



# **Safeguarding Adults Procedural Framework Ten Step Summary**

**Multi-Agency Staff Guidance  
April 2018**

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In the case of any uncertainty about how to proceed, advice and guidance is available from Northumberland County Council (NCC) Strategic Safeguarding Adults Team on (01670) 622683.

## Introduction

What do we mean by the terms ‘safeguarding’ and ‘adults at risk’?

In practice the term ‘**safeguarding**’ is used to mean both specialist responsive services where harm or abuse or is suspected to have occurred, and other activity designed to promote the wellbeing and safeguard the rights of adults. In its broadest sense it is everybody’s business: the public, volunteers and professionals.

This procedural guide sets out to describe the specific action we need to take to ensure that people who have (or may have) experienced harm or abuse are enabled to protect themselves or are involved in decision making to safeguard them. This will include making sure that people who lack capacity are supported through advocacy and other measures so that their best interests can be pursued. It also includes ensuring that justice is facilitated where vulnerable adults (adults at risk) are the victims of crime.

**Safeguarding Adults has been placed on a statutory footing by the Care Act 2014.** Where previously the definition of an adult at risk was provided by No Secrets 2000, Clause 42 provides that:

- (1) This section applies where a local authority has reasonable cause to suspect that an adult in its area (whether or not ordinarily resident there).**
- (a) Has needs for care and support (whether or not the authority is meeting any of those needs).**
- (b) Is experiencing, or is at risk of, abuse or neglect, and.**
- (c) as a result of those needs is unable to protect himself or herself against the abuse or neglect of the risk of it.**

From April 2015 this will mean that safeguarding procedures will be applied in a wider range of circumstances than is presently the case. Our policies and procedures need to reflect these changes.

Harm and abuse can happen in any setting, and may additionally occur through neglect. People may be harmed at home, in their communities, in a care home, at hospital, in college or at work, at day and community centres or other places where people spend their time or receive services.

People who abuse or harm adults at risk are a very diverse group. They largely fall into four main categories:

- Paid staff members or support workers

- Unpaid family members, partners or carers (who can sometimes harm unintentionally)
- Neighbours and members of the community and
- Other adults at risk.

## Glossary of Terms

**ACN** - Adult Concern Notification - a means of recording lower level concerns resulting from an alert

**Alert** - an expression of concern that an adult has been, or could be subjected to abuse or neglect

**CQC** - Care Quality Commission

**Designated Person** is the person within an organisation, care or support setting designated to make Safeguarding Adult alerts. There should always be a person on duty who takes on this role. Each agency will have an identified member of staff from partner agencies to carry out or support their own agency enquiries into allegations, when this appropriate and has been agreed on a multi agency basis.

**ERC** - Enquiry Referral Coordinator - person who records initial concerns and makes sure the information is shared with the correct decision maker

**MASH** Multi-Agency Safeguarding Hub

**NCC**- Northumberland County Council (the Local Authority)

**SAB** - Safeguarding Adults Board - overarching purpose of a SAB is to help and safeguard adults with care and support needs. It does this by: assuring itself that local safeguarding arrangements are in place as defined by the Care Act 2014 and statutory guidance.



**SAR** - Safeguarding Adults Review - multi-agency review process which seeks to determine what relevant agencies and individuals involved could have done differently that could have prevented harm or a death from taking place. The purpose of a SAR is not to apportion blame.




**SARC** - Safeguarding Adults Review Committee - Sub-committee of the SAB which reviews cases and makes recommendations about learning reviews which may be required.

**SDM** - Safeguarding Decision Maker is the senior person who will make decisions about how to deal with the alert



**SM** - Safeguarding Manager - the Manager who coordinates the Section 42 Enquiry

Step	Action	When	What needs to happen	Who
1	Identifying a concern	Immediately	<p>A safeguarding concern can centre on a single act or repeated acts of suspected, disclosed or witnessed abuse or neglect. It may be:</p> <ul style="list-style-type: none"> <li>• <b>physical abuse</b>, including hitting, slapping, pushing, kicking, misuse of medication, restraint, or inappropriate sanctions;</li> <li>• <b>sexual abuse</b>, including rape and sexual assault or sexual exploitation or acts to which the vulnerable adult has not consented, or could not consent or was pressured into consenting;</li> <li>• <b>psychological abuse</b>, including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks</li> <li>• <b>financial or material abuse</b>, including theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits;</li> <li>• <b>neglect and acts of omission</b>, including ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating;</li> <li>• <b>discriminatory abuse</b>, including forms of harassment, slurs or similar treatment because of race, gender and gender identity, age, disability, sexual orientation or religion</li> <li>• <b>organisational abuse</b>, including everything from individual acts of very poor professional practice to pervasive ill treatment, gross misconduct and systemic failure across a service.</li> <li>• <b>domestic abuse</b>, including psychological, physical, sexual, financial, emotional abuse and “honour” based violence.</li> <li>• <b>modern day slavery</b>, encompasses slavery, human trafficking, forced labour and</li> </ul>	Anyone who wishes to raise an alert (The “Alerter”)

			<p>domestic servitude.</p> <ul style="list-style-type: none"> <li>• <b>self-neglect</b>, this covers a wide range of behaviours, including neglecting to care for one’s personal hygiene, health or surroundings and includes behaviours such as hoarding.</li> <li>• <b>radicalisation</b>, the abusive process whereby adults with care and support needs are radicalised.</li> </ul> <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.</p> <p>The person identifying the concern should not put themselves at risk</p> <p>Every care should be taken to preserve evidence:</p> <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> <li>• If possible, keep the victim informed about what is happening and what actions are being taken.</li> </ul>	
2	Alert	As soon as practicable	<p>Service users, carers and members of the public (including other adults at risk).</p> <p> <b>Report suspicions/allegations of abuse or neglect to One Call on (01670</b></p>	

			<p><b>536400) or <a href="mailto:onecall@northumbria.nhs.uk">onecall@northumbria.nhs.uk</a></b></p> <p>Care management staff who receive a concern/referral or who are party to disclosure should gather information, ensure the person is safe and send an email to <a href="mailto:safeguarding.triage@northumbria-healthcare.nhs.uk">safeguarding.triage@northumbria-healthcare.nhs.uk</a> detailing the concerns raised, a brief summary of the alleged victim and if known alleged perpetrator.</p> <p>All other organisations (including other NCC departments) should:</p> <ul style="list-style-type: none"> <li>• Report their concerns to the “<b>Designated Person</b>” identified in their organisation’s safeguarding adults guidance.</li> <li>• Where another worker is implicated, whistle-blowing procedures can also be used to alert the “<b>Responsible Manager</b>” identified within their organisation’s Whistleblowing procedures.</li> <li>• If the allegation is about, or implicates, the <b>Designated Person</b> and/or the <b>Responsible Manager</b>, the Alerter can: <ul style="list-style-type: none"> <li> Report the suspicions/allegations of abuse/neglect to One Call on (01670 536400) or <a href="mailto:onecall@northumbria.nhs.uk">onecall@northumbria.nhs.uk</a></li> <li> Contact the Care Quality Commission see <a href="http://www.cqc.org.uk/content/whistleblowing-quick-guide-raising-concern-cqc">http://www.cqc.org.uk/content/whistleblowing-quick-guide-raising-concern-cqc</a> for regulated services</li> </ul> </li> <li>• <b>The Alerter should make a written record</b> of the facts as soon as they can and keep this for future reference.</li> <li>• <b>They should not attempt to approach the alleged perpetrator or place themselves at risk</b></li> <li>• Every effort should be made to <b>preserve evidence</b></li> </ul>	
3	Designated Person refers to adult	Ideally within 24 hours	<ul style="list-style-type: none"> <li>•  When the organisation/service’s <b>Designated Person</b> receives a safeguarding alert they will review the information to make sure they have sufficient and</li> </ul>	The Designated Person identified within each



	<p><b>social care</b></p>		<p>accurate details and contact <b>One Call on (01670) 536400</b> to share factual details about the allegation.</p> <p> If a crime is suspected, the <b>Designated Person</b> will contact <b>Northumbria Police on 101 (ring 999 in an emergency situation)</b>. 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.</p> <p> Registered health and care services also need to notify the <b>Care Quality Commission</b> of safeguarding concerns and immediate protective actions. The number to call is 03000 616161.</p> <p>If an allegation is made against any worker in any organisation, the employer should refer to his/her organisation’s internal human resources/suspension/staff disciplinary procedures and take prompt action to protect the interests of all parties. Care should be taken not to contaminate evidence that may assist the enquiry.</p> <p><b>NB Where concerns may also have implications for the safety of children concerns should be raised with One Call on (01670 536400).</b></p> <p>Allegations about people who also have contact with children through their work or perpetrators who have family contact with children will need to be reported to Northumberland County Council’s <b>LADO Adam Hall on (01670) 623979</b>, or via email <a href="mailto:LADO@northumberland.gov.uk">LADO@northumberland.gov.uk</a> or <a href="mailto:Adam.hall01@northumberland.gov.uk">Adam.hall01@northumberland.gov.uk</a>.</p>	<p><b>organisation as a first point of contact for sharing safeguarding adults concerns and reporting alerts</b></p>
<p><b>4</b></p>	<p><b>Decision Making</b></p>	<p><b>Within 24 hours</b></p>	<p><b><u>On receipt of any concern, a decision needs to be made on behalf of the Local Authority by a Safeguarding Decision Maker (SDM) as to whether or not safeguarding procedures are required. This decision will be in conjunction with partners i.e. Police; Children’s Services</u></b></p> <p>See also Safeguarding Adults Risk Threshold Tool at <a href="http://www.northumberland.gov.uk/Care/Support/Safeguarding.aspx">http://www.northumberland.gov.uk/Care/Support/Safeguarding.aspx</a> which is the guidance used by adult social care decision makers when deciding what</p>	<p><b>Safeguarding Decision Maker</b></p>

			<p>constitutes a concern and/or Section 42 Enquiry and Appendix A below.</p> <p><b>Sometimes, the concerns raised need to be dealt with as <b>Complaints</b>,</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 significant harm, from which they were not able to protect themselves. In such instances, the Complaints Procedure will be followed, available at:                  For NHCT staff:  <a href="https://www.northumbria-enyware.com/policies-procedures/complaints-policy-procedure-for-raising-concerns/">https://www.northumbria-enyware.com/policies-procedures/complaints-policy-procedure-for-raising-concerns/</a>                  For NCC staff:  <a href="https://www.northumberland.gov.uk/Care/Support/Adult-services-complaints-comments-and-compliments.aspx">https://www.northumberland.gov.uk/Care/Support/Adult-services-complaints-comments-and-compliments.aspx</a>                  For any queries relating to complaints please email:  <a href="mailto:socialcarecomplaints@northumbria-healthcare.nhs.uk">socialcarecomplaints@northumbria-healthcare.nhs.uk</a></p> <p><b>NB: 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.</b></p>	
5	Safeguarding Enquiry	Within 24 hours	<p><b>Once the Safeguarding Decision Maker (Local Authority) has been alerted that an adult is experiencing or is at risk of experiencing abuse and neglect, it must arrange for an enquiry to be undertaken, either by themselves or by another agency on their behalf. This is to establish whether or not something needs to be done either by the Local Authority or another person, or agency to help and protect the adult.</b></p> <p><b>Concerns raised will be rag rated by the MASH team i.e. red, amber, green so that information is gathered to ensure the safety of any vulnerable adults involved.</b></p> <p><b>Initial information gathering may result in one of two outcomes. Either a) an Adult Concern Notification will be recorded or b) a multi-agency Section 42 Enquiry be initiated:</b></p> <p><b><u>A) Adult Concern Notifications (ACN's).</u></b></p>	

			<p><b>Where a lower level concern relates to a known service user</b>, the Care Manager/Social Worker will report to MASH. Further information will be requested from partner agencies if necessary and a decision will be made and a safeguarding plan established.</p> <p><b>Where a lower level concern relates to a person who is not known, or the alerter is unsure</b>, the concern should be reported to One Call at Foundry House Tel (01670) 536400. An <b>Enquiry Referral Coordinator</b> will:</p> <p>Record the information onto either the known service users contact notes or create a new person on Swift. The ERC will then send the concern to Safeguarding Triage. Partner agencies within MASH may be asked for information to contribute to the decision. A Safeguarding Triage Worker may gather further information about the alleged abuse/neglect, check all available records to find out whether any of the parties are already known, update SWIFT accordingly and send to a SDM who will allocate a duty worker/an appropriate care manager to ensure appropriate action is taken.</p> <p>Where both victim and perpetrator are at risk, a separate ACN for the alleged perpetrator will be recorded on the perpetrators SWIFT record</p> <p>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, signposting to other service/services.</p> <p>NB: There is a 'flagging system' in place in Northumberland for multiple or repeated notifications and enquiries – NCC Enquiry Team will alert the SDM within MASH where there has been 3 notifications recorded about an adult in a month, 3 in 3 months or 6 in 6 months.</p> <p><b>B) Multi-agency investigation/assessment (Section 42 Enquiry)</b></p> <p>More serious concerns may become the subject of a multi-agency safeguarding investigation.</p> <p>In cases where there are serious concerns, the initial enquiry will be logged within MASH and information requested from partner agencies. A Safeguarding Triage</p>	
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			<p>Worker will be allocated to gather further information about the alleged abuse/neglect, check all available records to find out whether any of the parties are already known, contact the victim and/or family members/next of kin/advocates if appropriate, establish an interim safety plan and update SWIFT and MASH records accordingly. Once all information has been received a SDM will create a Safeguarding Episode Form. The Safeguarding Episode Form will be used to record robust records of all discussions, risk assessments, decisions (to proceed or otherwise) and actions.</p> <p>The SDM decides if it is appropriate for the enquiry 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. The SDM considers the information in its context and the reliability of the information received. The SDM carries out an initial risk assessment and puts in place any necessary immediate protective measures. The SDM arranges advocacy/independent mental capacity advocacy/other support, as required by the adult and/or the alleged perpetrator</p> <p>If the SDM decides that safeguarding adults procedures are indicated then he/she will forward the information to the Enquiry Team who will coordinate a Strategy Meeting or (if the situation is urgent) a Strategy Discussion. The episode form will be updated on SWIFT</p> <p>Within 3 working days of the request for enquiry being received the SDM will request feedback be given to the referrer if they have not been part of the Strategy Meeting/Discussion. This does not have to disclose detail of the case, but should include the decision about management of the concern.</p> <p><u>Consent</u> 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 accepting one or more of the protective measures (complete forms MC2 )</li> <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 overriding duty of care to the adult and/or others in particular children (NB See above to make referrals to children's services</li> <li>• a crime has been or is likely to have been committed. In these situations, consent can be overridden to secure the person/other people's safety.</li> </ul>	
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			<p>The reason for overriding consent must always be recorded. See also Information Sharing Protocol.</p> <p>In Cross-boundary cases (ie where the safeguarding concern occurs within Northumberland but the individual is from another local authority area) then it is Northumberland County Council who will take the lead in the safeguarding procedures as the host authority. Where another host Authority takes the lead in their area for an individual from Northumberland, this will be recorded for information only and allocated for care management/social work support as necessary. See ADASS Out-of-Area Safeguarding Adults Arrangements June 2016 for further guidance see <a href="https://www.adass.org.uk/out-of-area-safeguarding-adult-arrangements">https://www.adass.org.uk/out-of-area-safeguarding-adult-arrangements</a></p> <p><u>Disagreement</u> Where a Referrer disagrees with the Safeguarding Manager's decision, the enquiry information is passed to the NCC Enquiry team for a second opinion. Where necessary the team will take advice from NCC's legal team. See also North Tyneside/Northumberland "Dispute Resolution, Complaints and Appeals in the Adult Safeguarding process available at <a href="http://www.northumberland.gov.uk">www.northumberland.gov.uk</a></p> <p>Where the Referrer is a member of the public, and the situation can't be resolved to their satisfaction, representation may be made via NCC's complaints procedures. In such instances, the Complaints Procedure will be followed, available at: NHCT staff: <a href="https://www.northumbria-enyware.com/policies-procedures/complaints-policy-procedure-for-raising-concerns/">https://www.northumbria-enyware.com/policies-procedures/complaints-policy-procedure-for-raising-concerns/</a> NCC staff: <a href="https://www.northumberland.gov.uk/Care/Support/Adult-services-complaints-comments-and-compliments.aspx">https://www.northumberland.gov.uk/Care/Support/Adult-services-complaints-comments-and-compliments.aspx</a> Any queries relating to complaints please email: <a href="mailto:socialcarecomplaints@northumbria-healthcare.nhs.uk">socialcarecomplaints@northumbria-healthcare.nhs.uk</a></p> <p>The Local Authority can request another agency to carry out the enquiries/investigation as required. This would be decided on a case by case basis and agreed with the relevant agency.</p>	
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			<p>The Local Authority retains overall responsibility for the enquiry and will need to know the outcome of any enquiry/investigation undertaken by another agency.</p> <p>The Local Authority has to satisfy itself that the enquiry/investigation has been adequate and can decide to undertake its own enquiry/investigation and or follow up action if it is not so satisfied.</p> <p>All agencies are expected to follow their own parallel Health &amp; Safety procedures for reporting serious accidents/ injuries/ 'untoward Incidents'</p> <p>Complaints about decisions made by Safeguarding Managers in Northumberland Tyne &amp; Wear NHS Foundation Trust (NTW) will need to be made via NTW's complaints procedures.</p> <p>Disagreements may occur between the partner safeguarding agencies at any stage throughout the safeguarding process at which point the conflict resolution policy cited above will be used as a guide. The best interests of the adult(s) at risk will always be kept central to any decisions made.</p> <p>All disagreements will be fully recorded on an episode form and in minutes of relevant safeguarding meetings. The Safeguarding Episode Form must be kept up-to-date to include details of agreed compromises (if any) and Outcomes.</p> <p><b>C) Safeguarding Adults Review Section 44</b></p> <p>Section 44 of the Care Act 2014 places a duty on the local Safeguarding Adults Board (SAB) to arrange a Safeguarding Adult Review when an adult in its area dies as a result of abuse or neglect, whether known or suspected, and there is concern that partner agencies could have worked together more effectively to protect the adult.</p> <p><b>The key criteria</b> are death or serious harm as a result of abuse or neglect, and concerns regarding how SAB members have worked together to safeguard (i.e. multi-agency rather than single-agency issues/failure).</p> <p>The overall purpose of a Safeguarding Adult Review is to promote learning and</p>	
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			<p>improve practice, not to re-investigate or to apportion blame.</p> <p><b>SAR referrals</b> - any agency can make a referral for a SAR, which will be considered by the Safeguarding Adults Review Committee (SARC), which is a multi-agency sub group of the SAB.</p> <p>Referrals to the SARC must be made via <b>Karen Wright (Strategic Safeguarding Manager)</b> on <b>01670 622127</b> or email <a href="mailto:karen.wright01@northumberland.gov.uk">karen.wright01@northumberland.gov.uk</a>.</p> <p>The decision about whether the SAR criteria has been met is for the SARC and not the Chair/Safeguarding Manager coordinating a Section 42 enquiry.</p> <p>Referrals to the SAR Committee should be made at the earliest opportunity and do not need to be accompanied by all the facts of the case.</p> <p><b>D) Information Sharing Meeting</b></p> <p>If a person dies on receipt of the safeguarding concern a Section 42 enquiry will not be considered as it can only be directly concerned with safeguarding those adults who continue to be identified as an adult at risk. In these circumstances an 'Information Sharing Meeting' will be held.</p> <p>It is possible that the Information Sharing Meeting may uncover information about the circumstances of the death which requires referral to the SARC. If information is identified that the allegations of abuse have taken place in an organisational setting and there are potential risks to others, Organisational Safeguarding procedures may need to be instigated.</p> <p><b>Note:</b> Care should be taken by the Chair/Safeguarding Manager to avoid a Section 42 enquiry encroaching into a Section 44 SAR and therefore the remit of the SARC.</p>	
6	Strategy meeting or in	Within 5 working days	In urgent 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	Safeguarding Manager

	<p>urgent cases strategy discussion</p>	<p>of the Adult Social Care receiving the referral</p>	<p>convened in more complex cases.</p> <p>The adult at risk and/or their supporter(s) (taking into account issues of mental capacity) must be invited to be part of the process. The person may decline to attend, or they may wish to send someone on their behalf. The strategy meeting should enable the adult at risk and his or her supporters to:</p> <ul style="list-style-type: none"> <li>• say what they would like as an outcome to the safeguarding process</li> <li>• say how they would like to be involved in the safeguarding process</li> </ul> <p>Safeguarding Information Packs including leaflets (an easy read version is available), safeguarding materials and a DVD are available as a resource to support people to understand what the safeguarding process is about. The Care Manager/safeguarding investigator should visit the person and/or their carer/supporter to go through the pack to ensure that they understand the process and can fully contribute their views.</p> <p>With the service user/carer/supported in attendance, the strategy meeting may need to be segmented to ensure that the confidentiality of third party information is not compromised.</p> <p>The process should however always be managed in the most person centred way possible.</p> <p>Strategy discussions/meetings can also involve any or potentially all of the multi-agency safeguarding partners</p> <ul style="list-style-type: none"> <li>• identified health and social care staff</li> <li>• the referrer/witnesses</li> <li>• care service managers/proprietors provided they are not directly implicated in the safeguarding referral</li> <li>• the Self Directed Support Team (where misuse of a Direct Payment has resulted in harm)</li> <li>• the Care Trust's Solicitor</li> <li>• the Police</li> <li>• the CQC</li> <li>• alleged perpetrators. (The meeting would need to be segmented to allow for different parties to attend). It is important that alleged perpetrators/care</li> </ul>	<p>Care Manager/ Safeguarding Report Writer</p>
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			<p>service managers/proprietors are advised of allegations made against them if this is safe to do. They do not necessarily need to attend the strategy meeting. If the police are involved then this will be their decision.</p> <p>The Enquiry Team will arrange a Minute Taker, and ensure that the content of each strategy meeting is correctly recorded using the standard template. He/she also arranges circulation of the minutes once checked and approved, within 4 weeks.</p> <p>The meeting will reach a decision about how feedback will be offered to the adult at risk (if not present) and the original Referrer NB The standard agenda and minute templates for all meetings can be found at <a href="http://www.northumberland.gov.uk/Default.aspx?page=9598">http://www.northumberland.gov.uk/Default.aspx?page=9598</a></p> <p>SWIFT entries must be kept up-to-date.</p>	Safeguarding Manager
7	Section 42 multi-agency safeguarding Investigation	Completed within 8 - 12 weeks of the strategy discussion/ Meeting	<p>The main objectives at this stage are to:</p> <ul style="list-style-type: none"> <li>• establish facts;</li> <li>• ascertain the adult's views and wishes;</li> <li>• assess the needs of the adult for protection, support and redress and how they might be met;</li> <li>• protect from the abuse and neglect, in accordance with the wishes of the adult;</li> <li>• make decisions as to what follow-up action should be taken with regard to the person or organisation responsible for the abuse or neglect; and</li> <li>• enable the adult to achieve resolution and recovery.</li> </ul> <p>The investigation will be preceded by an evaluation of the adult's wishes, feelings and mental capacity to understand the safeguarding process. Where mental capacity is assessed, an MC1 form must be completed and where a 'best interests decision' is required, an MC2 form must be completed. CHECK</p> <p>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.</p> <p>Those tasked with investigative responsibilities gather evidence to substantiate any findings, and to satisfy (if required) legal and regulatory proceedings. The results of safeguarding enquiries may also be used to inform other agency's disciplinary</p>	Investigating Officer/Risk Assessor and any other necessary supporting professionals

			<p>processes.</p> <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> <p>Where allegations of abuse or neglect concern a registered health or care service, and Regulatory breaches are suspected or fitness is in question, than the Care Quality Commission should be informed.</p> <p>Investigators are expected to produce a summary of their findings using the appropriate report template. Please refer to the Section 42 Investigation Report templates in Appendix B and C.</p> <p>Reports will be shared with the service user/care/supporter as appropriate and the Safeguarding Manager one week ahead of the safeguarding planning meeting. The service user/carer/supporter will be given a copy of the report (redacted where necessary to protect the identity of other service users or staff members) so that they can comment and bring this to the planning meeting.</p>	
8	Safeguarding Planning Meeting	Within 2 weeks of safeguarding enquiry process being completed	<p>Once an enquiry is completed, the outcome should be notified to the Safeguarding Manager who will then determine with the adult what, if any, further action is necessary and acceptable. It is for the Safeguarding Manager to determine the appropriateness of the outcome of the enquiry. One outcome of the enquiry may be the formulation of agreed action for the adult which should be recorded on their care plan. This will be the responsibility of the relevant agencies to implement.</p> <p>The outcome of the enquiry is then shared at the planning meeting and joint decisions are made about:</p> <ul style="list-style-type: none"> <li>• whether abuse/neglect should be substantiated/partly substantiated/inconclusive/unsubstantiated</li> <li>• what steps are to be taken to assure the adult's safety in future;</li> <li>• the provision of any support, treatment or therapy including on-going advocacy;</li> <li>• any modifications needed in the way services are provided (e.g. same gender care or placement; appointment of an OPG deputy);</li> <li>• how best to support the adult through any action they take to seek justice</li> </ul>	The Safeguarding Manager chairs and all involved strategy members are invited including the service user/carer and report writer

			<p>or redress;</p> <ul style="list-style-type: none"> <li>• any on-going risk management strategy as appropriate; and,</li> <li>• any action to be taken in relation to the person or organisation that has caused the concern.</li> </ul> <p>The planning meeting will agree the safeguarding plan with the adult and/or their supporters, and other agencies, with revision if necessary. It will also assess whether concerns have diminished to a point that all partners agree that the case can be closed to Safeguarding</p> <p>In cases where a service has failed to protect an adult at risk, a service remedial action plan may be required. The plan could specify a number of improvement measures, including referral of perpetrators to the Disclosure and Barring service (DBS) and/or professional registering bodies. In the case of commissioned services, action to secure contract compliance will be taken. The plan will be reviewed through the safeguarding review process until the service has achieved the specified remedy. NCC’s Solicitor and the Support Planners Team will advise on the imposition of any necessary Direct Payment conditions needed to protect an Adult at Risk.</p> <p>The Enquiry Team arranges a Minute Taker, and ensures that the content of each planning meeting is correctly recorded using the standard template. He/she also arranges circulation of the minutes once checked and approved. Please see the ‘Safeguarding Minute Takers Guidance’.</p> <p>SWIFT entries must be kept up-to-date.</p> <p>Each meeting will reach a decision about how feedback will be offered to the adult at risk (if not present) and the Referrer.</p> <p>NB The standard agenda and minute templates for all meetings can be found at <a href="http://www.northumberland.gov.uk/Care/Support/Safeguarding.aspx">http://www.northumberland.gov.uk/Care/Support/Safeguarding.aspx</a></p>	
9	Review Meeting	Approx 6 weeks after the planning meeting	<p>The review meeting will</p> <ul style="list-style-type: none"> <li>• Review what has been achieved on the Action Plan</li> <li>• Reflect on the effectiveness of the Safeguarding Plan and, if there has been a change in circumstances, set these out with a view to reassessing the</li> </ul>	Safeguarding Manager will chair

			<p>risks and adapting the Safeguarding Plan.</p> <ul style="list-style-type: none"> <li>• Assess whether concerns have diminished to a point that the partners agree that the case can be closed to Safeguarding.</li> <li>• Where the case cannot yet be closed to Safeguarding due to outstanding actions, check that the action plan is actively being expedited and there is cooperation from all partners.</li> </ul> <p>In the case of commissioned services,</p> <ol style="list-style-type: none"> <li>agree actions necessary to secure contract compliance and</li> <li>agree a communication strategy with the Care Quality Commission.</li> </ol> <ul style="list-style-type: none"> <li>• Obtain the views of the alleged victim, their carer(s) or representative(s) with regards the outcome of the safeguarding process. This should include:             <ol style="list-style-type: none"> <li>How involved the person(s) and/or their representative(s) has felt in the process?</li> <li>Whether their objective(s) has been achieved and they are happy with the outcome(s)? If not, what is still outstanding for them?</li> <li>Do they/the person they represent feel safer as a result of the safeguarding process?</li> <li>Would they like to offer any feedback about the process?</li> </ol> </li> <li>• Agree venue, date and time of next meeting if needed</li> </ul> <p>NB The standard agenda and minute templates for all meetings can be found at <a href="http://www.northumberland.gov.uk/Default.aspx?page=9598">http://www.northumberland.gov.uk/Default.aspx?page=9598</a></p>	
10	Monitoring and lessons learned	When applicable	<p>Safeguarding Adults Boards (SABs) must arrange a Safeguarding Adult Review (SAR) when an adult in its area dies as a result of abuse or neglect, whether known or suspected, and there is concern that partner agencies could have worked more effectively to protect the adult.</p> <p>Please refer to <b>Safeguarding Adults Review Section 44</b> in Step 5, for further information.</p> <p>Any learning from SARs will be monitored by the Safeguarding Adult Review Committee which is a joint Northumberland &amp; North Tyneside Sub Group of the SAB, and disseminated through the Joint Training Sub Group. See North of Tyne Safeguarding Adult Review Policy available at:  <a href="http://www.northumberland.gov.uk/Care/Support/Safeguarding.aspx">http://www.northumberland.gov.uk/Care/Support/Safeguarding.aspx</a></p>	<p>Safeguarding Adults Board</p> <p>Safeguarding Adults Review Committee</p>

			<b>The inter-agency safeguarding policy and procedural guidance will be reviewed and updated annually.</b>	
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**Appendix A:** The stages of a Safeguarding Adult Enquiry

**Safeguarding Adults Alert**

A Safeguarding Adults Alert is raised to tell us that harm is suspected or is happening



Information is gathered and the person is asked about what they want to happen. Immediate measures are put in place to keep the person(s) safe

Within 24 hours: A **Safeguarding Decision** is made by Adult Social Care The Decision Maker in Adult Social Care decides whether the alert needs to be considered as an **ENQUIRY**. This may be recorded as an **ADULT CONCERN NOTIFICATION** or progress to a SECTION 42 MULTI-AGENCY SAFEGUARDING ENQUIRY



### **For SECTION 42 MULTI-AGENCY ENQUIRIES/INVESTIGATION**

Up to 5 days after the alert is raised a Strategy Meeting/Discussion is held

At the **Strategy Meeting/Discussion** the alert is discussed and plans made to protect the person(s). An investigation is commissioned and an assessment of the risks identified by the alert.



8 - 12 weeks after the Strategy Meeting a **Planning meeting** will be held

At the Planning Meeting the actions agreed at the Strategy meeting are discussed and reviewed. A protection plan is put in place to keep the person(s) safe. The outcomes of the enquiry/investigation are shared and the adult is asked whether the outcomes they wanted have been met, and whether another meeting is needed



6 weeks after the Planning Meeting a **Review Meeting** will be held

The Review Meeting checks that the actions agreed have been done and that these have reduced the risks, if the person now feels safe, if there is anything else that needs to be done to protect the person(s), how satisfied the person(s) is with the outcomes and whether another meeting is needed.

## **Appendix B: Section 42: Multi Agency Enquiry (Investigation Report)**

**Service user:**

**SWIFT/RIO NUMBER:**

or

**Service:**

**Report Author:**

**Job Title/Position:**

**Date of Report:**

**Number of Appendices attached:**

Item	
1.	<b>Date, Time and Venue of Safeguarding Adults Meeting</b>
2.	<b>Initial Alert</b>
3.	<b>Terms of Reference as agreed at Strategy meeting</b>
4.	<b>Background and Experience of the Report Author(s)</b>

<b>5.</b>	<p><b>Details of Adult at Risk of Abuse – to include</b></p> <ul style="list-style-type: none"> <li>● A brief pen picture/history</li> <li>● Assessment of capacity relating to the safeguarding process</li> <li>● The views of the adult at risk and their family/representative(s) regarding the safeguarding concerns</li> <li>● The expected outcomes for the adult at risk/their representative(s) (eg what do they hope to achieve through this process?)</li> </ul>
<b>6.</b>	<p><b>Information Sources, Methodology and Findings</b></p>
<b>7.</b>	<p><b>Conclusion(s) of the Investigation</b></p>
<b>8.</b>	<p><b>Further Assurance(s) Required</b></p>
<b>9.</b>	<p><b>Appendices</b></p>