk Assessment Conference is the multi-agency forum that manages high-risk cases of domestic violence, stalking and 'honour'- based violence.

Mental Capacity is the ability to make a decision about a particular matter at the time the decision needs to be made.

NHS - National Health Service is the country's publicly funded healthcare system.

OPG - Office of the Public Guardian, supports the Public Guardian in registering enduring powers of attorney, lasting powers of attorney and supervising Court of Protection appointed deputies.

Organisation Alleged to Have Caused Harm is an organisation that is alleged to be responsible for abuse or neglect experienced by an adult at risk.

PALS - Patient Advice and Liaison Service is an NHS service created to provide advice and support to NHS patients and their relatives and unpaid carers.

Person Alleged to Have Caused Harm (PATCH) is a person who is alleged to be responsible for abuse experienced by an adult at risk.

Person in a Position of Trust refers to an employee, volunteer or student who works with adults with children or adults with care and support needs.

Person Raising a Concern is the person who reports a concern to the multi-agency safeguarding adults contact point that an adult is being, has been, or is at risk of being abused or neglected. This could be the person themselves, a member of their family,

an unpaid carer, a member of staff or any other person. Within an organisation, this will usually be the Safeguarding Concerns Manager.

Public Interest is determined by balancing the rights of the individual to privacy with the rights of others to protection.

Raising a Concern describes the action of reporting concerns and allegations of abuse or neglect to the multi-agency safeguarding adults contact point. Sometimes described as Raising a Safeguarding Concern. Within an organisation, safeguarding concerns should be discussed with the Safeguarding Concerns Manager or Safeguarding Adults Lead in the first instance, unless to do so would cause an undue delay.

Risk Management Response is the term given to the range of Safeguarding actions that may be appropriate to respond to a Safeguarding adults concern. This approach is undertaken when a Formal Enquiry is not required, but there are actions needed to Safeguard the adult or others from abuse or neglect.

Safeguarding Adults is used to describe all work to help adults at risk stay safe from abuse. It replaces the term 'adult protection'.

Safeguarding Adults Lead is the title given to the member of staff in an organisation who is given the lead for Safeguarding adults. The role may be combined with that of Safeguarding Concerns Manager, depending on the size of the organisation.

Safeguarding Adults Concern is an awareness of the risk of abuse or neglect faced by an adult who is unable to protect themselves from that abuse or neglect due to their care and support needs. Within an organisation, concerns should be discussed with the Safeguarding Concerns Manager or Safeguarding Adults Lead. 'Raising a concern' describes the action of reporting concerns and allegations into the multi-agency safeguarding adult contact point.

Safeguarding Concerns Manager is the person within an organisation to whom any member of staff (or volunteer) should report their concerns. The Safeguarding Concerns Manager will decide whether to report the concerns to the multi-agency safeguarding adults contact point. At St Anne's this is the Area Manager.

Safeguarding Coordinators are professionals within adult social care, who have overall responsibility for managing the Safeguarding arrangements. The Safeguarding Coordinator will work to ensure the wishes and desired outcomes of the adult at risk are sought and considered throughout the Safeguarding procedure. This includes the decision as to how concerns should be managed for example: whether the multi-agency safeguarding adult's procedure should be followed, managing the Safeguarding adults Strategy Discussion/ Meeting, overseeing the Safeguarding Plan, the Formal Enquiry and convening the Case Conference Discussion/Meeting.

Safeguarding Enquiry Officer is a member of staff from Adult Social Care or a Service Provider who makes Formal Enquiries into the Safeguarding concern. This may include collating information from others who have undertaken enquiry activities,

however it will be the role of the Safeguarding Enquiry Officer to produce a written Formal Enquiry Report for the Safeguarding Coordinator and the subsequent Case Conference Discussion or Meeting.

Safeguarding Plan is a record of the arrangements to Safeguard the adult at risk within a Formal Enquiry. The plan should be agreed with the adult at risk, taking into consideration their wishes and desired outcomes.

SAB - Safeguarding Adults Board is the statutory board within a local authority area that provides strategic leadership for safeguard adults. Its objective is to help and protect adults at risk of abuse and neglect in its area, by co-ordinating and ensuring the effectiveness of what each of its members does. The local authority, police and NHS Clinical Commissioning groups are all required to be members of the SAB.

Safeguarding Adults Review is a review into the death or serious harm of an adult at risk. It is undertaken by a Safeguarding Adults Board (SAB) when it is suspected that abuse or neglect has played a part in the death or harm to the person and there is reasonable cause for concern about how the SAB, its members or others worked together to safeguard the adult.

SI - Serious Incident is a term used by NHS England. It is defined as an incident that occurred in relation to NHS-funded services resulting in serious harm or unexpected or avoidable death of one or more patients, staff, visitors or members of the public.

Strategy Discussion is a discussion between relevant organisations and parties in order to agree how to proceed with a Formal Enquiry. This will include assessing risk, agreeing interim Safeguarding arrangements and planning enquiries. This can be held in a number of ways, including a face to face meeting, by telephone or by email.

Strategy Meeting is a multi-agency meeting with the relevant individuals, including the adult at risk where they wish to be involved, to agree how to proceed with the Formal Enquiry. This will include assessing risk, agreeing interim Safeguarding arrangements and planning enquiries, and coordinating enquiries with disciplinary proceedings, criminal proceedings or other investigations.

Appendix 7

Local Safeguarding Adults Procedure Details

It is St Anne's policy that **abuse reports will always be made by following the procedures of the Local Authority where the service in question is located.**

Please obtain a copy of the Safeguarding Adult procedure which is currently being applied in your Local Authority area.

Add a copy of this procedure under this Appendix top sheet.

Ensure any changes to the procedure are noted and new procedures added (having removed and destroyed the old procedure) as required.

Service Name		
Service Address		
Local Authority Name		
Local Authority Contact Numbers - e.g. Local Adult Safeguarding Team / Contracts / CQC etc.		
Agency	Contact Number	
All St Anne's Services Where a crime needs to be reported or the assistance of the police sought, the following national telephone numbers should be used: For Non-Emergencies: <ul style="list-style-type: none"> • Telephone: 101 In an Emergency: <ul style="list-style-type: none"> • Telephone 999 or 112 from a mobile phone 		

Appendix 8

Contact Numbers for Local Safeguarding Team

Below is a list of contact details for all of the local Safeguarding Teams in the areas St Anne's works.

Sheffield – Telephone: 0114 273 4908

Newcastle – Telephone: 0191 278 8377 **Out of Hours Telephone:** 0191 278 7878

North Tyneside – Telephone: 0191 6432777 **Out of Hours Telephone:** 0191 2006800

South Tyneside – Telephone: 0191 4246000 **Out of Hours Telephone:** 0191 4562093

Middlesbrough – Telephone: 01642 065070 **Out of Hours telephone:** 01642 524 552

Sunderland – Telephone: 0191 5205552

East Riding- Telephone: 01482 396940

Durham – Telephone: 03000 267 979

BRADFORD

To Raise a Safeguarding Concern Contact:

- Safeguarding Adults Team: **01274 431077** or complete the online form available from: www.bradford.gov.uk/makeanalert

For Information/Advice Contact:

- Safeguarding Adults Team, Britannia House, Hall Ings, BD1 1HX
- Telephone: 01274 431077 (Office Hours)
- Out of Hours Emergency Duty Team Telephone: 01274 431010 (Outside Office Hours)
- Email: safeguardingadults@bradford.gov.uk
- For additional Information please visit: www.bradford.gov.uk/safeguardingadults

CALDERDALE

To Raise a Safeguarding Concern Contact:

- Gateway to Care: **01422 393 000** or Gatewaytocare@calderdale.gov.uk
- Emergency Duty Team: **01422 288 000** or email: EDT@calderdale.gov.uk

For Information/Advice Contact:

- Safeguarding Adults Team: **01422 393 804** (Mon-Fri, Office Hours)
- For additional information please visit www.calderdale.gov.uk/socialcare/safeguardingadults

KIRKLEES

To Raise a Safeguarding Concern or Seek Advice Contact:

- Gateway to Care: **01484 414933** (24 hours)
- Emergency Duty Team (Out of Hours) **01484 414933**
- Email: gatewaytocare@kirklees.gov.uk
- For additional information please visit: www.kirklees.gov.uk/safeguardingadults

LEEDS

To Raise a Safeguarding Concern or Seek Advice Contact:

- Adult Social Care Contact Centre: **0113 222 4401**
- Emergency Duty Team: **07712 106 378** (outside of the contact center times)
- For additional information please visit: www.leedssafeguardingadults.org.uk

NORTH YORKSHIRE

To Raise a Safeguarding Concern Contact:

- Adult Social Care, Customer Services 0300 131 2131
Opening Hours are 8am – 5.30pm Monday to Friday. This number will be answered by the Emergency Duty Team outside these hours.
- Email Raising a Safeguarding Concern forms to: social.care@northyorks.gov.uk or social.care@northyorks.gcsx.gov.uk

For Information/Advice Contact:

- For general questions and enquiries about safeguarding adults, please email: nysab@northyorks.gov.uk or via secure email: nysab@northyorks.gcsx.gov.uk
Please note this email address is NOT for Raising a Safeguarding Concern.

- For additional information please visit North Yorkshire County Council website: www.northyorks.gov.uk/safeguardingadults or North Yorkshire
- Partnerships website: www.nypartnerships.org.uk/sab

To access and download an Interagency Safeguarding Adults Concerns Form:
www.northyorks.gov.uk/safeguarding-vulnerable-adults

WAKEFIELD

To Raise a Safeguarding Concern Contact:

- Social Care Direct: Telephone: **0345 8 503 503**
- Fax: **01924 303455**; Minicam: **01924 303450**;
- Email: social_care_direct@wakefield.gov.uk
- For additional information please visit: <http://www.wakefield.gov.uk/health-care-and-advice/adults-and-older-people-services/safeguarding>

YORK

To Raise a Safeguarding Concern Contact:

- Customer access and assessment team: Telephone: **01904 555 111** (8.30- 5.00pm). For individuals who are hearing impaired please Text: **0753 443 7804**
- Fax: **01904 554 017**;
- Email: adult.socialsupport@york.gov.uk Out of hours, contact the Emergency Duty Team

For Information/Advice Contact:

- Safeguarding Adults Team: Telephone: **01904 555 858** (and ask for the duty worker)
- Fax: adultsafeguardingfax@york.gov.uk
- Email: adult.socialsupport@york.gov.uk