

# ADULT SERVICES

## SAFEGUARDING POLICY

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## Policy Control/Monitoring

<b>Version:</b>	2.0
<b>Approved by: (Name/Position in Organisation)</b>	<b>Carole Harder Chief Executive Officer (CEO)</b>
<b>Date:</b>	<b>29 June 2018</b>
<b>Accountability: (Name/Position in Organisation)</b>	Marie Watts Director of Adult & Residential Services
<b>Author of policy: (Name/Position in organisation)</b>	Marie Watts
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<b>Amendments/additions</b>	
<b>Replaces/supersedes:</b>	

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**Associated Policies/Documents:**  
(insert hyperlinks)

**Associated National Guidance:**

## Terms of Reference

Mental Health Act, 1983 (as amended 2007);  
[http://www.legislation.gov.uk/ukpga/2007/12/pdfs/ukpga\\_20070012\\_en.pdf](http://www.legislation.gov.uk/ukpga/2007/12/pdfs/ukpga_20070012_en.pdf)

Safeguarding Vulnerable Groups Act, 2006;  
[https://www.legislation.gov.uk/ukpga/2006/47/pdfs/ukpga\\_20060047\\_en.pdf](https://www.legislation.gov.uk/ukpga/2006/47/pdfs/ukpga_20060047_en.pdf)

Domestic Violence Crime and Victims Act, 2004;  
[http://www.legislation.gov.uk/ukpga/2004/28/pdfs/ukpga\\_20040028\\_en.pdf](http://www.legislation.gov.uk/ukpga/2004/28/pdfs/ukpga_20040028_en.pdf)

Sexual Offences Act, 2003;  
[https://www.legislation.gov.uk/ukpga/2003/42/pdfs/ukpga\\_20030042\\_en.pdf](https://www.legislation.gov.uk/ukpga/2003/42/pdfs/ukpga_20030042_en.pdf)

Public Interest Disclosure Act, 1998;  
[https://www.legislation.gov.uk/ukpga/1998/23/pdfs/ukpga\\_19980023\\_en.pdf](https://www.legislation.gov.uk/ukpga/1998/23/pdfs/ukpga_19980023_en.pdf)

Mental Capacity Act, 2005 (including the Deprivation of Liberty Safeguards, and MCA Codes of Practice which supplement the Act);  
<http://www.legislation.gov.uk/ukpga/2005/9/data.pdf>

Protection from Harassment Act 1997  
[https://www.legislation.gov.uk/ukpga/1997/40/pdfs/ukpga\\_19970040\\_en.pdf](https://www.legislation.gov.uk/ukpga/1997/40/pdfs/ukpga_19970040_en.pdf)

Family Law Act 1996 Part IV  
[https://www.legislation.gov.uk/ukpga/1996/27/pdfs/ukpga\\_19960027\\_en.pdf](https://www.legislation.gov.uk/ukpga/1996/27/pdfs/ukpga_19960027_en.pdf)

Forced Marriage (Civil Protection) Act 2007  
[https://www.legislation.gov.uk/ukpga/2007/20/pdfs/ukpga\\_20070020\\_en.pdf](https://www.legislation.gov.uk/ukpga/2007/20/pdfs/ukpga_20070020_en.pdf)

Health and Social Care Act 2008  
[https://www.legislation.gov.uk/ukpga/2008/14/pdfs/ukpga\\_20080014\\_en.pdf](https://www.legislation.gov.uk/ukpga/2008/14/pdfs/ukpga_20080014_en.pdf)

National Health Service Act 2006  
[https://www.legislation.gov.uk/ukpga/2006/41/pdfs/ukpga\\_20060041\\_en.pdf](https://www.legislation.gov.uk/ukpga/2006/41/pdfs/ukpga_20060041_en.pdf)

The Care Standards Act 2000  
[https://www.legislation.gov.uk/ukpga/2000/14/pdfs/ukpga\\_20000014\\_en.pdf](https://www.legislation.gov.uk/ukpga/2000/14/pdfs/ukpga_20000014_en.pdf)

Equality Act 2010  
[https://www.legislation.gov.uk/ukpga/2010/15/pdfs/ukpga\\_20100015\\_en.pdf](https://www.legislation.gov.uk/ukpga/2010/15/pdfs/ukpga_20100015_en.pdf)

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### Document status

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The document can only be classed as 'Live' on the date of print.

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## Equality Impact Assessment

This document forms part of Percy Hedley's commitment to create a positive culture of respect for all staff and service users. The intention is to identify, remove or minimise discriminatory practice in relation to the protected characteristics (race, disability, gender, sexual orientation, age, religious or other belief, marriage and civil partnership, gender reassignment and pregnancy and maternity), as well as to promote positive practice and value the diversity of all individuals and communities. As part of its development this document and its impact on equality has been analysed and no detriment identified.

## Version Control Tracker

Version Number	Date	Author/ Title	Status	Comment/Reason for Issue/Approving Body

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## Roles & Responsibilities

The following roles will have specific areas of responsibility for this policy:-

Role	Responsibility
<b>Chief Executive</b>	The Chief Executive is responsible for satisfying themselves that the Director of Adult Services is fulfilling their managerial responsibilities for safeguarding and promoting the welfare of Adults, including in particular by ensuring that the LSCB is working effectively
<b>Director of Adult Services &amp; Residential</b>	The Director of Adult Social Services has specific responsibilities under statutory guidance. To maintain a clear organisational and operational focus on safeguarding adults, ensure relevant statutory requirements, DBS standards and other national standards are met.
<b>Head of Service/Responsible Person</b>	To ensure North Tyneside Council and other Local Authorities procedures are followed, and to make relevant referrals to the named agencies according to the guidance given. To ensure all staff employed within Adult Services are aware of the services internal policy and procedures, to advise staff and to offer support. To attend appropriate training for Safeguarding Adults.
<b>Health and Safety Manager</b>	The Health and Safety Manager is responsible for assessing compliance with health and safety regulations and guidance and will complete a health and safety audit on each site at least annually. The Health and Safety Manager is also responsible for ensuring all accidents and incidents and near misses are reported and investigated with corrective action recommended and notification to any external bodies completed.
<b>Trustees</b>	Trustees are responsible for ensuring that those benefiting from, or working with, the Foundation are not harmed in any way through contact with it. They have a legal duty to act prudently and this means that they must take all reasonable steps within their powers to ensure that this does not happen.

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<b>Staff</b>	Operational staff/volunteers are responsible for identifying and responding to allegations of abuse. They need to understand what constitutes abuse or neglect and what an initial response to a suspicion or allegation should be.
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# 1. Introduction

This Policy is developed in accordance with:

## **The Care Act 2014**

The Care Act 2014 sets out a clear legal framework for how local authorities and other parts of the health and care system should protect adults at risk of abuse and neglect. The final statutory guidance refers to sections 42-46 of the Care Act 2014, and can be found on pages 229-279 at:

<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance>

<https://www.gov.uk/government/publications/care-act-statutory-guidance>

**We have also referred to:**

## **Safeguarding Adults: A National Framework of Standards for good practice and outcomes in adult protection work**

<https://www.adass.org.uk/adassmedia/stories/publications/guidance/safeguarding.pdf>

Under The Care Act 2014, Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, whilst 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.

It is the responsibility of all employees to treat the abuse or potential abuse of 'Adults at Risk' seriously. This policy therefore gives clear guidance for employees in the event that they have a concern about an Adult Protection issue.

This document will use the term 'adult at risk' in compliance with The Care Act 2014.

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## 1.1 Definition of an Adult at Risk

An adult at risk is defined by The Care Act 2014 as:

A person who

- a. Has needs for care and support (whether or not the local authority is meeting any of those needs) and;
- b. Is experiencing, or at risk of, abuse or neglect; and;
- c. As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect

The Care Act 2014:

- Replaces 'No Secrets (2000) definition of 'Vulnerable Adult'
- Applies to looked after children aged 18-25
- Applies regardless of whether needs are being met

## 1.2 Safeguarding Adults Board

Each local authority has a Safeguarding Adults Board (SAB). The main objective of a SAB is to assure itself that local safeguarding arrangement and partners act to help and protect adults at risk. The SAB has three core duties:

- publish a strategic plan for each financial year
- publish an annual report
- conduct safeguarding adult reviews

The Director of Adult and Residential Services is an active member of the SAB sub groups.

In dealing with incidents of potential abuse, adults at risk have the following rights which should be respected: (as defined in North Tyneside Safeguarding Adults Policy, Procedure and Guidance -

<https://my.northtyneside.gov.uk/sites/default/files/web-page-related-files/North%20of%20Tyne%20Safeguarding%20Adult%20Review%20Policy%20and%20Procedure.pdf>)

- The right to live without fear, and free from abuse from their families, caregivers, professionals, volunteers or fellow service users.
- The right to be safe and receive adequate care and protection, which includes protection from all forms of violence - physical punishment, intimidation, belittling, lack of respect, harassment, and sexual assault.
- The right to be given appropriate information about keeping themselves safe and exercising their rights.
- The right to be involved in making decisions that affect them, and to be supported in making their own decisions about how they wish to proceed in the event of abuse, and in whom they wish to confide. Their wishes should only be overridden if considered necessary in the interests of their own safety or the safety of others.
- The right to report violence and have their report taken seriously, including the right to have the Police called, if a crime has been committed.

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- People with a disability have a right to be enabled to take an active, full part in everyday life and become as independent as possible. They are entitled to take part in activities that include an element of risk.
- The right to make informed choices about intimate relationships without being exposed to exploitation or sexual abuse.
- The right to the money and property that is legally theirs, and for these to be treated with respect.
- The right not to be discriminated against because of their ethnic origin, culture or religion, their gender or sexuality, their age or disability.
- The right to bring a formal complaint under the relevant complaints procedure if they are not satisfied with the outcome of the initial investigation.
- The right to the assessment of their needs should they be a victim of abuse.

### 1.3 Types of abuse as outlined in the Care Act

- **Physical abuse** – including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.
- **Domestic violence** – including psychological, physical, sexual, financial, emotional abuse; so called ‘honour’ based violence.
- **Sexual abuse** – including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.
- **Psychological abuse** – including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.
- **Financial or material abuse** – including theft, fraud, internet scamming, coercion in relation to an adult’s financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.
- **Modern slavery** – encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.
- **Discriminatory abuse** – including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion.
- **Organisational abuse** – including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one’s own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

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- **Neglect and acts of omission** – including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating
- **Self-neglect** – this covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding

#### 1.4 Sexual Exploitation

The term Sexual Exploitation is now commonly recognised nationally as one of the most important challenges facing all local authorities and their partner agencies. Sexual exploitation has a devastating impact on children and young people, but can also affect vulnerable adults and their families and communities. It has a serious, long term and lasting impact on every aspect of a person's life including their health, physical and emotional wellbeing, educational attainment, personal safety, relationships and future life opportunities. Sexual Exploitation is therefore a key priority for the SABs and their partner agencies. All agencies, across all tiers of intervention, need to be aware of the risk factors around Sexual Exploitation and to follow the appropriate safeguarding referral routes to children's or adult social care.

#### 1.5 Counter Terrorism - Exploitation by Radicalisation of Adults at Risk

Government and the Home Office have placed great emphasis on working to counter terrorism, aiming to stop people becoming terrorists or supporting violent extremism. Local safeguarding structures have a role to play for those eligible for safeguarding. The aim is to draw people into their reasoning, recruit and embed extreme views. There are a number of factors that may make an individual susceptible to exploitation by extremist. No factors should be considered in isolation

- Identity or personal crisis
- Particular personal circumstances
- Unemployment or underemployment and criminality

Should you be concerned about a Resident/ User you should report your concerns to your line manager.

While the Home Office leads on the anti-terrorism strategy there are two main branches relevant to safeguarding people at risk of harm CONTEST & PREVENT

#### 1.6 Contest strategy

The aim of this is to reduce the risk to the UK and its interests overseas from terrorism, so that people can go about their lives freely and with confidence. The counter-terrorism strategy will continue to be organised around four work streams, each comprising a number of key objectives:

**Pursue:** to stop terrorist attacks

**Prevent:** to stop people becoming terrorists or supporting terrorism

**Protect:** to strengthen our protection against a terrorist attack

**Prepare:** to mitigate the impact of a terrorist attack

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## Prevent

The Prevent strategy contains three objectives:

1. To respond to the ideological challenge of terrorism and the threat from those who promote it;
2. To prevent people from being drawn into terrorism and ensure they are given appropriate advice & support;
3. To work with sectors and institutions where there are risks of radicalisation that we need to address.

### 1.7 Hate Crime

Hate crime is defined as any incident that is perceived by the victim, or any other person, to be racist, homophobic, transphobic or due to a person's religion, belief, gender identity or disability. It should be noted that this definition is based on the perception of the victim or anyone else and is not reliant on evidence. In addition it includes incidents that do not constitute a criminal offence. Apart from individually charged offences, under the Crime and Disorder Act 1998 local crime reduction partnerships can prioritise action where there is persistent antisocial behaviour that amounts to hate crime. The police and other organisations should work together to intervene under Safeguarding Adults policy and procedures to ensure a robust, coordinated and timely response to situations where adults at risk become a target for hate crime.

"Mate Crime" is a form of disability hate crime which happens when someone 'makes friends' with a person and goes on to abuse or exploit that relationship. The founding intention of the relationship, from the point of view of the perpetrator, is likely to be criminal. The relationship is likely to be of some duration and, if unchecked, may lead to a repeat and worsening abuse. There have been a number of Safeguarding Adults Reviews/Serious Case Reviews involving this type of abuse.

Where the victim of hate or mate crime is an adult at risk, safeguarding adults procedures should be used. This is regardless of whether the threshold for crime has been met.

## 2. Principles

The Percy Hedley Foundation fully recognises the contribution it can make to protect and support Adults at risk. We adhere to the following Standards and in addition, The Care Act 2014 Principles, which underpin all our adult safeguarding work;

### STANDARD 1

**Percy Hedley Adult Users/Residents demonstrate and use safe working practices in all aspects of life and activities.**

*How do we show this?*

- We help Users/Residents to be aware of their duties and responsibilities in creating a safe environment.

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- The health and safety activities we do as part of any day to day task, session, social activity will reinforce safe working practices to our Users/Residents
- We help our Users/Residents to understand how to use safety measures when using the internet. The service has an E-learning policy.

## **STANDARD 2**

### **Percy Hedley Adult Users/Residents say they feel safe.**

#### *How we show this?*

- We record feedback on an annual satisfaction survey
- We write down Users/Residents comments.
- Feedback from parents and carers is recorded to say how well Users/Residents have settled in and how confident they are in the Services.
- We follow up on any User/Resident who says that they do not feel safe.
- All User/Resident complaints or incidents about safety are given the highest priority and we deal with them quickly and effectively.
- We help our Users/Residents to understand and recognise abuse, discrimination, bullying/harassment (to include cyber bullying) through workshops and learning sessions.

## **STANDARD 3**

### **Users/ Residents are safeguarded and protected and staff takes action to respond to their welfare needs.**

#### *How do we show this?*

- We make sure that all our members of staff, volunteers and governors are trained in safeguarding; we make sure that all staff update their training bi-annually.
- We discuss Health and Safety/Safeguarding at staff, Management and Board Meetings. Managers audit safeguarding concerns monthly and record all safeguarding incidents on the Percy Hedley Foundation electronic Safeguarding log. All serious incidents are reported to the relevant Local Authority, Board and Charity Commission
- All staff know the procedure for how to make an alert.
- All staff know the procedure to follow if another member of staff is the one accused of abuse
- At Percy Hedley all staff appointed have the appropriate DBS check, in accordance with the Foundations DBS Policy.
- Our HR department have a comprehensive Safer Recruitment Process to ensure DBS checks take place for all new staff. It is the Foundation's Policy that our services renew DBS check for their staff on a 3 year cycle. We

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encourage all staff to sign up to the DBS update service for ease of monitoring.

- At Percy Hedley Adult Services we only have staff and volunteers who have a satisfactory enhanced DBS disclosure for the relevant workforce.
- At Percy Hedley all volunteers have been recruited through our volunteer programme and followed our volunteer induction process. This involves interviews, references and a DBS. Safeguarding induction is required for any volunteers working in the Services.
- At Percy Hedley we comply with Health and Safety legislation. All accidents and incidents and near misses are reported to the Senior Management Team, investigated, corrective action taken and recorded in the accident and incident log.
- The Director receives regular health and safety reports and we hold quarterly health and safety meetings. A representative from the User Group is on the panel. All Projects are represented.
- Every year our Health and Safety Manager carries out detailed health and safety reviews of the Projects. An action plan is produced and the Senior Management Team ensure that all actions are prioritised and completed.
- At Percy Hedley we expect all staff to demonstrate safe working practices at all times. Staff are role models for our Adults / Young People and therefore need to show this.

#### **STANDARD 4**

##### **At Percy Hedley Adult Services we prioritise safeguarding.**

*How do we show this?*

- At Percy Hedley our staff are fully aware of our safeguarding procedure and understand the criteria for making and responding to concerns, suspicions, allegations or disclosures.
- At Percy Hedley safeguarding is our highest priority and our procedures conform to the Care Act and North Tyneside Local Authority Safeguarding Policy and Procedure. This still applies if the User/Resident comes from another Authority (you will also have to refer to the Funding Authority)
- Each Service carries out an annual safeguarding self-assessment
- We annually review the Services site security, evacuation and contingency plans.
- At Percy Hedley we know that we have a duty to assist the Local Authorities on all Adult at Risk matters.

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## STANDARD 5

### Percy Hedley Adult Services works with other agencies and professionals to effectively safeguard Adults at Risk.

*How do we show this?*

- At Percy Hedley we have a senior management team who have responsibility for adult at risk protection issues.
- A named Responsible Person or member of the Senior Management team will support all action within the Service and liaise with other agencies, like the Police, Social Services and the Local Safeguarding Team

## STANDARD 6

### The services work closely with contractors

When working on our premises it is considered that contractors are joint occupiers for that period and therefore we have both joint liabilities in “common areas”. In order to meet our legal obligations with regard to contractors we will ensure that prior to engaging any contractor they are competent and that any works are carried out safely. Amongst other documentation, risk assessments and method statements are requested to ensure that any risk to residents or staff in the area of work are fully controlled.

A list of Foundation wide Approved Suppliers is currently being developed. Where the work requires the Contractor to have substantial contact with residents we will ensure that the Contractor holds a current DBS. A coloured lanyard system operates to signify the levels of access a contractor has so that all staff can monitor visitors to the premises.

## 2.1 CARE ACT 2014 PRINCIPALS

- **Empowerment** – People being supported and encouraged to make their own decisions and informed consent.  
*“I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens.”*
- **Prevention** – It is better to take action before harm occurs.  
*“I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help.”*
- **Proportionality** – The least intrusive response appropriate to the risk presented.  
*“I am sure that the professionals will work in my interest, as I see them and they will only get involved as much as needed.”*
- **Protection** – Support and representation for those in greatest need.  
*“I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want.”*

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- **Partnership** – Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.  
*“I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me.”*
- **Accountability** – Accountability and transparency in delivering safeguarding.  
*“I understand the role of everyone involved in my life and so do they.”*

### 3. The Policy

An effective Safeguarding Policy is one which provides clear direction to staff and others about expected codes of behaviour in dealing with safeguarding issues. The policy also makes explicit the Service’s commitment to the development of good practice and sound procedures. This ensures that safeguarding concerns and referrals are handled sensitively, professionally and in ways which support the needs of the Adults at risk.

The Policy relates to all adults who require safeguarding. Safeguarding means protecting an adult’s right to live in safety, free from abuse and neglect. It encompasses all activity which enables an adult to retain independence, well-being and choice, and is about preventing abuse and neglect, as well as promoting good practice for responding.

With the emphasis on supporting adults to access services of their own choice there is a duty to ensure protection for adults who do not have the mental capacity to protect themselves. The Percy Hedley Foundation recognises that adults have complex lives, and being safe is only one of the things that they may want for themselves. Professionals should work with the adult at risk to establish what being safe means to them and how this can be best achieved.

#### 3.1 Making Safeguarding Personal

‘Making safeguarding personal is a person led and outcome focussed approach. It engages a person in a conversation about how best to respond to their safeguarding situation in a way that enhances involvement’.

Making Safeguarding Personal is a sector led initiative in response to findings from Peer Challenges, No Secrets consultation and other engagement and is led by the Local Government Association. North Tyneside and Northumberland SAB’s are committed to implementing a Making Safeguarding Personal Approach. This includes:

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- Involving adults at risk and their families/carers in safeguarding in the outset of safeguarding activity
- Making sure adults at risk and their families/carers receive information which allows them to understand the process, so that they can make informed choices about the outcomes they would like to achieve
- Making sure adults at risk and their families/carers are supported to enable them to participate fully in discussions and meetings
- Ensuring that adults at risk are offered advocacy services as appropriate to their needs
- Working at all times in accordance the Mental Capacity Act 2005 and Mental Capacity Act *Code of Practice*.
- Seeking the consent of the adult at risk unless he or she lacks capacity about the safeguarding interventions; there is a wider public interest or a concern that a crime has been or maybe committed. In these circumstances there is an overriding duty of

### **This means that**

- The views and consent of the alleged victim should be sought by the alerter at the very start of the process. However, this does not replace duty to override consent where appropriate.
- Outcomes should be sought throughout safeguarding procedures.
- Statutory responsibility to appoint an advocate to represent someone who has a 'substantial difficulty' in being involved with the process.

### **3.2 Advocacy**

The Care Act 2014 places a duty on Local Authorities to arrange, where appropriate, for an independent advocate to represent and support an adult who is the subject of a safeguarding enquiry or Safeguarding Adult Review (SAR) where the adult has 'substantial difficulty' in being involved in the process and where there is no other suitable person to represent and support them.

Independent Mental Capacity Advocates (IMCA's) can be commissioned to assist in adult safeguarding issues Under Sec. 35 of the Mental Capacity Act 2005 (<http://www.legislation.gov.uk/ukpga/2005/9/data.pdf>)

In safeguarding adult cases ONLY, access to IMCA's is not restricted to people who have no one else to support or represent them. Therefore, people who lack capacity, who have family and friends can still have an IMCA to support them through the safeguarding process.

## **4. Scope**

It is the responsibility of all employees to treat the abuse or potential abuse of Adults at Risk seriously. This policy provides clear guidance for employees in the event that they have a concern about an Adult Protection issue.

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The Percy Hedley Foundation aim to proactively safeguard and promote the welfare of Adults as set out in the Care Act, “North Tyneside Safeguarding Adults Policy, Procedure & Guidance”, and “ADASS recommendations”.

Senior Managers and Staff are committed to Adults and young people’s wellbeing and safety.

- PHF are clear about people’s responsibilities to safeguard and promote Adults and young people’s welfare.
- PHF have effective recruitment and H.R. procedures including checking all new staff and volunteers to make sure they are safe to work with Adults and young people. Where there are concerns that an employee has caused harm or poses risk referrals to DBS will be made.
- PHF have procedures for dealing with allegations of abuse against members of staff and volunteers.
- PHF make sure staff receive training to help them do their job well. All of our staff have bi-annual training and regular updates on safeguarding and wellbeing, as well as being assessed as competent in their understanding of Safeguarding.
- PHF have robust procedures about how to safeguard and promote the welfare of Adults and young people.

*\* This policy will apply to employees working within Adult Services and employed by the Foundation under a contract of employment including suppliers, volunteers, contractors etc.,*

## 5. Information Sharing

To ensure clear information sharing all partners are committed to the simple process of sharing relative information and follow the “Golden Rules” taken from the HM Government Information Sharing guidance package (2008).

Seven golden rules for information sharing:-

1. **Remember that the Data Protection Act 2018 is not a barrier to sharing information** but provides a framework to ensure that personal information about living persons is shared appropriately.
2. **Be open and honest** with the person (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
3. **Seek advice** if you are in any doubt, without disclosing the identity of the person where possible.
4. **Necessary, proportionate, relevant, accurate, timely and secure:** Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those people who need to have it, is accurate and up to date, is shared in a timely fashion, and is shared securely.

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5. **Share with consent where appropriate** and, where possible, respect the wishes of those who do not consent to share confidential information. You should go ahead and share information without consent if, in your judgement, that lack of consent can be overridden in the public interest, or where a child is at risk of significant harm. You will need to base your judgement on the facts of the case.
6. **Consider safety and well-being:** Base your information sharing decisions on considerations of the safety and well-being of the person and others who may be affected by their actions.
7. **Keep a record** of your decision and the reasons for it - whether it is shared information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

## 5.1 Use of mobile phone and social networking sites

### Staff at the setting

- We believe our staff should be completely attentive during their hours of working, to ensure all Residents/Users receive good quality care and support. This is why mobile phones should only be used in exceptional circumstances and agreed by a Manager.
- We also feel that restrictions need to be placed on staff when they access social networking sites. The Services have a reputation to upkeep and comments made on sites such as 'Facebook' could have an impact on how parents/customers and potential customers using the provision view the service.
- Mobile phones can only be used when instructed to do so by a Manager. Staff should not be making or receiving personal calls, sending or receiving text and or accessing personal networking sites during work times unless agreed by a Manager. **STAFF SHOULD NOT BE USING THEIR OWN MOBILE PHONES TO TAKE PHOTOS OF ADULTS / YOUNG PEOPLE.**
- During outings, staff will use mobile phones belonging to the Service. Photographs should only be taken with consent from the Resident/User. For those where capacity is an issue a consent form should be completed by a Carer, appropriate Family member or representative.
- Staff must not post anything onto social networking sites such as 'Facebook' that could be construed to have any impact on the Services reputation.
- Staff must not post anything onto social networking sites that would offend any other member of staff, Resident/User or parent using the Service.
- If any of the above points are not followed then the member of staff involved will face disciplinary action, which could result in dismissal.

## 5.2 Parents visiting the setting

Parents visiting the Services are permitted to use mobile phones within the setting, however any calls need to be take outside of the Service or in a confidential meeting room. Parents are only permitted to use phones to take photographs with consent from a manager and must only photograph their Son/Daughter.

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### 5.3 Visitors to the setting

Visitors to the setting will be asked to keep their phones on them in person at all times. If visitors are required to take a call they can use an office for privacy or take the call outside of the service. Visitors are also not permitted to use phones to take photographs.

#### Further Protection Measures include:

- Any money or financial information held on behalf of service users is kept safely and all monetary transactions properly recorded. A service user can request to see their personal finance sheet at any time. The Foundations Financial policy reflects the practices and principles outlined in North Tyneside “Managing other People Moneys” policy.

## 6. Duty of Candour

Registered persons must act in an open and transparent way with relevant persons in relation to care and treatment provided to service users in carrying out a regulated activity.

The Foundation will promote a culture that encourages candour, openness and honesty at all levels. We are committed to being open and transparent at board level.

We will take action to tackle bullying and harassment in relation to duty of candour, and will investigate any instances where a member of staff may have obstructed another in exercising their duty of candour.

We have a system in place to identify and deal with possible breaches of the professional duty of candour by staff who are professionally registered, including the obstruction of another in their professional duty of candour. This is likely to include an investigation and escalation process that may lead to referral to their professional regulator or other relevant body.

Staff receive appropriate training, and there are arrangements in place to support staff who are involved in a notifiable safety incident.

If we are made aware that something untoward has happened, we will treat the allegation seriously, immediately consider whether this is a notifiable safety incident and take appropriate action.

## 7. Whistle-Blowing

This policy applies to all employees and officers of the Percy Hedley Foundation. It is important to the business that any fraud, misconduct or wrongdoing by workers or officers of the Foundation is reported and properly dealt with. The Foundation

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therefore encourages all individuals to raise any concerns that they may have about the conduct of others in the business or the way in which the business is run. This policy sets out the way in which individuals may raise any concerns that they have and how those concerns will be dealt with.

## Background

The Public Interest Disclosure Act 1998 amended the Employment Rights Act 1996 to provide protection for workers who raise legitimate concerns about specified matters. These are called "qualifying disclosures". A qualifying disclosure is one made in good faith by an employee who has a reasonable belief that:

- a criminal offence;
- a miscarriage of justice;
- an act creating risk to health and safety;
- an act causing damage to the environment;
- a breach of any other legal obligation; or
- Concealment of any of the above;

Is being, has been, or is likely to be, committed. It is not necessary for the worker to have proof that such an act is being, has been, or is likely to be, committed - a reasonable belief is sufficient. The worker has no responsibility for investigating the matter - it is the organisation's responsibility to ensure that an investigation takes place.

A worker who makes such a protected disclosure has the right not to be dismissed, subjected to any other detriment, or victimised, because he/she has made a disclosure. The Foundation encourages workers to raise their concerns under this procedure in the first instance. If a worker is not sure whether or not to raise a concern, he/she should discuss the issue with his/her line manager or the human resources department.

## Principles

- Everyone should be aware of the importance of preventing and eliminating wrongdoing at work. Workers should be watchful for illegal or unethical conduct and report anything of that nature that they become aware of.
- Any matter raised under this procedure will be investigated thoroughly, promptly and confidentially, and the outcome of the investigation reported back to the worker who raised the issue.
- No worker will be victimised for raising a matter under this procedure. This means that the continued employment and opportunities for future promotion or training of the worker will not be prejudiced because he/she has raised a legitimate concern.
- Victimisation of a worker for raising a qualified disclosure will be a disciplinary offence.
- If misconduct is discovered as a result of any investigation under this procedure the Foundation's disciplinary procedure will be used, in addition to any appropriate external measures.
- Maliciously making a false allegation is a disciplinary offence.

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- An instruction to cover up wrongdoing is itself a disciplinary offence. If told not to raise or pursue any concern, even by a person in authority such as a manager, workers should not agree to remain silent. They should report the matter to a director.

## 8. Training Issues

The commitment of the Percy Hedley Foundation to ensuring that employees attain a diploma qualification in Care, this will underpin good practice and staff will also be aware of national standards relating to safeguarding adults at risk. All new staff also covers this topic as part of their induction and ongoing Professional Development.

All staff attains an accredited certificate in Safeguarding Adults, this is refreshed every two years, all staff complete the Safeguarding Competency Workbook and are assessed as 'competent' by their Line Manager.

Staff also attend MCA, Health and safety, medication, Equality and Diversity and Nappi training;

Also refer to other relevant policies;-

- Confidential Reporting of Concerns
- Whistle Blowing
- Equality and Diversity
- Medication
- Mental Capacity Act/DoLLs
- Dignity and Respect
- Lone working
- Social media
- Managing Challenging Behaviours
- Disclosure Barring Service (DBS)
- Disciplinary

*“Safeguarding is everyone’s business”*

‘Strong partnerships are those whose work is based on agreed policy and strategy, with common definitions and a good understanding of each other’s roles and responsibilities.’

Safeguarding Adults, (ADSS 2005)

## 9. Monitoring and Compliance

Well-kept records are essential to good Safeguarding practice. The Services are clear about the need to record any concerns about a Residents/ Users within our services, the status of such records and when these records should be passed over to other agencies. All working practices and incidents are audited at least 4 times per year. This audit process is supported through the Foundation Safeguarding Group

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who provide leadership in the implementation of regulation relating to Safeguarding in all aspects of the Foundation's activities (see Terms of Reference).

A file note will be made of any concern raised and action taken.

Overall responsibility for the operation of the policy lies with the Head of Service/Registered Manager. The effectiveness of the policy will be formally reviewed and monitored as a minimum on an annual basis to ensure that it continues to meet the requirements of The Foundation, the specific service area and that it reflects best practice and statutory legislation as appropriate.

## 10. Associated Policies & References

- Terms of Reference
- Mental Health Act, 1983 (as amended 2007);  
[http://www.legislation.gov.uk/ukpga/2007/12/pdfs/ukpga\\_20070012\\_en.pdf](http://www.legislation.gov.uk/ukpga/2007/12/pdfs/ukpga_20070012_en.pdf)
- Safeguarding Vulnerable Groups Act, 2006;  
[https://www.legislation.gov.uk/ukpga/2006/47/pdfs/ukpga\\_20060047\\_en.pdf](https://www.legislation.gov.uk/ukpga/2006/47/pdfs/ukpga_20060047_en.pdf)
- Domestic Violence Crime and Victims Act, 2004;  
[http://www.legislation.gov.uk/ukpga/2004/28/pdfs/ukpga\\_20040028\\_en.pdf](http://www.legislation.gov.uk/ukpga/2004/28/pdfs/ukpga_20040028_en.pdf)
- Sexual Offences Act, 2003;  
[https://www.legislation.gov.uk/ukpga/2003/42/pdfs/ukpga\\_20030042\\_en.pdf](https://www.legislation.gov.uk/ukpga/2003/42/pdfs/ukpga_20030042_en.pdf)
- Public Interest Disclosure Act, 1998;  
[https://www.legislation.gov.uk/ukpga/1998/23/pdfs/ukpga\\_19980023\\_en.pdf](https://www.legislation.gov.uk/ukpga/1998/23/pdfs/ukpga_19980023_en.pdf)
- Mental Capacity Act, 2005 (including the Deprivation of Liberty Safeguards, and MCA Codes of Practice which supplement the Act);  
<http://www.legislation.gov.uk/ukpga/2005/9/data.pdf>
- Protection from Harassment Act 1997  
[https://www.legislation.gov.uk/ukpga/1997/40/pdfs/ukpga\\_19970040\\_en.pdf](https://www.legislation.gov.uk/ukpga/1997/40/pdfs/ukpga_19970040_en.pdf)
- Family Law Act 1996 Part IV  
[https://www.legislation.gov.uk/ukpga/1996/27/pdfs/ukpga\\_19960027\\_en.pdf](https://www.legislation.gov.uk/ukpga/1996/27/pdfs/ukpga_19960027_en.pdf)
- Forced Marriage (Civil Protection) Act 2007  
[https://www.legislation.gov.uk/ukpga/2007/20/pdfs/ukpga\\_20070020\\_en.pdf](https://www.legislation.gov.uk/ukpga/2007/20/pdfs/ukpga_20070020_en.pdf)
- Health and Social Care Act 2008  
[https://www.legislation.gov.uk/ukpga/2008/14/pdfs/ukpga\\_20080014\\_en.pdf](https://www.legislation.gov.uk/ukpga/2008/14/pdfs/ukpga_20080014_en.pdf)
- National Health Service Act 2006  
[https://www.legislation.gov.uk/ukpga/2006/41/pdfs/ukpga\\_20060041\\_en.pdf](https://www.legislation.gov.uk/ukpga/2006/41/pdfs/ukpga_20060041_en.pdf)
- The Care Standards Act 2000  
[https://www.legislation.gov.uk/ukpga/2000/14/pdfs/ukpga\\_20000014\\_en.pdf](https://www.legislation.gov.uk/ukpga/2000/14/pdfs/ukpga_20000014_en.pdf)
- Equality Act 2010  
[https://www.legislation.gov.uk/ukpga/2010/15/pdfs/ukpga\\_20100015\\_en.pdf](https://www.legislation.gov.uk/ukpga/2010/15/pdfs/ukpga_20100015_en.pdf)

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# Development and Implementation of Promoting Positive Behaviour Plans

Information gathered as part of pre-assessment with specific request for behaviour plans from current provider/Social Worker/Case Manager/individual



Information shared with Assessment Team with a request to gather further information from support staff who accompany the Residents/Users



Assessment Report compiled with information and necessary support needs highlighted



Draft Promoting Positive Behaviour Plans created using Lalemand Scale descriptors and incorporating NAPPI principles



Most behaviour should be managed using NAPPI Level 1 interventions of refocus and distraction



Plan shared with parents with request to try to follow in the home environment, as appropriate



Plan shared with other staff working with Residents/Users



Plan monitored and reviewed by Support Managers

# Safeguarding – Service Users/Residents Information

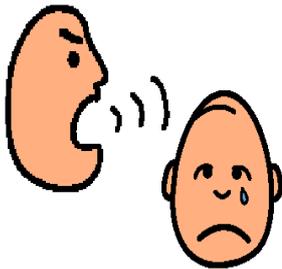


## Hedleys Adult Services Safeguarding Policy



### What is abuse?

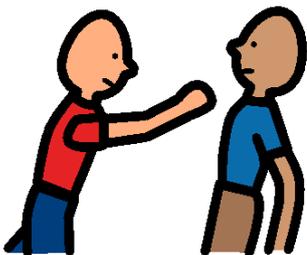
Abuse is when someone hurts you or treats you badly. These are the different kinds of abuse:



### Emotional abuse [Psychological]

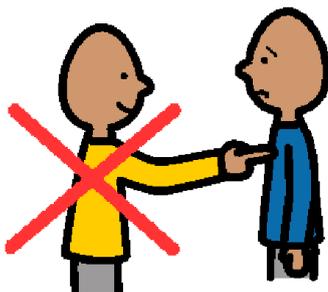
Emotional abuse is when people talk to you in an unkind way.

For example teasing, threatening, swearing, ignoring you, shouting, putting you down and treating you like a child.



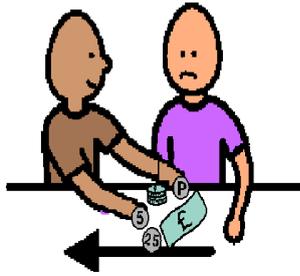
### Physical abuse

Physical abuse is when someone hurts you, for example hitting, kicking, pinching you causing you pain.



### Sexual abuse

Sexual Abuse is when someone touches your body or your private parts in ways you do not like or want. This includes kissing you and making you touch them in a way you are not comfortable with.



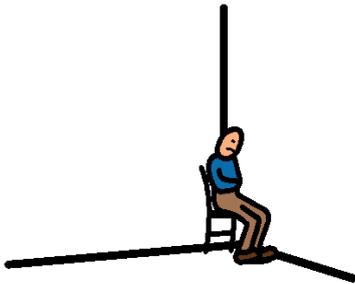
## **Financial [or material abuse]**

Financial abuse is when people take control of your money or things which belong to you.

## **Neglect**

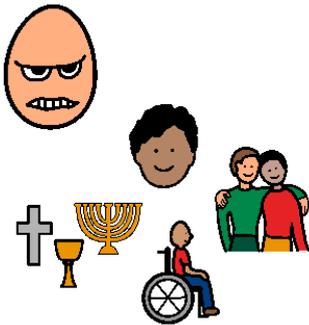
Neglect is when people who are supposed to help do not look after you properly.

For example this could be not giving you enough food, not keeping you warm and safe, not giving you medicine or not taking you to the doctors if you are ill.



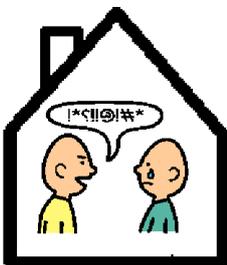
## **Discrimination**

Discrimination is when people treat you badly or unfairly because of the colour of your skin, your religion, your disability, your age, your sex or because you are Gay or Lesbian.



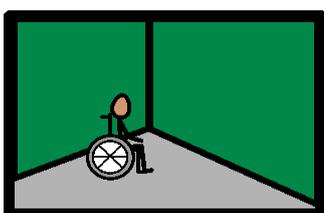
## **Domestic Abuse**

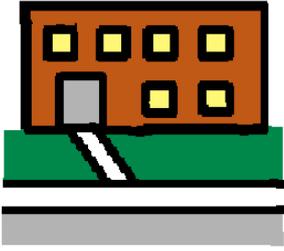
When someone who has been close to you uses threatening behaviour, violence or any form of abuse. (The abuse may be psychological, physical, sexual, financial or emotional)



## **Modern Slavery**

When someone takes away your freedom and makes you work in a slave –like way.





## **Institutional abuse**

Institutional abuse is when the routines in care settings take away your rights, choices and opportunities.

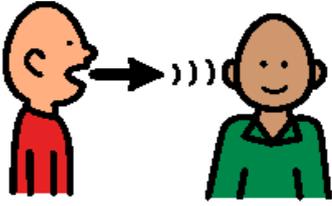


## **Self Neglect**

Self-neglect is when you don't take care of yourself and it causes, or may cause, you harm. It may be serious physical, mental or emotional harm or substantial damage to or loss of belongings.



**Abuse is always wrong and should not happen**



If any of these things happen to you or your friends, you should tell someone you trust.

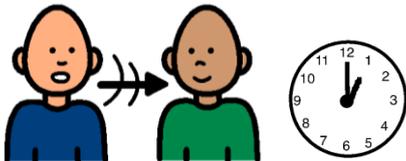
You could tell:

- A member of staff
- The manager
- Someone in your family
- A nurse or doctor
- Social Worker
- A friend or another resident
- An Advocate
- The Police



## How will I be kept safe in Hedleys Adult Services?

If you are being hurt or think someone else is, you should tell a member of staff.



Your concerns will be reported to a manager at Hedleys Able 2 or the Home within 1 hour of you telling someone.



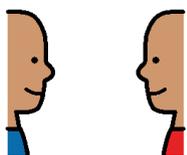
The Care Act 2014 says all staff have a responsibility to pass on your or their concerns to a responsible person.



People who provide services like residential care, day services or respite should always work to keep you safe and well.



All staff that support you must have a Police check. It is to make sure they have not abused people in the past. It is called a Disclosure and Barring Service (DBS) check.



Friends and family are good at noticing when people might have been abused or are in services where they are not safe.

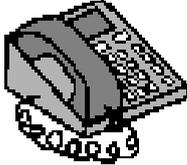


People who inspect services, like the Care Quality Commission [CQC] and Contract Monitoring Teams, are responsible for making sure services offer good, safe care and support.

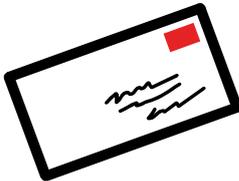
## Contact Numbers:



### The Care Quality Commission:



**03000 616161**



Citygate  
Gallowgate  
Newcastle upon Tyne  
NE1 4PA



North Tyneside Council

### North Tyneside Adult Social Care:



Gateway (0191) 643 2777  
[out of hours (0191) 200 68011]



Quadrent West  
The Silverlink North  
Cobalt Business Park  
Newcastle upon Tyne  
NE27 0BY



North Tyneside Council



**North Tyneside Safeguarding Adults  
Team for advice and support:**



(0191) 643 7646

**ADULT SERVICES**

**SAFEGUARDING PROCEDURE**

## **1. Introduction**

This procedure has been developed to ensure consistency in Safeguarding Adults cases ONLY. This is to be applied throughout Adult Services. It will ensure that a standardised approach for this activity is followed.

The aim of the procedure is to provide anyone in contact with an adult, whether in a paid or volunteer role, an understanding of their role and responsibility in responding appropriately to abuse or neglect.

## **2. Scope**

This procedure describes the response that should be made to any situation where there is knowledge or concern that an adult who:

- **is aged 18 or over, and**
- **has needs for care and support (whether or not those needs are being met); and**
- **is experiencing, or is at risk of, abuse or neglect; and**
- **as a result of those needs is unable to protect him or herself against the abuse or neglect or the risk of it.**

Hereafter, those individuals meeting the above definition, will be referred to as the *adult at risk*.

## **3. Responsibility**

Overall responsibility for this procedure sits with Head of Service/Registered Manager

## **4. Procedure Overview**

Under Section 42 of the Care Act 2014, local authorities must make enquiries, or ensure others do so, if it reasonably suspects an adult who has care and support needs:

- is, or is at risk of, being abused or neglected; and
- is unable to protect themselves against the abuse and neglect or risk of it because of their care and support needs.

### **4.1 What is an Enquiry?**

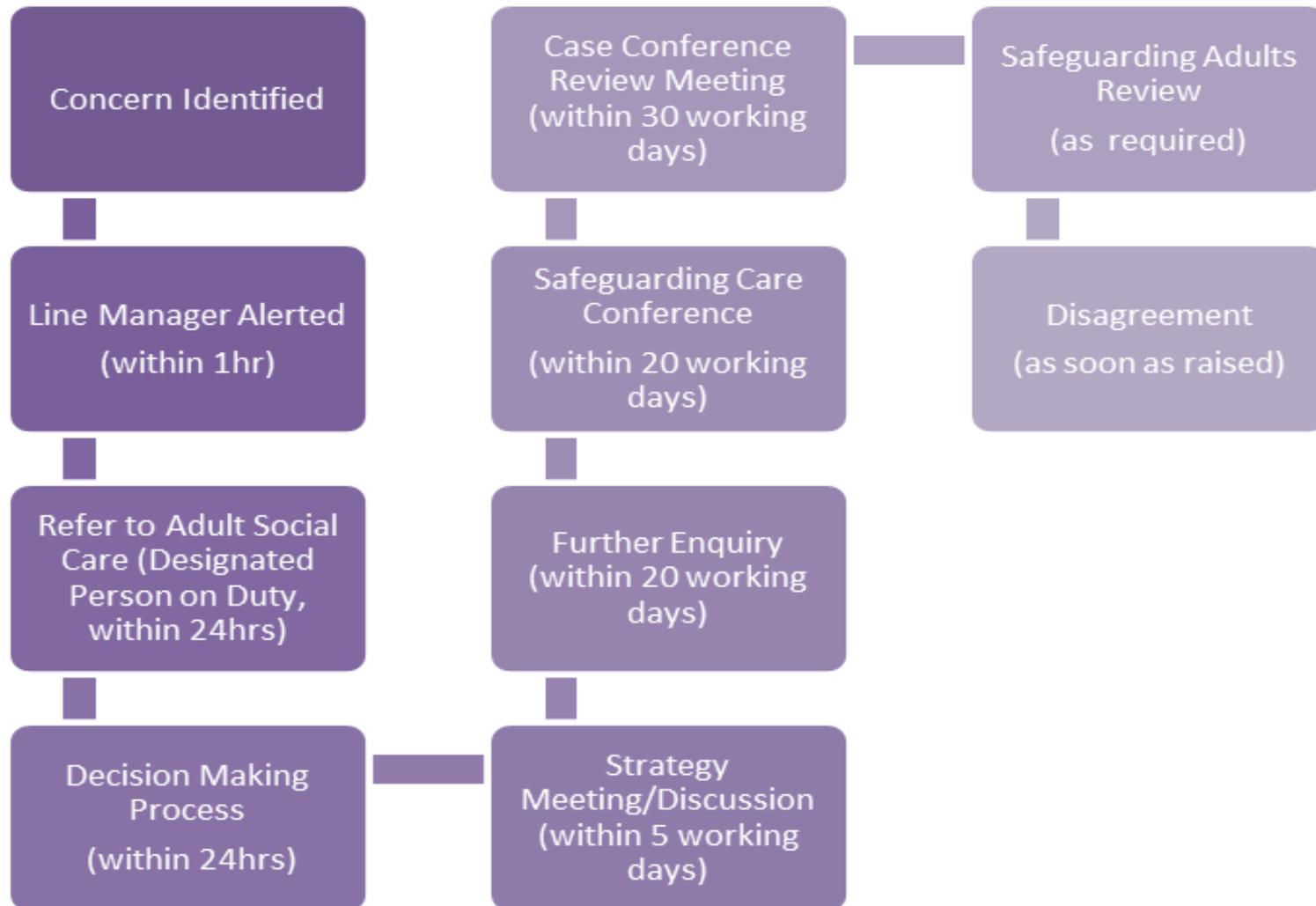
- An enquiry is the action taken or instigated by the local authority in response to a concern that abuse or neglect may be taking place.
- An enquiry could range from a conversation with the adult, or if they lack capacity, or have substantial difficulty in understanding the enquiry their representative or advocate
- All safeguarding concerns should result in a multi-agency alert
- Not all concerns will progress beyond the 'Initial Enquiry' stage
- Formal enquiry will be initiated under section 42, right through to a much more formal multi-agency plan or course of action.
- Whatever the course of subsequent action, the professional concerned should record the concern, the adult's views and wishes, any immediate action has taken and the reasons for those actions.
- The purpose of the enquiry is to decide whether or not the local authority or another organisation, or person, should do something to help and protect the adult.

- If the local authority decides that another organisation should make the enquiry, for example a care provider, then the local authority should be clear about timescales
- Local Authority need to know the outcomes of the enquiry and what action will follow if this is not done.

#### **4.2 What should employees do if they have a concern, a suspicion, or receive a disclosure?**

The following flowchart supported by the Local Authorities '10 Step' procedure outlines a step by step approach, to be taken should any employee have a Safeguarding concern, suspicion or receive a disclosure;

**‘What to do if you have a concern, a suspicion, or receive a disclosure’**



Step	Action	When	What needs to happen	Who
1	<b>Identifying a concern</b>	<b>Immediate</b>	<p>A safeguarding concern can centre on a single act or repeated acts of suspected, disclosed or witnessed abuse or neglect.</p> <p>Where an 'adult at risk' is in immediate danger, steps should be taken to protect their safety, e.g. by calling 999 for emergency medical assistance and/or the Police. (101 can be called if not emergency)</p> <ul style="list-style-type: none"> <li>• The person identifying the concern should not put themselves at risk</li> <li>• Every care should be taken to preserve evidence.</li> </ul>	<b>All staff</b>
2	<b>Alert</b>	<b>As soon as is practicable – ideally within 1 hour</b>	<p>Staff should immediately</p> <ul style="list-style-type: none"> <li>• report the concern to their line manager</li> <li>• record the concern</li> <li>• Where another worker is implicated, whistle-blowing procedures can also be used to alert</li> <li>• If the allegation is about, or implicates, the Designated Person, line manager the alerter should contact the designated persons line manger</li> <li>• The alerter should make a written record of the facts as soon as they can and keep this for future reference.</li> <li>• They should not attempt to approach the alleged perpetrator or place themselves at risk</li> <li>• If a crime is suspected every effort should be made to preserve evidence: <ul style="list-style-type: none"> <li>- Do not touch anything that could provide evidence that a crime has been committed</li> <li>- Where there is an allegation or signs of a physical or sexual attack, try not to allow vulnerable adult to wash, bathe, eat or drink until option of medical examination is given, but you may not be able to prevent this therefore try for MINIMUM intervention.</li> <li>- Do not allow anybody else to enter the area or touch anything</li> <li>- Close off the area if at all possible until the police arrive</li> <li>- Where possible remove all other people from scene</li> </ul> </li> </ul>	<b>Anyone who wishes to raise an alert (The 'Alerter')</b>

Step	Action	When	What needs to happen	Who
			<p>- If possible, keep the victim informed about what is happening and what actions are being taken</p>	
3	<p><b>Designated Person on duty refers to adult social care</b></p>	<p><b>As soon as possible, within 24 hours.</b> This should be done as soon as possible</p>	<p><b>Gather Information</b> When the organisation/service's Designated Person receives a safeguarding alert they will review the information to make sure they have sufficient and accurate details.</p> <ul style="list-style-type: none"> <li>• Contact Adult Social Care Gateway Team on (0191) 6432777 to share factual details about the allegation.</li> <li>• If a crime is suspected, the Designated Person will contact Northumbria Police on 101 (ring 999 in an emergency situation). No attempt should be made to question the adult at risk, the alleged perpetrator or any other witnesses; this will be done as part of a formal Police investigation.</li> <li>• If the individual requires medical attention contact 999 in an emergency for an ambulance or 111 if you require health advice for a non-emergency.</li> <li>• If an allegation is made against any worker, the Foundation will refer to its organisation's internal human resources department /suspension/staff disciplinary procedures and take prompt action to protect the interests of all parties.</li> </ul> <p>The Designated Person makes a written record of their actions as soon as possible and keeps this for future reference.</p> <p>The Safeguarding Adults Initial Enquiry Form should be completed and forwarded to the Gateway team. The Threshold Tool should be used to assist indecision making in relation to how much of the form to complete.</p> <p>In Cross-boundary cases (i.e. where the safeguarding concern occurs within North Tyneside but the individual is from another local authority area) then it is Adult Social Care in North Tyneside who will take the lead in the safeguarding procedures as the host</p>	<p><b>The Designated Person identified within each Service - first point of contact for sharing safeguarding adults concerns and reporting alerts</b></p>

Step	Action	When	What needs to happen	Who
			<p>authority. Where another host Authority takes the lead in their area for an individual from North Tyneside, this will be recorded for information only and allocated for care management/social work support as necessary.</p>	
4	Decision making	Within 24 hours	<p><b><u>On receipt of any concern, a decision needs to be made by a Safeguarding Decision Maker in Adult Social Care as to whether or not safeguarding procedures are required. A Safeguarding Decision Maker may be a member of the Safeguarding Adults Team, a Senior Social Worker or a Service Manager from Gateway or a Community Team</u></b></p> <p>Where allegations of abuse or neglect concern a registered health or care service, and Regulatory breaches are suspected or fitness to practice is in question, then the Care Quality Commission should be informed.</p> <p><b>Sometimes, the concerns raised need to be dealt with as Complaints</b>, rather than being investigated through the Safeguarding procedures. A complaint may be an expression of dissatisfaction about a service that requires a response, but in circumstances that do not relate to a vulnerable person being subjected or at risk of abuse or neglect, from which they were not able to protect themselves. In such instances, the Complaints Procedure will be followed.</p> <p>If it becomes evident during a complaints investigation that there are safeguarding concerns, these will be referred back for consideration under the safeguarding procedures and vice versa.</p>	Safeguarding Decision Maker
4A	Managing a Safeguarding Alert		<p><b>Once the decision has been made by Adult Social Care, concerns can be dealt with in one of two ways:</b></p> <p><b>A) Low Level Concern</b> Where a lower level concern relates to a known service user, and is reported directly to the Care Manager, the Care Manager will discuss with their line manager/Safeguarding Decision Maker and agree appropriate action.</p>	

Step	Action	When	What needs to happen	Who
			<p>Where a lower level concern relates to a person who is not known, or the Alerter is unsure, the concern should be reported to North Tyneside Adult Social Care Gateway Team on tel 0191 6432777 who will:</p> <ul style="list-style-type: none"> <li>record the information as a Contact onto the known service users notes and send the concern to the Safeguarding Adults Team Duty Senior for action</li> <li>or create a new client on AIS, gather and record as much information as possible about the alleged abuse/neglect, check all available records to find out whether any of the parties are already known, update AIS accordingly and send to the Safeguarding Adults Team Duty Senior who will ensure appropriate action is taken</li> <li>Where the response required is felt to fall short of safeguarding procedures, this might involve the offer of a community care assessment, the review of an existing care plan, sign-posting to other service/services.</li> </ul> <p><b>NB: There is a 'flagging system' in place in North Tyneside for multiple or repeated concerns or notifications – NTC Safeguarding Adults Team will alert the relevant Team Manager where there has been 3 low level concerns or notifications made regarding a client in 3 months or 6 in 6 months.</b></p>	<p><b>Gateway Team</b></p> <p><b>Safeguarding Adults Team Duty Senior</b></p>
4B	Safeguarding Enquiry	Within 24 hours	<p><b>B) Safeguarding Enquiry</b></p> <p>More serious concerns will need to be considered through adult safeguarding procedures and these are known as Enquiries</p> <p>The Local Authority can request another agency to carry out the enquiries as required. This would be decided on a case by case basis and agreed with the relevant agency.</p> <p>All agencies are expected to follow their own parallel Health &amp; Safety procedures for reporting serious accidents/ injuries/ 'Untoward Incidents'</p> <p>The referral will be logged as a contact onto AIS and a Safeguarding Enquiry will be created. The Safeguarding Enquiry will be used to record of all discussions, risk assessments, decisions (to proceed or otherwise) and actions.</p>	<p><b>Safeguarding Decision Maker</b></p> <p><b>Gateway Team</b></p>

Step	Action	When	What needs to happen	Who
			<ul style="list-style-type: none"> <li>• The Gateway Team will collect as much information as possible to assist the Decision Maker and workflow the contact to the Safeguarding Adults Team if unallocated or the Care Manager if allocated; the Safeguarding Adults Team will also be work flowed to offer advice to the Care Manager. See Gateway Flowchart</li> <li>• <b>The Care Manager will ascertain the wishes of the adult at risk to establish their views and wishes and to find out what outcomes they want to achieve from the safeguarding process</b></li> <li>• The Decision Maker decides if it is appropriate for the referral to be considered through the safeguarding procedures or if it is an issue that needs managed in an alternative way e.g. care coordination or care management processes.</li> <li>• The Decision Maker/Care Manager carries out an initial risk assessment and puts in place any necessary immediate protective measures</li> <li>• The Decision Maker will decide if a worker needs to be allocated and will workflow to the relevant team for allocation to a Care Manager.</li> <li>• The Decision Maker/Care Manager will inform the referrer of their decision</li> <li>• The Care Manager arranges advocacy/independent mental capacity advocacy/other support, as required by the adult and/or the alleged perpetrator. The Care Act places a duty on the local Authority to consider if the adult requires an IMCA to represent or support them. Where necessary Independent Mental Capacity Advocacy (IMCA) will be sourced (using the IMCA Advocacy referral form). Other advocacy and specialist support will be sourced from the usual preferred providers.</li> <li>• If the Care Manager and the Decision Maker decides that safeguarding adult's procedures are required then he/she will coordinate a <b>Strategy Meeting</b> or a <b>Strategy Discussion</b>.</li> <li>• This will be recorded in AIS as a Safeguarding Assessment</li> <li>• <b>Within 3 working days of the referral being received the Care Manager will feed back actions to the referrer</b></li> </ul> <p><b>Consent</b> The adult at risk's consent to the safeguarding intervention is required unless:</p> <ul style="list-style-type: none"> <li>• he or she lacks capacity to make a decision about safeguarding intervention or</li> </ul>	<b>Care Manager and/or Decision Maker</b>

Step	Action	When	What needs to happen	Who
			<p>accepting one or more of the protective measures (Complete forms MCA1 to assess capacity and MCA 2 to record “best interest decisions”)</p> <ul style="list-style-type: none"> <li>• he or she may be subject to pressure or coercion, or there is a known risk of serious harm</li> <li>• there is an over-riding duty of care to the adult and/or others in particular children</li> </ul> <p><b>NB See above to make referrals to children’s services</b></p> <ul style="list-style-type: none"> <li>• a crime has been or is likely to have been committed</li> </ul> <p>In these situations, consent can be over-ridden to secure the person/other people’s safety.</p> <p><b>The reason for over-riding consent must always be recorded.</b></p>	
5	<b>Strategy meeting or Strategy Discussion</b>	<b>Within 5 working days of the Adult Social Care receiving the referral</b>	<p>In some cases, a Strategy Discussion may take place over the telephone, by e-mail or by ‘virtual’ meeting. A face-to-face Strategy Meeting will always be convened in more complex cases. These will be overseen by the Decision Maker, but often will be coordinated by the Care Manager.</p> <p><b>The adult at risk and/or their supporter(s) or advocate (taking into account issues of mental capacity) must be invited to be part of the process.</b></p> <p><b>The process should always be managed in the most person-centred way possible.</b></p> <p><b>The individual wishes and views will be recorded to ascertain the outcomes they want to achieve from the Safeguarding Process</b></p> <p>If an agency cannot attend, they will be given the opportunity to provide information to the meeting, either verbal or in writing and will be provided with a copy of the minutes.</p>	
6	<b>Further Enquiry</b>	<b>Completed within 20 working days</b>	The Local Authority can request another agency to carry out the enquiries as required. This would be decided on a case by case basis and agreed with the relevant agency.	<b>Care Manager,</b>

Step	Action	When	What needs to happen	Who
		<b>of the strategy discussion/ meeting</b>	<p>The primary purpose of the safeguarding enquiry is to:</p> <ul style="list-style-type: none"> <li>• find out if and how an identified adult or adults has/have experienced abuse</li> <li>• find out who perpetrated it</li> <li>• identify the presenting risks</li> <li>• ascertain what the service user wants as an outcome to the safeguarding process, provide their views of what happened</li> <li>• identify service user strengths, coping strategies and/or areas in which they might still need support in order to protect themselves</li> <li>• determine how risks can be minimized to an acceptable level via a range of supportive actions/remedial measures</li> </ul> <p>Where a criminal act is suspected, the Police investigation takes precedence and the role of adult social care will be to identify the safeguarding plan for the alleged victim.</p>	<b>Partner Agency Responsible Person, any other necessary supporting professionals</b>
<b>7</b>	<b>Safeguarding Case Conference</b>	<b>Within 20 working days</b>	<p>The outcome of all assessments and enquiries are shared at the Case Conference Meeting.</p> <p>The meeting will approve the individual Safeguarding Plan</p>	<b>The Safeguarding Decision Maker chairs and all previously involved strategy members are invited including the service user/carer/ supporter/ advocate</b>
<b>8</b>	<b>Case Conference Review Meeting</b>	<b>Within 30 working days after the</b>	<p>The Case Conference Review Meeting will</p> <ul style="list-style-type: none"> <li>• review what has been achieved on the Action Plan</li> <li>• in the case of commissioned services:</li> </ul>	<b>Safeguarding Decision Maker</b>

Step	Action	When	What needs to happen	Who
		<b>Case Conference</b>	<ul style="list-style-type: none"> <li>(i) agree actions necessary to secure contract compliance and</li> <li>(ii) agree actions with the Care Quality Commission.</li> <li>• obtain the views of the alleged victim, their carer(s) or representative(s) with regards the outcome of the safeguarding process.</li> </ul>	
<b>9</b>	<b>Safeguarding Adults Review</b>	<b>If required</b>	The North Tyneside Safeguarding Adults Board will invoke appropriate 'Safeguarding Adults Review' protocols where necessary and ensure that suitable mechanisms are put in place to facilitate sharing of 'lessons learned' from its safeguarding work.	<b>Joint Case Review Panel</b>
<b>10</b>	<b>Disagreement</b>	<b>As soon as the disagreement is raised</b>	Where a Referrer disagrees with the Safeguarding Decision Maker's decision, the referral information is passed to the North Tyneside Safeguarding Adults team for a second opinion. Where necessary the team will take advice from North Tyneside's legal team.	<b>Safeguarding Decision Maker and/or Safeguarding Adults Team</b>

## 5.0 Monitoring & Review

Overall responsibility for the operation of the procedure lies with the Head of Service/Registered Manager. The effectiveness of the procedure will be formally reviewed and monitored as a minimum on an annual basis to ensure that it continues to meet the requirements of The Foundation, the specific service area and that it reflects best practice and statutory legislation as appropriate.

The below table outlines the monitoring and compliance requirements of the procedure:

Element Monitored	Lead Person	Tool	Frequency	Reporting Arrangement	Lead Person - Act on Recommendation	Lead Person – Dissemination of Lessons Learned
<i>E.g Adherence to procedure</i>	<i>Author</i>	<i>Audit</i>	<i>Annually</i>		<i>Author</i>	<i>Author</i>