

Safeguarding Adults

Safeguarding Principles and the approach for South Yorkshire



This document contains the key overarching principles to which the 4 local authority areas will work. This document is further underpinned by Local Guidance and Procedures for operational teams. Each Local Authority will develop their own policy and procedures which sit under the principles.

Document Version Control

This document replaces all previous versions of the South Yorkshire Procedures.

Document Version Control

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1. Scope of the Document

This document focuses on safeguarding adults in relation to The Care Act 2014. The Care Act is the most significant change in social care law for 60 years. It applies to England and replaces a host of out-of-date and often confusing care laws and for the first-time places safeguarding adults on a legal footing.

This high-level adult safeguarding document outlines the principles, themes and approach to be taken when working with adults (age 18 and over) who may be or are at risk from abuse and neglect. It focuses on people whose situation meets **The Care Act safeguarding enquiry duties (section 42)** which apply to an adult who:

- has needs for care and support (whether or not the local authority is meeting any of those needs) and;
- is experiencing, or at risk of, abuse and neglect and;
- 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.

However, it is also important to state that where safeguarding concerns are raised and do not meet the above criteria there may be other avenues of advice, information, guidance and support that may be available through Section 1 of the Care Act 'Promoting Wellbeing' and or Section 14.44 which states...

'Local authorities may choose to undertake safeguarding enquiries for people where there is not a section 42 enquiry duty, if the local authority believes it is proportionate to do so, and will enable the local authority to promote the person's wellbeing and support a preventative agenda'.

Each Local Authority will set out how these other avenues of enquiry, support and protection operates in their area.

Other key sections of The Care Act specifically relating to safeguarding duties include: section 43 Safeguarding Adult Boards; section 44 Safeguarding Adult Reviews and section 45 Supply of information to support the function of safeguarding Adult Boards.

Further reading can be found at:

<http://www.legislation.gov.uk/ukpga/2014/23/section/42>

This document should be read in conjunction with each individual local authority's adult safeguarding procedures and practice guidance which provide the detail around local multiagency arrangements for safeguarding adults. It does not seek to prescribe processes but instead provides a positive and rounded view of how to approach working with adults who maybe or are experiencing abuse and neglect.

The Care Act Statutory guidance goes into considerable further detail and can be found by following the link:

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

Who is the document intended for?

This document is intended for people working in Safeguarding Partner agencies and organisations across South Yorkshire, specifically, Barnsley, Doncaster, Rotherham and Sheffield. It is a public document and is publicly available through each local Safeguarding Adults Partnership.

Why is Safeguarding Important?

Adult safeguarding means protecting people's right to live in safety, free from abuse and neglect. It applies to adults with care and support needs who may not be able to protect themselves. Action to safeguard adults should include:

- promoting well-being and prevent abuse and neglect from happening in the first place;
- ensuring the safety and wellbeing of anyone who has been subject to abuse or neglect;
- taking action against those responsible for abuse or neglect taking place;
- learning lessons and making changes that could prevent similar abuse or neglect happening to other people.

2. Introduction

Adult safeguarding within each local authority should seek to respond to concerns about abuse in a way that is sensitive to individual circumstances, is person centred and outcome focused. There may be pathways and processes to follow but these should not deter people from adopting common sense and proportionate approaches that put the individual at the heart of their work.

Although the responsibility for the coordination of adult safeguarding arrangements lies with local authorities, the implementation of these high-level principles and approach, as well as adhering to local safeguarding procedures, is a collaborative responsibility and in most cases effective work should be based on a multi-agency approach.

It should not be forgotten that abuse and neglect can have a dramatic effect on an individual's wellbeing, on:

- personal dignity;
- physical and mental health and emotional wellbeing;
- control by the individual over their day to day life;
- participation in work, education, training;
- suitability of the persons living accommodation;
- participation and contribution to society.

It is therefore vital that everyone plays a key role in identifying, reporting, tackling and preventing abuse and neglect.

3. Safeguarding Principles

During this decade there has been a greater emphasis on ensuring that any work in relation to safeguarding adopts a more personalised approach to working with children and adults. There has been a focus on listening to and hearing the voice of adults and taking into consideration their views and wishes.

Within adult safeguarding there have been some significant drivers to promote personalised ways of working: For example, **six key principles** that underpin safeguarding adults work, as previously set out in the 'Statement of Government Policy on Adult Safeguarding' (Department of Health (DoH), May 2013). The principles are enshrined in an approach called Making Safeguarding Personal (MSP), a sector led initiative sponsored by the Local Government Association which aims to support people to improve or resolve their circumstances with a focus on personalised outcomes rather than just 'investigation' and 'conclusion'.

Making safeguarding personal means Safeguarding adults should be person-led and outcome-focused (what the adult would like us to help them with to reduce the risk and make them feel safer). It engages the adult in a conversation about how best to respond to their safeguarding situation in a way that enhances involvement, choice and control as well as improving quality of life, wellbeing and safety.

The six principles apply to all sectors and settings including care and support services, the principles should inform the ways in which professionals and other staff work with adults. The principles can also help SABs, and organisations more widely, by using them to examine and improve their local arrangements.

The Six Key Principles of Adult Safeguarding

Empowerment	People being supported and encouraged to make their own decisions and informed consent	<i>"I am asked what I want as the outcomes from the safeguarding process and these directly informs what happens"</i>
Prevention	It is better to act before harm occurs	<i>"I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help"</i>
Proportionality	The least intrusive response appropriate to the risk presented	<i>"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"</i>

Protection	Support and representation for those in greatest need	<i>"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"</i>
Partnership	Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.	<i>"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"</i>
Accountability	Accountability and transparency in delivering safeguarding	<i>"I understand the role of everyone involved in my life and so, do they"</i>

In addition to these principles, it is also important that all safeguarding partners take a broad community approach to establishing safeguarding arrangements. It is vital that all organisations recognise that adult safeguarding arrangements need to ensure that due regard is made to people's capacity to make decisions about their safety and that if people are assessed as not having capacity decisions will need to be made in their best interests. Where people are viewed as having capacity organisations need to further recognise that their decision making may be impacted by coercion from others and needs to be considered when supporting them to make choices. As adults we all have different preferences, histories, circumstances and life-styles, so it is unhelpful to prescribe a process that must be followed whenever a concern is raised.

Adult safeguarding is a dynamic interaction that must be undertaken *with* people and not done *to* people. The six principles should be adopted throughout when working with individuals and be considered as part of a natural approach.

The emphasis is on developing and sustaining a safeguarding culture which moves away from 'processes supported by conversations' to a 'series of conversations supported by a process'.

Making Safeguarding Personal Guide 2014 (Local Government Association).

<https://www.local.gov.uk/topics/social-care-health-and-integration/adult-socialcare/makingsafeguarding-personal>

4. Abuse and Neglect

The Care Act 2014 identifies several different types and patterns of abuse and neglect and the circumstances in which they may take place.

It is important to note that professionals should not limit their view on what constitutes abuse or neglect, as they can take many forms and the circumstances and wishes of the individual must always be considered.

Incidents of abuse may be one-off or multiple and affect one person or more.

Types of abuse highlighted in The Care Act include:

- Physical Abuse
- Domestic violence or abuse
- Sexual abuse
- Psychological abuse
- Financial or material abuse
- Modern slavery
- Discriminatory abuse
- Organisational or institutional abuse
- Neglect and acts of omission
- Self-neglect

Self-Neglect and Hoarding

The Care Act 2014 sets out the requirements for partners to cooperate in cases where the wellbeing of an individual is threatened by self-neglect (including hoarding).

The South Yorkshire Safeguarding Adults Boards support adoption of the principles identified in research and learning from local and national Safeguarding Adults Reviews.

- Person centred/relationship-based work with the adult, empowering them to address the issues that led to the self-neglect and/or hoarding
- Persistent and long-term commitment to the adult, even if the adult initially refuses all offers of help and support
- Partnership working, irrespective of the adult's eligibility for service to maximise the impact of the interventions offered
- Involvement of family and friends to enhance our knowledge of the adult and what strategies might help resolve the risks
- Shared accountability for management of the risks and a clear escalation and closure process within and across organisations
- The Care and Support statutory guidance notes that self-neglect may not prompt a section 42 enquiry. "An assessment should be made on a case-by-case basis. A decision on whether a response is required under safeguarding will depend on the adult's ability to protect themselves by controlling their own behaviour. There may come a point when they are no longer able to do this, without external support."
- Normally the decision to carry out a S42 enquiry should only be made with the consent of the adult concerned. "However, there may be circumstances

when consent cannot be obtained because the adult lacks the capacity to give it, but it is in their best interests to undertake an enquiry. Whether or not the adult has capacity to give consent, action may need to be taken if others are or will be put at risk if nothing is done or where it is in the public interest to take action because a criminal offence has occurred.”

- If decisions are to be made on behalf of an adult who is assessed as lacking capacity to make that decision, they must be made in the best interest of the adult and the involvement of an independent advocate must be considered where there is no other relevant person to advocate on behalf of the adult at risk.

Local policies will offer additional guidance about how self-neglect and hoarding cases will be managed, this may include

- Single agency response
- Safeguarding enquiry (S42)
- Multi agency response linked to a local policy
- Use of the Mental Capacity Act/Best Interests decisions

Indicators of Abuse or Neglect

This document contains some indicators of abuse or neglect when considering Safeguarding Adults



Possible Indicators of Abuse.docx

For a fuller account of the types and indicators of abuse and neglect refer to your local safeguarding procedures and /or follow the link below:

<https://www.scie.org.uk/publications/atagance/69-adults-safeguarding-types-and-indicators-of-abuse.asp>

Other specific areas to be considered which may relate to some of the types of abuse listed above where people have care and support needs and may be targeted include: female genital mutilation, hate and mate crime, honour-based violence and crimes including forced marriage, Exploitation by Radicalisers who Promote Violence (Prevent), exploitation by gangs (county lines- which may include involvement in criminal activity, sexual exploitation, trafficking, links to modern slavery).

It is also worth highlighting the Deprivation of Liberty Safeguards (amendments made to the Mental Capacity Act 2005 via the Mental Health Act 2007) and although not specifically part of The Care Act, represents a key part of overall practice. Deprivation of Liberty Safeguards focus on ensuring that adults who are deemed to lack capacity in specific areas and are deprived of their liberty (e.g. deciding where to live and around care and support arrangements) are able to continue to live safe and fulfilling lives, that enables least restrictive care and support options to be realised which are in line with personal dignity and human rights and deemed to be in their best interests.

Patterns of Abuse

Patterns of abuse vary and reflect very different dynamics. These include:

Serial abuse in which the source of harm seeks out and 'grooms' individuals. Sexual exploitation sometimes falls into this pattern as do some forms of financial abuse;

Long-term abuse in the context of an on-going family relationship such as domestic violence between spouses or generations or persistent psychological abuse; or **Opportunistic abuse** such as theft.

Who abuses and neglects adults?

Anyone can abuse or neglect adults including:

- Spouses/partners.
- Other family members.
- Neighbours.
- Friends.
- Acquaintances.
- Local residents.
- People who deliberately exploit adults they perceive as vulnerable to abuse.
- Paid staff or professionals and Volunteers and strangers.

Organisational abuse

Is the mistreatment, abuse or neglect of an adult(s) by a regime or individuals in a setting or service where the adult(s) lives or that they use. Such abuse violates the person's dignity and represents a lack of respect for their human rights. It is often identified by repeated incidents of poor practice and is often linked to lack of appropriate management oversight, supervision, policies and training. These concerns may be identified by commissioners who need to have very clear processes to share relevant information with safeguarding colleagues to support joint action, if appropriate, to safeguard the adults and to improve the quality and safety of the service

Organisational safeguarding enquiries will not prevent individual safeguarding enquiries for the adults affected by the abuse and local guidance should be used to establish how these parallel enquiries will be managed.

People causing harm who are employed in Positions of Trust (PiPoT)

Adults are likely at some point in their life to be supported by people who may provide a range of personal care, advice, guidance, enablement, transport etc. Whilst the majority of these interactions are going to be positive and bring about good outcomes there will unfortunately, be occasions when people are abused or neglected by the people who are supposed to be supporting or working with them. Each safeguarding partnership should have procedures / protocols and mechanisms in place to respond to issues relating to people in positions of trust.

The four South Yorkshire Safeguarding Adults Board endorse the following principles, which do not replace any local policies or guidance

Definition of a Person in a Position of Trust (PIPOT) - a worker or volunteer, in any setting (including their private lives) who has

- ✓ Behaved in a way that has harmed or may have harmed an adult with care and support needs.
- ✓ Possibly committed a criminal offence against or related to an adult with care and support needs.
- ✓ Behaved towards an adult with care and support needs in a way that indicates s/he is unsuitable to work with adults with care and support needs.
- ✓ Behaved in a way that has harmed children or may have harmed children which means their ability to provide care or other service to adults with care and support needs must be reviewed.
- ✓ May be subject to abuse themselves and this may mean their ability to provide a service to adults with care and support needs must be reviewed.
- ✓ Behaved in a way which questions their ability to provide a service to an adult with care and support needs which must be reviewed e.g. conviction for grievous bodily harm against an adult who does not have care and support needs.

What authority do we have to investigate PIPOT concerns?

- ✓ The Care Act (2014) requires Safeguarding Adults Boards to develop a process to manage PIPOT concerns

What should I do if I identify PIPOT concerns?

- ✓ Share with your named PIPOT lead, if unsure who this is discuss with a senior manager. Do not share any information with the alleged PIPOT.
- ✓ If an adult with care and support needs has been harmed or is at risk of harm take any immediate actions to reduce the risk of harm if possible and send a safeguarding concern into Adult Social Care or relevant front door.
- ✓ Refuse any requests by the alleged PIPOT to resign from paid employment (taking advice from HR colleagues, if required)
- ✓ Consider if a referral to the DBS is required at this time. (page 6)

Who will need safeguarding?

Any adult (aged 18 or over) who:

- ✓ has needs for care and support (whether the local authority is meeting any of those needs or not)
- ✓ is experiencing, or at risk of abuse or neglect
- ✓ as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse and neglect.

What happens if children have been harmed or are at risk of harm as well as adults?

- ✓ If necessary, advice should be taken from the Local Authority Designated Officer (LADO) who manages concerns about workers and volunteers working with children. The LADO will provide support to manage any enquiries
- ✓ A referral should be made to Children's Social care to support an assessment of the needs of the child(ren)

How will the allegation be investigated?

- ✓ Existing processes will be used – disciplinary, criminal, safeguarding, LADO etc.
- ✓ If more than one investigation process is required, e.g. – disciplinary, criminal and safeguarding a planning meeting will be coordinated to address all the issues relating to the case.
- ✓ Robust records must be kept.

What happens if the allegations are substantiated?

- ✓ If appropriate a right of reply must be supported – e.g. via disciplinary, criminal or safeguarding processes.
- ✓ Referrals should be made to the Disclosure and Barring Service
- ✓ Referrals to appropriate professional body – e.g. Nursing and Midwifery Council
- ✓ Appropriate disciplinary action should be taken in line with internal policy
- ✓ Alleged source of harm details should be recorded by Adult Social Care

What happens if the allegations are malicious?

- ✓ Records and evidence must be kept showing that a robust enquiry has been completed that exonerates the PIPOT/Alleged source of harm

Who else will be told about the allegation?

- ✓ Information will be shared to protect the adult and to make sure a robust enquiry is completed
- ✓ Information about PIPOT activity will be maintained and shared in line with local policy
- ✓ Regulators, if appropriate, e.g. Care Quality Commission (CQC)

Where does abuse take place?

Abuse can happen anywhere: for example, in someone's own home, in a public place, in hospital, in a care home or in college. It can take place when an adult lives alone or lives with others.

While a lot of attention is paid, for example to targeted fraud or internet scams perpetrated by complete strangers, it is far more likely that the person responsible for abuse is known to the adult and is in a position of trust and power.

Where abuse or neglect and poor practise is takes place within an institution or specific care setting such as a hospital or care home *or sometimes within someone's own home* this is known as Organisational abuse (sometimes referred to as institutional abuse). The 4 Safeguarding Adult Boards in South Yorkshire are

committed to preventing harm to adults at risk by holding partners to account and monitoring commissioned services. If harm or abuse occurs, we expect all relevant partners (health and social care providers, commissioners and regulators) to work collaboratively to assess and mitigate the risks to adults receiving support or care.

What is Organisational Abuse

Organisational abuse can range from a one-off incident to on-going ill-treatment. It may be through neglect or poor professional practise because of structure, policies or practises within an organisation. It is covered in the following regulations:

- Regulation 13: Safeguarding Service Users from Abuse and Improper Treatment of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.
- The statutory guidance for the Care Act 2014 (Chapter 14: Safeguarding), which describes the duties and responsibilities of local authorities and its partner organisations to protect adults with care and support needs from abuse, neglect, and other sources of harm.

Concerns may arise due to issues about:

1. Management and Leadership
2. Staff skills, knowledge or practise
3. Resident's behaviours and wellbeing
4. Resistance to involvement by external people and isolating individuals
5. How services are planned and delivered
6. The quality of basic care and the environment

Potential Indicators of Organisational Abuse

- Run-down or poor facilities with unsafe, unhygienic or over-crowded facilities
- Abusive or disrespectful attitudes towards people using services including inappropriate use of power and control
- Lack of respect for dignity and privacy
- Not providing adequate food or drink or assistance with eating
- No flexibility or lack of choice in relation to daily routines and diet
- Not promoting independence
- Misuse of medication
- Tasks not being completed on time or correctly – people left on a commode or toilet for long periods
- Poor moving and handling practices
- Lack of care plans or individualisation of care plans
- Poor record-keeping and lack of procedures
- High staff turnover resulting in poor quality care
- Failure to provide care with dentures, glasses and hearing aids
- Discouraging/refusing visits or involvement of relatives, friends or carers
- Lack of personal items, clothing or possessions

- A lack of stimulation with few social, recreational and educational activities
- Lack of respect for religion, belief or cultural backgrounds
- Illegal confinements, restrictions or inappropriate interventions
- More obvious signs of abuse including cuts and bruises

An Organisational Abuse Enquiry may be as a result of

Repeated incidents of poor care/neglect including medication errors, missed calls, moving and handling issues, poor management of skin integrity, denial of visits by family and friends.

- An inability or unwillingness to implement changes agreed with commissioners and/or regulators, especially when this has involved enforcement action by either or both.
- Several safeguarding concerns involving adults in receipt of support from the service.
- Significant harm to one or more adult in receipt of service.
- A combination of the above

Principles for carrying out an Organisational Abuse Enquiry

- Adults and their representatives must be supported to contribute to the enquiry with consideration of the need for independent advocates. They should be kept up to date on the progress and findings of the enquiry.
- A protection plan to reduce the risk of further harm or abuse will be implemented immediately in agreement with affected individuals.
- The Care Act six key principles of safeguarding will be followed
- Multi-agency knowledge, skills and information sharing are essential for best practise, sound decision making and securing the best outcome for the adults involved and therefore involved partners from a range of agencies are required to be involved in the enquiry with agreed roles and responsibilities.
- Sharing information in line with legislation to equip all organisations to reduce the risk of further harm and to address the “root” causes of the issues. Data shared must be shared securely in a timely manner.
- A joint enquiry plan and action plan will be agreed and delivered by all partners and recorded within Adult Social Care.
- All details and actions must be recorded and communicated securely and accurately in line with information governance policies.
- Consideration will need to be given over the degree of strategic oversight needed by any enquiry depending on the degree, severity and complexity of the safeguarding enquiry.
- Whistle-blowers will be provided with support and protection through the process.
- Arrangements will be made for ongoing monitoring by commissioners and regulators including of an agreed action plan for improvement.

Support

If you are concerned about a service speak to your Local Authority. You can also contact the Care Quality Commission (CQC) if your concern is in relation to a registered care provider.

5. The Approach

After identifying that abuse or neglect may have occurred the process will usually include the individual raising a concern to the Local Authority (see key contacts at the end of this document), the Local Authority deciding if the concern reaches the threshold for a safeguarding enquiry and implementing any necessary safeguarding plans to reduce risk and support the adult to be as safe as possible. Preventing and tackling abuse and neglect should be a dynamic process which is flexible to include the needs and wishes of the adult(s) concerned.

The approach required to be taken on safeguarding is governed by the Care Act, the supporting Care and Support Statutory Guidance and principles and themes outlined previously in this document which are underpinned by Making Safeguarding Personal.

It is important to involve the person as soon as safeguarding adults' concerns are established to ensure their views, wishes and desired outcomes are included throughout the process to embrace the spirit of Making Safeguarding Personal. These views should directly inform what happens next. Safeguarding is an approach to establish the outcomes a person wants at the point the concern is raised by working with the adult to establish how those outcomes can best be achieved.

Organisations should have policies and procedures in place that are in line with a Making Safeguarding Personal approach and develop person-centred approaches to working with risk.

Organisations should always promote the adult's wellbeing in their safeguarding arrangements. People have complex lives and being safe is only one of the things they want for themselves. Professionals should work with the adult to establish what being safe means to them and how that can be best achieved. Professionals and other staff should not be advocating 'safety' measures that do not take account of individual well-being. Professionals and other staff may want to consider the role they can play in embedding the 'Making Safeguarding Personal' approach and what skills and support they need to enable this shift in culture.

The national programme Making Safeguarding Personal has aimed to promote a shift in culture and practice in response to what we know about what makes safeguarding more or less effective from the perspective of the person being safeguarded.

Taking a more creative approach to responding to safeguarding situations may help to resolve situations more satisfactorily and possibly more cost effectively. The objective of the Making Safeguarding Personal toolkit (see link below) is to provide a resource that encourages councils and their partners to develop a portfolio of responses they can offer to people who have experienced harm and abuse so that they are empowered and their outcomes are improved.

[making-safeguarding-personal_a-toolkit-for-responses](#)

5.1 Identifying and Raising a Safeguarding Concern - Some of the issues to be considered:

Safeguarding Concern	What Individuals Should Expect
<p>The safeguarding enquiry duties (section 42) apply to an adult who:</p> <ul style="list-style-type: none"> • Has needs for care and support (whether or not the local authority is meeting any of those needs) and • is experiencing, or at risk of, abuse and neglect and • as a result of those care and support needs are unable to protect themselves from either the risk of, or the experience of abuse or neglect <p>Identification of abuse or neglect. (including self-neglect and/or hoarding)</p> <p>Immediate safety needs are met.</p> <p>Gain the views, consent and desired outcomes.</p> <p>Concern is referred into the local safeguarding arrangements.</p> <p>Checks made and additional information gathered.</p> <p>Provision of information and advice and signposting.</p> <p>Decision made whether The Care Act S42 Duty of Enquiry is triggered.</p>	<p>I get clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help.</p> <p>I get help and support to report abuse or neglect.</p> <p>I have access to the right information when I need it.</p> <p>I am asked my opinion if people around me think that I am at risk.</p> <p>Wherever it is safe to do so, I am spoken to and I am able to discuss what information is shared, who with and why.</p>

Note: local safeguarding procedures may go into more detail and include additional actions and expectations.

Good Practice when raising a concern:

Where a concern needs to be raised it should be done by the person who believes that abuse may be occurring and the raising of the concern should not be delegated to another person, body or agency.

People raising a concern may become aware of possible abuse when they:

- witness an abusive act;
- are told about abuse by someone else;
- are told about abuse by the service user;
- find evidence of abuse;
- recognise several of the risk indicators and become concerned that there
- is a high risk of abuse

The primary responsibility for agencies and/or professionals who becomes aware of any abuse is to seek to make the situation as safe as possible for the adult and to take steps to prevent any imminent abuse. Where appropriate, it may be necessary to call 999 for emergency services if there is a medical emergency, other risk to life or risk of imminent injury, or if a crime is in progress.

It is important that consideration be given to whether the concern being raised is done so in line with the Care Act Criteria as identified in the table on page 12.

Safeguarding concerns and processes should not be used as a substitute for:

- Providers' responsibilities to provide safe and high-quality care and support;
- Commissioners regularly assuring themselves of the safety and effectiveness of commissioned services;
- The Care Quality Commission (CQC) ensuring that regulated providers comply with the fundamental standards of care or by taking enforcement action;

All CQC regulated services should also note their support of use of the local decision support guidance

CQC support the use of local decision support guidance by regulated services, if available, to inform their decision to submit an adult safeguarding concern. At the time of referral regulated services must also fulfil their responsibility to submit a Statutory Notification 18 (e) to the CQC. Records must be retained of the decision making and be made available to CQC or commissioning bodies visiting the service.

Wherever possible, the adult should be consulted about the next steps and especially if this relates to referring a safeguarding concern to the Local Authority. The individual or professional, however, may still be able to raise a concern where consent has not been gained in certain situations such as:

- It is in the public interest e.g. there is a risk to other ‘adults at risk’; or the concern is about organisational or systemic abuse; or the concern or allegation of abuse relates to the conduct of an employee or volunteer providing services to adults at risk or children; or the abuse or neglect has occurred on property owned or managed by an organisation with a responsibility to provide care.
- The adult lacks mental capacity to consent and a decision is made to raise a safeguarding concern in the adult’s best interests (Mental Capacity Act 2005);
- An adult is subject to coercion or undue influence, to the extent that they are unable to give consent;
- In serious situations in order to prevent serious harm occurring. In cases of self-neglect where the adult is at serious risk of harm we may need to make a referral without consent to inform a multi-agency risk assessment to address the risks. Ideally this should be communicated to the adult

In the interests of transparency, in such situations it would still be good practice to ensure that person or representative are made aware that the concerns identified have been referred to the local authority and the reasons for doing this. Further information for referrers of Adult Safeguarding are available at Appendix 3.

As previously mentioned, it should be recognised that every individual’s situation is unique. Whilst the Care Act Section 42 criteria for safeguarding is the core focus, there will be occasions where people are deemed not to have care and support needs (e.g. do not meet The Care Act criteria for care and support needs) but these people with lower level needs may be vulnerable to exploitation, abuse and neglect. It is therefore down to each local partnership to work together to best support some of those people through other avenues of preventative support at their discretion.

5.2 Undertaking Enquiries

The purpose of the enquiry is to decide whether the local authority or another organisation, or person, should do something to help and protect the adult.

The local authority retains the responsibility for ensuring that the enquiry is referred to the right place and is acted upon. The local authority may require / cause others to undertake an enquiry depending on the specific circumstances and local partnership arrangements e.g. a local care and support provider, delegating safeguarding functions to a mental health trust. However, the local authority should receive assurance that the enquiry has been undertaken in line with section 42 duties and any actions undertaken (if any) helped protect the adult.

Where a crime is suspected and referred to the Police, the Police must lead the criminal investigation with relevant support from the Local Authority and any appropriate partners.



Other processes may also be undertaken alongside an enquiry, these include:

‘One Size Fits All?’

As people’s individual circumstances differ, and situations can change it is important that any safeguarding work enables innovation and does not constrain workers from doing what they feel is the right course of action to take with and alongside the individual and other partners (where appropriate). This includes exiting safeguarding

children services have previously been involved in relation to related issues of support or concern, it may be appropriate to invite representatives from children services to attend Strategy Meetings in order to advise on relevant issues.

2.11 Prisons and approved premises

Local authority statutory adult safeguarding duties apply to those adults with care and support needs regardless of setting, other than prisons and approved premises where prison governors and National Offender Management Service (NOMS) have responsibility. Separate guidance for prisons and probation will be published by the National Offender Management Service.

Where a local authority is made aware that an adult in a custodial setting may have care and support needs, they must carry out a needs assessment as they would for someone in the community. If someone in a custodial setting refuses a needs assessment the local authority is not required to carry out the assessment, subject to the same conditions as in the community.

This does not apply if:

- the person lacks the capacity to refuse and the local authority believes that the assessment will be in their best interests; or
- the person is experiencing, or is at risk of, abuse or neglect

If, in the course of their assessment of a person living in a prison or approved premises, it becomes apparent to local authority staff (or those delegated to undertake needs assessments on behalf of the local authority) that the person is at risk of abuse or neglect, the assessor must report this to the management of the prison or approved premises who will lead on any enquiries required.¹⁰

Local authority staff (or those delegated to undertake needs assessments on behalf of the local authority) must follow the safeguarding policies and procedures of custodial settings in their area.

Local authority staff (or those delegated to undertake needs assessments on behalf of the local authority) should address any safeguarding issues in the care and support plan. This means they will have to liaise with the prison or probation staff about any required actions identified by their enquiries to ensure that all people in custodial settings are safeguarded.

Prison and probation staff may approach the local authority for advice and assistance in individual cases although the local authority will not have the legal duty to lead enquiries in any custodial setting.

Senior representatives of prisons and the National Probation Service, who have responsibility for approved premises may sit on the safeguarding adults board and play an important role in the strategic development of adult safeguarding locally. The Safeguarding Adults Board can act as a forum for members to exchange advice and expertise to assist prison and probation staff in ensuring that all people in custodial settings are safeguarded.

- Something the adult at risk has disclosed to you.
- Something you have been told by the adult themselves, or someone else.
- Something you have witnessed for yourself, or you may have concerns how the adult at risk is being treated by someone else.
- The ability of the adult to act to protect themselves from future harm.
- An adult who is putting themselves at risk of harm by their own actions regardless of the reasons for them.

How do you know if the adult has care and support needs?

Safeguarding duties apply regardless of whether an adult's care and support needs are being met. Adults may need a mixture of practical, financial and emotional support. They may need extra help to manage their lives and be independent – including older people, people with a disability or long-term illness, people with mental health problems, and carers. Care and support includes assessment of people's needs, provision of services and the allocation of funds to enable a person to purchase their own care and support. It could include care homes, home care, personal assistants, day services, or the provision of aids and adaptations.

How do you know if the adult is experiencing, or at risk of, abuse and neglect?

Abuse may be carried out by anyone who has power over another person, which may include family members, friends, unpaid carers and health or social care workers. It can take various forms, including physical harm or neglect, verbal, emotional or sexual abuse. Adults at risk can also be the victim of financial abuse from people they trust. Abuse may be carried out by individuals or by the organisation that employs them. Abuse may occur even if it is unintentional.

An adult may be neglected by not being given the care and support they need, if they are unable to care for themselves. It may include not being given enough food, or the right kind of food, being left without help to wash or change clothes, or not being helped to see a doctor when there is a need to. However, it must be considered that adults who are neglecting themselves may need help.

Should you ask the adult's consent before raising your concerns?

The adult should experience the safeguarding process as empowering and supportive. Wherever practicable seek the consent of the adult before acting. However, there may be circumstances when consent cannot be obtained because the adult lacks the capacity to give it, but it is in their best interests to raise a concern. Whether or not the adult has capacity to give consent, action may need to be taken if others are or will be put at risk if nothing is done or where it is in the public interest to act i.e. because a criminal offence has occurred.

You should not seek consent to share information if doing so would:

- Place a child at increased risk of significant harm.
- Place an adult at increased risk of serious harm.
- Prejudice the prevention, detection or prosecution of a serious crime

- Lead to unjustified delay in making enquiries about significant harm or serious harm.

Concerns should be reported immediately where the matter is serious or urgent. If you are not sure whether you should raise a safeguarding concern, you should seek advice within your organisation if you are a professional or with the local authority themselves.

How will adults experience safeguarding and what difference will it make?

- Safeguarding work, involves a range of responses to support adults to improve or resolve their circumstances.
- Adults will be worked with and supported throughout the safeguarding process to achieve the outcomes they want to see.
- It can help adults to feel safer.
- It can make adults feel empowered and in control
- It uses an approach that helps adults to identify their strengths and support networks.

The actions taken to keep an adult safe should include respecting their wishes and protecting and respecting their rights, although assurances of confidentiality cannot be given. Wherever possible the adult should be involved in decisions about what they want to do at the outset of raising any Safeguarding concern about what they want to change and what support they need to achieve that.

Key Messages

- All concerns should be taken seriously, as should the responsibility to act.
- It is the responsibility of all staff and members of the public to act on any suspicion or evidence of abuse or neglect and to pass on their concerns to an appropriate responsible person or authority.
- Take immediate actions, wherever possible, to ensure the adult at risk is safe from imminent abuse or neglect.
- If a crime needs to be reported? (dial 101 unless there is an immediate risk, in which case dial 999) Be aware of the possible need to preserve forensic evidence.
- If urgent medical attention or an ambulance is required? (dial 999)
- Professionals should consider their requirements to inform any professional regulators i.e. contractors or the Care Quality Commission where concerns are raised.
- Employers should consider what immediate action they may need to take in order to keep adults safe, where the source of harm is alleged to be an employee in a position of trust that they are responsible for.
- It is good practice to try to gain the adults consent to share information about them if it does not increase risk. Adults should be informed if their information needs to be shared without consent, where it is safe to do so.
- Reassure the adult that they will be involved in decisions about them.
- Sometimes it will be necessary to raise a concern even if this is contrary to the wishes of the adult at risk i.e.

- If other people appear to be at risk of harm (adults or children)
- Where there is concern that an individual or organisation could harm others.
- If there is a 'legal restriction' or an overriding public interest.
- If the adult is exposed to life threatening risk and they are unreasonably withholding their consent.
- If the adult has impaired capacity or decision making in relation to the safeguarding issues and the withholding of consent places them at undue risk.
- Where there is undue influence or control over the person to prevent them from giving informed consent.

What is the purpose of raising a concern?

- To support the adult to keep them safe now and in the future and to lead the life of their choice.
- To share information about risk so that the local authority or others can decide on the next actions that might be needed.

What further information may be helpful when raising concerns?

When raising concerns, where possible, provide the following information:

1. Your details although anonymous referrals will be acted upon.
2. Details of the adult(s) at risk
3. Details of the person causing the harm (if known)
4. Any immediate actions that have been taken to keep the adult safe i.e. emergency service, crime numbers.
5. Further information about the abuse or neglect i.e.
 - How and when did the concern come to light?
 - When did the alleged abuse occur?
 - Where did the alleged abuse take place?
 - What are the details of the alleged abuse?
 - What impact is this having on the adult?
 - What is the adult saying about the abuse?
 - Details of any witnesses
 - Any potential risk to anyone visiting the adult to find out what is happening?
 - Details of others including children who may be at risk?

What happens when a concern is raised?

Anyone who raises a concern about an adult in South Yorkshire can expect that:

- They will be taken seriously.
- Any information given will be in confidence, but this may be shared where it is necessary to keep others who are at risk safe.
- If they are a staff member or an employee of an organisation, they have a right not to be subjected to any unfair treatment based on having made a disclosure under these procedures.
- As far as possible they will be informed of any action taken and the outcome.

The local authority will determine whether the information shared engages the statutory duty to make a safeguarding enquiry and decide what action (if any) is required to resolve the concern that has been raised in the adult's case.

How to raise a Safeguarding Concern in South Yorkshire

A safeguarding concern can be raised by anyone who has a concern about the adult at risk. The concerns should be reported to the safeguarding contact point in the local authority area where the abuse has occurred or is happening. **You can find the contacts for raising concerns in South Yorkshire on page 30, of the main document.**