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**12. Safeguarding Enquiries: Responding to a Concern**

**12.1 Statutory Safeguarding Enquiries – Section 42**

This chapter should be read with reference to the national guidance [Making decisions on the duty to carry out Safeguarding Adults enquiries](https://www.local.gov.uk/sites/default/files/documents/25.130%20Making%20Decisions%20on%20the%20duty_06%20WEB.pdf) which provides useful guidance and case examples.

The six statutory safeguarding adults’ principles underpin all aspects of adult safeguarding work:

* Empowerment
* Prevention
* Proportionality
* Protection
* Partnership
* Accountability

Councils are required by law to carry out safeguarding enquiries for those individuals who meet the criteria outlined in section 42(1) of the Care Act 2014:

1. Be experiencing, or at risk of, abuse or neglect; AND
2. Have needs for care AND support (whether or not the local authority is meeting any of those needs); AND
3. 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.

Section 42(1) of the Care Act 2014 is where information gathering takes place to establish if the individual does meet the criteria above. If met, then a S42 (2) safeguarding enquiry must take place. Section 42(2) covers:

1. Making (or causing to be made) whatever enquiries are necessary
2. Deciding whether action is necessary and if so what and by whom

The objectives of a S42 enquiry into abuse or neglect are set out in paragraph 14.94 of the Care and Support Statutory Guidance (DHSC, 2018):

* establish facts
* ascertain the adult’s views and wishes
* assess the needs of the adult for protection,
* support and redress and how they might be met
* protect from the abuse and neglect, in accordance with the wishes of the adult
* make decisions as to what follow-up action should be taken with regard to the person or organisation responsible for the abuse or neglect
* enable the adult to achieve resolution and recovery.

The proportionate conversations and information gathering that take place in finding out whether the criteria in S42 (1) are met (and therefore whether a statutory enquiry is triggered) sometimes themselves offer protective and preventive value.

**12.2 Non statutory safeguarding enquiries**

Councils are NOT required by law to carry out enquiries for those individuals who do not fit the criteria; however they may do so at their own discretion.

These enquiries would relate to an adult who is believed to be experiencing, or is at risk of, abuse or neglect but does not have care AND support needs. These enquiries might be about a carer for example, or someone with support needs but no obvious care needs.

There will be occasions when Safeguarding concerns do not relate to current abuse or neglect. Whilst action will be needed to consider and address the concerns, historic issues do not meet the criteria for a Section 42 Enquiry. A professional decision will be needed as to whether the concerns should be addressed as complaints or non-statutory safeguarding enquiries.

**12.3 Introduction**

The responsibility for making a decision whether a s42 safeguarding enquiry is required lies with the Local Authority. All safeguarding concerns reported to the Local Authority will need a proportionate decision as to whether a s42 enquiry is needed or whether other action to address the concerns should be taken.

The responsibility for responding to safeguarding concerns lies with the receiving team within Adult Care who should use the Professional Decision Making Tool to help decide the appropriate proportionate response to the concern.

The information contained in the initial concern may not be enough to clearly decide on risk levels and further information gathering or a visit to the individual may be needed. This can be decided informally in the first instance by the Safeguarding Adult Manager and worker involved. All processes should be followed utilising the care records computer system to correctly record decisions and document information.

Once a decision has been made that the safeguarding concern requires a section 42 enquiry then a more formal process will begin.

Each Adult with care and support needs who is subject to a s42 Safeguarding enquiry will require an Enquiry Practitioner and a Safeguarding Adult Manager to lead on the section 42 enquiry. Once the decision has been made to progress the concern then co-ordination of a multi-agency strategy meeting will be required in order to identify who will be part of the enquiry and what actions need to be undertaken.

The Team Manager of the relevant team has overall responsibility for the management of the adult and their care and support needs. The term Safeguarding Adults Manager refers to the Team Manager but can also apply to the Advanced Practitioner who takes operational responsibility within the team.

The professional who initially responds to a safeguarding concern is referred to in this chapter as the ‘worker’.

The Safeguarding Adults Manager is responsible for decision making and ensuring that safeguarding enquiries are proportionate, and deciding on the most appropriate individual and from which organisation, to undertake the enquiry. The person chosen is the designated “Enquiry Practitioner” within these procedures.

Detailed guidance of the purpose and responsibilities at each stage of the Safeguarding Enquiry process (from reported Concern to Closure Summary) is outlined later in this section.

**12.4 Think Family**

The RBSAB has endorsed the Think Family approach. In all adult safeguarding work staff working with the adult at risk of abuse or neglect must establish whether there are children in the family, and whether checks should be made on children and young people who are part of the same household, irrespective of whether they are dependent on care either from the adult or the person alleged to have caused harm.

Safeguarding and promoting the welfare of children is defined in ‘Working Together to Safeguard Children (2018)‘ as:

* protecting children from maltreatment;
* preventing impairment of children’s health or development;
* ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and
* taking action to enable all children to have the best outcomes.

Professionals or agencies working with children and young people have a key role in identifying adults who need safeguarding, and adopting a ‘think family’ approach to their practice. Similarly, if a professional or agency working with adults becomes aware that a child is or may be at risk of harm, they have a duty to safeguard and promote the welfare of the children.

Everyone must be aware that in situations where there is concern that an adult at risk is or may be at risk of abuse and neglect and there are children in the same household, they too could be at risk.

**12.5 Outcomes**

Adults need to be supported to define outcomes they desire from their personal circumstances of the abuse and neglect. The process is personalised and flexible and can conclude at any stage as appropriate.

In general terms the kinds of outcomes Adults seek from Safeguarding are:

* To have access to justice or an apology or to know that adequate organisational managerial action has been taken
* To be involved in making decisions
* To feel supported throughout the process
* To have clarity around what happened and to know how the outcome was reached
* To be made aware of possible risks and to know how to maintain a key relationship
* To feel protected and safe from harm
* To feel supported and have their views heard.

Consideration should be given to:

* What insight does the adult have into the level of risk, do they understand why practitioners have concerns?
* Is there any evidence of incapacity, coercion, undue influence or duress?
* What outcomes matter to the adult and will this reduce/remove risk?

S42 Enquiries will focus on the outcome defined by the Adult and will be proportionate and timely and will take account of

* The context and implications for other Adults
* Carers needs and their circumstances
* The mental capacity of the Adult and of the person believed to have caused the abuse or neglect

However, it is recognised that in some circumstances the outcome defined by the Adult may not be achieved and also desired outcomes may change over time.

**12.6 What is a formal s42 Enquiry?**

The s42 safeguarding enquiry begins following a decision being made by the team whether the safeguarding concern meets the criteria of the s42 definition. A proportionate response to the concern is made using the Professional Decision Making Tool. This is decided using the Professional Decision Making Tool to decide on what level of risk the person is experiencing. Factsheets are available on [www.rbsab.org](http://www.rbsab.org) which describe each element of the s42 safeguarding process.

The exact nature of the s42 Enquiry in response to a Safeguarding Concern and who is best to lead will be in part determined by the circumstances and views of the Adult.

The objectives of a s42 Safeguarding enquiry into abuse or neglect are to:

* establish facts
* ascertain the Adult’s views and wishes
* assess the needs of the Adult for protection, support and redress how they might be met
* protect from the abuse and neglect, in accordance with the wishes of the Adult
* Identify risks and apply a proportionate response
* 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
* enable the Adult to achieve resolution and recovery.

Enquiries do not follow a prescribed process but are made up of a number of different elements as appropriate and this includes one or more of the following (not exhaustive);

Telephone calls

* To the Adult, family members / other representative
* To the person who reported the concern
* To the managers of services and other professionals.

Visits/Meetings

* With the Adult, family members / other representative
* With representatives of relevant services and agencies.

Checking Written Records

* Care Plans, incident reports, medication records, staff rotas, risk assessments, bank statements, as appropriate to the area of concern.

Specialist Advice Sought

* Care Quality Commission, Ofsted, the Police, Health Professionals, Coroner, Trading Standards, Community Safety, General Medical Council NHS England, NHS Clinical Commissioning Group, other commissioning bodies as appropriate to the area of concern.

Other Formal investigative routes include

* Criminal Investigation, led by the Police
* Serious Untoward Incident Review, led by NHS
* Allegation Management
* Disciplinary Procedure, led by the Employer.

Where a crime has potentially been committed, enquiries by the Police may take place with support provided by the Local Authority. More extensive enquiries may require a Multi- Agency Strategy Meeting.

**12.7 Screening of Safeguarding Concern**

All safeguarding concerns should be initially screened to make a professional judgment about the level of risk on the day of receipt in order to identify high risk situations that need an immediate safeguarding response.

**12.8 Decision making in response to a safeguarding concern**

The decision to progress a safeguarding concern to a section 42 Enquiry or a non-statutory enquiry is dependent on whether the safeguarding concern meets the statutory criteria. It is also made in line with the Rochdale Borough Safeguarding Adults Board (RBSAB) “*Professional Decision Making Tool in Response to a Concern*” document which can be found on [www.rochdalesafeguarding.com](http://www.rochdalesafeguarding.com) and should be used to ensure a proportionate response to explore the concern.

Where it is clear there is multiple disadvantage a multi-agency response is considered as early as possible by convening a strategy meeting with all agencies concerned.

It is important to contact the Adult to ascertain how they view the concern and identify from their perspective whether they believe they have been harmed and what outcomes they want to achieve.

In order to make a decision a risk assessment should be completed and there may be a need to gather more information before the decision can be made. This may include requesting a written report from any involved agency or provider.

**Timescale:** The decision to progress to a formal Safeguarding enquiry should take no longer than 2 working days. Where ‘information gathering’ is required to identify the correct proportionate response this should not unnecessarily delay the decision to progress to a s42 enquiry.

**Recording:** The decision and rationale must be recorded.

**12.9 Decision not to proceed with a section 42 enquiry**

It may be decided not to proceed with a formal enquiry when there is enough information to decide that:

* The situation does not involve abuse, neglect or exploitation; in which case another service may be appropriate and the person concerned may be signposted as appropriate.
* The Adult has no identified care and support needs and therefore is not an adult who is covered by these procedures. They can then be signposted to other services or resources.
* The Adult with care and support needs has the mental capacity to make an informed choice about their own safety, there is no public interest or vital interest considerations and they choose to live in a situation in which there is risk or potential risk. However incidents of crime should always be reported to the police.

If a decision is made not to proceed with an enquiry:

* A record must be made stating any reasons by providing a rationale for the decision.
* Feedback should be given to the adult with care and support needs or given to the person acting in the Adult’s best interests, for example, family member, IMCA (Independent Mental Capacity Advocate), carer or court appointed deputy
* The referrer must also be informed of the decision in a timely way, the reasons for it and information given about any alternative services which have been offered, if this does not breach the Adult’s confidentiality. This should preferably be in writing.
* The Safeguarding Adults Manager will designate the most appropriate person to feed back to the Adult.
* Where the Adult does not have mental capacity, they must still be included in the process.
* A decision not to proceed does not preclude information sharing where appropriate.

If the concerns raised are not about current abuse or neglect, for example are about poor practice, then appropriate actions should be identified, which may also include signposting, to address the concerns raised. If the concerns relate to poor practice by a provider, the relevant Commissioning team needs to be informed. If safeguarding concerns are indicated, a formal s42 Safeguarding enquiry begins.

**12.10 Decision to proceed with a section 42 Enquiry/Non Statutory Enquiry**

The scope of the enquiry, who leads it and its nature, and how long it takes, will depend on the particular circumstances. It will usually start with asking the Adult their view and wishes which will often determine what next steps to take. Everyone involved in an enquiry must focus on improving the Adult’s well-being and work together to that shared aim. At this stage, the Safeguarding Adult Manager leading the enquiry has a duty to consider whether the adult requires support to be involved in the enquiry.

The Safeguarding Adult Manager (SAM) should make a decision as to who should undertake the enquiry. The specific circumstances will often determine who the right person to begin an enquiry is. In many cases a professional who already knows the individual will be the best person. They may be a social worker, a housing support worker or a health professional, e.g. a community nurse.

It is therefore imperative to determine the most appropriate person to lead the Safeguarding Adult enquiry and the most appropriate person (Enquiry Practitioner) to conduct enquiries.

**12.10.1 Initial Enquiry considerations**

Once a decision is made, with the involvement of the adult/ advocate, to progress to a safeguarding enquiry, the Safeguarding Adult Manager is responsible for deciding, what action needs to be taken through consideration of the following:

* Ensure that the Adult is safe, that medical attention has been sought if required and that emergency services are involved if necessary.
* Consider the Mental Capacity of the Adult and the person who may be causing harm and implications this may have.
* Consider the specific needs and circumstances of the Adult and the person who may be causing harm and implications this may have.
* Ensure that the adult/advocate is fully involved in the enquiry, including the formulation of their protection plan, to protect them from further abuse, and thatno actions will be taken which affect them personally without their involvement.
* Check if there have been previous Safeguarding Concerns for the individual and if so, to compare the context, location, time period and other details to the current Concern to inform the risk assessment. Previous Concerns must be considered and taken into account in relation to the on-going Safeguarding activity.
* Discuss the need for immediate Police involvement if a crime is suspected.
* Identify which organisation funds the care and inform and involve them in this strategy phase.
* Consider the involvement of other Partners at this stage and the need to consult relevant professional advisors.
* Consider the six safeguarding principles.
* Discuss if further clarification is required from the person who reported the Concern, to understand what is being said. This is particularly important for a self-referral and when family/friends report the Concern.
* Decide if a written safeguarding enquiry report is required from an organisation or provider that may provide further details of the concern and provide an opportunity for the organisation/provider to record what actions they have taken in response to the concern.
* Decide who is best placed to carry out the enquiry and allocate an Enquiry Practitioner as appropriate and ensure that the name of the Lead Professional is communicated to all agencies that will be involved in the enquiry.
* Ensure that key family members are identified and consideration given to engaging them in the safeguarding process, as they may be able to offer support for the individual.
* Consider if an appropriate individual or independent advocate is required.
* Risk assess the broader context and consider potential risks to others.
* Identify potential risks to the health and safety of the Adult and staff members pertaining to the Initial Enquiry Visit and agree actions as appropriate.
* Discuss any known/or potential risks to children and, where necessary, make a Child Protection referral.
* Ascertain if the abuse or neglect has occurred within a provider service. If this is the case the employer should consider the need for immediate action under their Disciplinary Procedures or other management action and should discuss this with their organisation’s Safeguarding Lead. The provider may be asked to complete a safeguarding report, detailing what action they have taken to address the concern and minimise future risk.
* Ascertain if there are current concerns about the service being provided to acceptable quality standards and consider who should inform other agencies, such as the Integrated Commissioning team, CQC, or other appropriate agencies of the safeguarding concern and any immediate action being taken.

**12.10.2 Managing Allegation considerations**

Ascertain if a worker, in either a paid or unpaid capacity (i.e. in a position of power or trust) has:

* Behaved in a way that has harmed, or may have harmed an adult or child
* Possibly committed a criminal offence against, or related to, an adult or child
* Behaved towards an adult or child in a way that indicates they may pose a risk of harm to adults with care and support needs.

If so, it will be necessary for the employer (or student body or voluntary organisation) to assess any potential risk to adults with care and support needs who use their services, and, if necessary, to take action to safeguard those adults, even if the adult with care and support needs states that they do not want any action taken.

It is the **employer’s** responsibility to decide if the threshold for Allegation Management is met and to refer an employee to the Local Authority Allegation Management Lead (AML) under the RBSAB Allegations Management Procedure. It is not the responsibility of the Police or Adult Care**.** Police and Adult Care information and assessment may help inform the employer in their decision making, but will not make a decision as to whether an employee should be referred into the Allegation Management Procedure for a strategy meeting. The AML can offer advice and assistance to an employer to help them with their decision making.

**12.10.3 Action Planning**

The Safeguarding Adults Manager has responsibility for ensuring any agreed actions are implemented. This includes actions assigned to other persons or agencies.

Any actions should have timescales and a named person to undertake. A copy of the safeguarding action plan should be sent to all partners who will be involved in the safeguarding enquiry. If two or more agencies will be involved in providing information or support to inform the Section 42 or non-statutory enquiry, consideration needs to be given how they will contribute to the protection plan and how they will be kept informed of the progress of the enquiry. The Safeguarding Adult Manager should identify if a multi-agency strategy meeting is needed.

The individual and/or their representative/advocate should be given the name of the lead professional who will support them.

The Safeguarding Adults Manager must arrange for the person who reported the concern and other interested parties, e.g., families, to be contacted and inform them as far as is possible without compromising confidentiality and the safety of the Adult, of the progress of the Safeguarding Enquiry, and what further enquiry or action will be taken.

**Timescale:** The initial safeguarding response must be conducted as soon as practicable following the receipt of the safeguarding concern.

**Recording:** All discussions and actions must be recorded. If it is appropriate for the Safeguarding Enquiry to end at this point the Safeguarding Adult Manager must ensure the Closure Summary Form is completed.

**12.10.4 Supporting an adult who makes repeated allegations**

1. An adult who makes repeated allegations that have been investigated and are unfounded should be treated *without prejudice*.
2. Each allegation must be responded to under these procedures.
3. A risk assessment must be undertaken and measures taken to protect staff and others and a multi-agency meeting convened, where appropriate
4. Each incident must be recorded.

Organisations should have procedures for responding to such allegations that respect the rights of the individual, while protecting staff from the risk of unfounded allegations.

**12.10.5 Responding to family members, friends and neighbours who make repeated allegations**

Allegations of abuse made by family members, friends and neighbours should be investigated *without prejudice*. However, where repeated allegations are made and there is no foundation to the allegations and further enquiry is not in the best interests of the adult, then local procedures apply for dealing with multiple, unfounded complaints.

**12.10.6 Concerns Relating to a Person Living or Receiving Services in another Local Authority Area**

The authority area where the alleged abuse occurs or suspicion arose must notify the other authority concerned but will usually have overall responsibility for coordinating safeguarding arrangements. This should be the subject to agreement between the two local authorities involved.

**12.10.7 Escalation**

Significant disagreement arising from the initial strategy discussion about potential actions to be taken must be referred to relevant Safeguarding Leads for guidance, and be recorded.

**12.10.8 Balancing choice and risk**

It is not possible to eliminate risk. Empowerment in safeguarding involves risk management that is based on understanding the adult with care and support needs and how they view the risks they face as there may be risks that person welcomes because it enhances their quality of life; risks the person is prepared to tolerate and risks they want to eliminate.

The identification of risk should usually be undertaken with the person who has been, or appears to have been, abused or neglected, unless doing so is likely to increase the risk to that person or puts other people at risk.

An Adult's right to make choices about their own safety has to be balanced with the rights of others to be safe.

**12.11 Initial Enquiry Visit**

It is good practice to undertake a visit to the Adult. However there may be exceptional circumstances when contact needs to be made over the phone. The reason for conducting the enquiry over the phone should be recorded.

**12.11.1 Purpose**

An Initial Enquiry Visit to the Adult must be undertaken within timescales in order to:

* Assess the Adult’s capacity to engage in the process and consider advocacy.
* Ensure a formal capacity assessment is made to check if people’s judgements on Mental Capacity Act ‘first principle’ is accurate and that the Adult does have capacity to understand and take part in the enquiry. The outcome of that assessment, and the rationale for it, should always be recorded.
* Understand the desired outcome as defined by the Adult and/or their representative.
* Analyse risk(s) and evaluate the potential harm that may be caused.
* Observe the setting in which the concern has been raised to gain insight into the context, physical environment and relationships.
* Ascertain the Adult’s informal network of support and ask for permission from the Adult or their representative if they can be contacted to ascertain what support they can offer to strengthen the protection plan.
* The views of the Adult and/or their representative, where appropriate, must always be considered and respected and full consideration be given to any identified issues/needs.
* To evaluate relevant records and documents.

There may, however, be circumstances when the Adult’s wishes might be overruled. These include:

* If the Adult’s mental capacity is such that they are unable, or may be unable, to make an informed decision about their own safety and wellbeing.
* Other people are at risk.
* The Police have decided to pursue a Criminal Investigation.

Ensure that when an adult safeguarding referral is made, a Care Act assessment is always considered as a means of gaining as much information as possible even if the subject may not obviously qualify for care.

In other high risk situations, for example, domestic abuse a multi-agency strategy discussion or meeting may be held even if the Adult does not want any action taken. This would enable discussions around providing the Adult with support and signposting to relevant organisations e.g. victim support, counselling services, etc.

Only in exceptional circumstances, for example if the Adult is in hospital, should the Initial Visit be delayed. The rationale for this must be clearly recorded.

**12.11.2 Who has Responsibility?**

The Safeguarding Adults Manager must make the information available in advance to the Enquiry Practitioner who will conduct the Initial Visit.

* Consideration must be given as to whether a second appropriately trained member of staff should accompany the Enquiry Practitioner on the Initial Visit.
* Consideration must be given as to whether the person(s) conducting the visit should be known to the Adult.
* The Enquiry Practitioner must hold a relevant professional qualification and must take lead responsibility for engaging with the Adult.
* The Enquiry Practitioner must provide the Safeguarding Adults Manager with feedback of findings from the Initial Visit.

**Timescale:** The initial enquiry visit will be conducted as soon as practically possible. In some cases this will on the day the concern is received or within two working days when the decision making has concluded that there are significant risks.

**Recording:** A record of the visit should be provided to the Adult and/or their representative as soon as possible, outlining key points, stated outcomes and agreed/declined actions.

The Enquiry Practitioner has the responsibility for recording the desired outcomes defined by the Adult on the organisation’s information systems.

**12.12 Additional Enquiry Discussions**

Additional Enquiry Discussions must take place between the Safeguarding Adults Manager and Enquiry Practitioner, following the Initial Enquiry Visit. Other Partners/Agencies will be invited to contribute as necessary.

**12.12.1 Purpose**

* To reaffirm the Adult’s wishes and desired outcomes, following the Initial Enquiry Visit.
* To share and evaluate additional information and risks identified from the Initial Visit.
* To agree next actions.
* To agree Closure, if appropriate.

**12.12.2 Who has Responsibility?**

* Additional Strategy Discussions can be instigated by the Safeguarding Adults Manager, Enquiry Practitioner, Police or other Partners.

**12.12.3 Escalation**

* Where it appears that the case may be becoming very complex or is raising significant quality concerns, the Safeguarding Adults Manager must inform the relevant Head of Service or escalate to a more senior level as required.

**Timescale:** Additional Enquiry Discussions can be instigated at any stage of the Safeguarding Adults Procedures. They must be conducted as soon as practicable following the emergence of information that indicates further Enquiry Discussion is required.

**Recording:** Additional Enquiry Discussion(s) must be recorded by the Safeguarding Adults Manager or Enquiry Practitioner as appropriate.

If it is agreed that no further action is necessary, this must be recorded.

A Closure Summary must also be completed by the Enquiry Practitioner if the safeguarding enquiry has ended

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**12.13 Multi-Agency Strategy Meetings**

A strategy meeting will not be necessary in all cases, where a discussion will suffice. However in more complex cases a meeting will be useful.

**12.13.1 Purpose**

To share, discuss and consider the known evidence and agree protection actions and formal investigation actions as appropriate.

This may include one or more of the following considerations:

* Creation or revision of a Support Plan to address needs and risks
* Potential Criminal element
* Potential action by the Provider and whether they have considered if the threshold for Managing Allegations is met
* Where an individual not in a positon of power or trust (and therefore does not come under the Allegation Management Process) continues to pose a risk of harm to others
* Serious Incidents Requiring Investigation - NHS Trusts only

**12.13.2 When a Strategy Meeting may be called**

* Where the health and safety of the Adult is or may be compromised and protection and enquiry actions from more than one agency may be required.
* Where the allegations indicate a potential Criminal Investigation may be required ( which does not meet the criteria for referral into the Allegation Management Process)
* Where there are Previous Safeguarding Concerns that indicate that the risk may be higher than originally thought.

**12.13.3 Who should be invited to the meeting?**

* The Safeguarding Adults Manager has responsibility for deciding who to invite to a Strategy Meeting. The RBC Commissioning team are to be invited to all strategy meetings for incidents that occur in Care Quality Commission (CQC) regulated services.
* Consideration should be given to inviting the individual or family members to the strategy meeting. If they are not to be invited, the decision for this must be recorded.
* All agencies that are involved with the individual **and** can contribute to the protection plan should be invited to ensure the sharing of relevant information.
* The strategy meeting needs to identify a named professional who can take responsibility for leading the actions to reduce the abuse.

**12.13.4 The Strategy Meeting will cover:**

* The views and wishes of the adult.
* Issues associated to the mental capacity of the Adult and those involved and potential requirement for a Best Interests Meeting.
* The health, social care, communication, cultural needs or other specific needs of the Adult.
* The likelihood, severity and potential impact of risks to the health, safety and wellbeing of the Adult.
* Any potential risks to children and agreement on who will arrange a Child Protection referral, where necessary.
* Who the “interested parties” are, which means those persons or agencies with whom it is reasonable and appropriate to share information about the process and outcome.
* Ensure information and contact details for key family members are, subject to their consent, shared with other agencies at strategy meetings unless there is a good reason for not doing so.
* Consideration for a Multi-Agency Concerns (MAC) meeting under the Rochdale Adult Care and HMR CCG Escalation Plan and Accountability Framework for Care Provision in Heywood Middleton and Rochdale
* Confirmation that referrals, where indicated, have been made into the Allegation Management Process
* Consideration and where necessary arrangements for appropriate notifications/referral to Partner or Statutory Agencies, e.g. Care Quality Commission, Health Professionals.
* Where issues affect residents of other Local Authorities, to arrange for proper notification to those Authorities.
* To consider any recommendations where wider actions or learning are identified
* Consideration of whether a Safeguarding Adult Review screening is required
* Timescales for actions and outcomes.
* Responsibility and accountability for all safeguarding protection actions.
* To set a date for further Safeguarding Meetings or an Outcomes/Closure meeting, where this is practicable and appropriate.

**12.13.5 Who has Responsibility?**

* The Safeguarding Adult Manager is responsible for ensuring the Adult knows about the meeting, their decision whether to attend the meeting is recorded and that their views are collected before the meeting. The Safeguarding Adults Manager is best placed to decide who speaks to the Adult.
* The Safeguarding Adults Manager has responsibility for deciding if a Strategy Meeting is required and who needs to attend.
* The Enquiry Practitioner has responsibility for organising the Strategy Meeting, including organising a minute taker, booking a venue/room and inviting all relevant persons and agencies involved in the care, support and protection of the Adult.
* The minute taker is responsible for attendance recording, monitoring apologies and minuting the meeting.
* The Safeguarding Adults Manager has responsibility for chairing Strategy Meetings.
* Persons and agencies have a responsibility to share any information they have that may be relevant to the Enquiry.
* All persons and agencies invited to attend the Strategy Meeting have a responsibility to attend. Where the individual cannot attend, they must inform the Safeguarding Adults Manager and agree who can attend as a suitable alternative representative from that agency.
* Where representatives of any of the key persons or agencies are absent from the Strategy Meeting, the Safeguarding Adults Manager has the responsibility for requesting in advance provision of information so that it can be taken into account at the meeting; informing them of outcomes of the meeting. They must ensure that key persons or agencies are informed of and understand agreed action(s) and timescales allocated to them.
* The Safeguarding Adult Manager has overall responsibility for decision making at the strategy meeting.
* The Safeguarding Adult Manager is responsible for the accuracy of the minutes and their secure dissemination.
* The Enquiry Practitioner has responsibility for informing the Adult and/or other interested parties of the outcomes of the Strategy Meeting if they are not in attendance.

**12.13.6 Escalation**

* In exceptionally complex and sensitive cases, more Senior Officers within the relevant areas may be required to participate.
* When there are concerns about the adequacy or implementation of the Protection Actions.
* When there are concerns about the rate of progress or quality of the Disciplinary Investigation.

**12.13.7 Suggested Strategy Meeting agenda**

1. Apologies, absences, introductions.
2. Confidentiality and Information Sharing Protocol
3. Safeguarding Concern details
4. Background
5. Details of information gathered from every agency
6. Consideration of the Adult’s Mental Capacity
7. Views of Adult/advocate and what they wish to happen, what support they have in their personal and community network
8. Recording of actions that have already taken place to safeguard the Adult
9. Information sharing/ open discussion
10. Risk assessment
11. Consideration of actions to address any identified care and support needs for the Adult
12. Consideration of actions to help the Adult recover from the abuse/neglect and to help the Adult achieve their stated outcomes
13. Protection actions including timescales and the name of the lead professional.
14. The action plan is agreed with the Adult.
15. Consideration of other formal processes/referrals (MAC, MRM, Managing Allegation, CQC, etc.)
16. To consider any recommendations where wider actions or learning are identified.
17. Decision whether a further strategy meeting or outcomes/closure meeting is required.
18. Next steps

Please see Appendices 1 and 2.

**Recording:** The Minutes of the Strategy Meeting must be recorded.

The Safeguarding Adults Manager (Chair) has responsibility for ensuring timely recording, electronically storing and distributing the minutes to relevant persons and agencies involved in the care and support of the Adult (including the Adult or their advocate), including communicating allocated actions to lead professionals within agencies and timescales for completion. The minutes should clearly identify which actions are allocated to each agency. Updates should be provided to the individual and others involved. Written actions should be disseminated as soon as practicable after the meeting, followed up by written minutes sent out to all attendees within 10 working days

**Timescale:** If it has been determined that a multi-agency strategy meeting is needed this should be arranged as soon as is practicable. The reasons for any delay to be recorded. .

**12.14 Protection Actions**

These will apply where there are concerns that the Adult may experience, or be experiencing, further abuse and will consist of risk reduction and support strategies, and will be monitored and revised as necessary.

**12.14.1 Purpose**

* Protection actions will involve identifying and agreeing specific safety measures to ensure immediate and ongoing protection from abuse, specific to the Adult’s needs and desired outcomes.
* Relevant persons and agencies involved in the provision of care and support must be clear about how the specific actions or safety measures are designed to safeguard the Adult from further risks of abuse.
* The aim is to remove both immediate and/or potentially ongoing risks to the Adult. Where risks cannot be removed or avoided because the risk conflicts with the views/wishes of the Adult, protective measures to reduce the risk will be maximised. Decision making rationale must be recorded clearly.

**12.14.2 Protection Actions must:**

* Record the measures that have already been put in place, and will remain in place, to manage risks and protect the Adult.
* Record all the actions that have been identified to safeguard the Adult from further abuse, and which person(s) and agencies are responsible for implementing the action.
* Have a deadline for the implementation of each action. However, it is recognised that certain actions may need to be given an ongoing timescale.
* Remain in operation until a decision has been reached at Safeguarding Closure Meeting that it is no longer required **OR** following closure of the Safeguarding Enquiry, the Protection Actions may continue to be in place as part of the support plan and will be reviewed by the Care Management Review process.
* Be shared and agreed, where appropriate, with the Adult/advocate.

**12.14.3 Multi-Agency Risk Management protocol (MRM)**

Consideration may be given to using the Multi-Agency Risk Management Protocol (MRM).

* MRM provides professionals with a framework to facilitate effective multi-agency working with adults who are deemed to have mental capacity and who are at risk of serious harm or death through self-neglect, risk taking behaviour or refusal of services.
* It aims to provide professionals from all Rochdale Borough Safeguarding Adults Board (RBSAB) partner agencies with a framework for the management of complex cases where, despite ongoing work, serious risks are still present.
* MRM is a multi-agency process to discuss, identify and document serious current risks for high risk cases, and formulate an action plan identifying appropriate agencies responsibility for actions. It also provides a mechanism for review and re-evaluation of the action plan.

**12.15 Formal Investigation Actions**

Actions to establish facts, as far as is reasonable and proportionate to the circumstances, will be taken.

It may not be necessary to pursue information further where the Protection Actions are in place and the Adult and/or their representative is satisfied with the Outcome.

Formal Investigation routes may apply in circumstances of very serious Safeguarding Concerns.

The three most commonly used Formal Investigation routes are as follows;

a) Criminal

b) Disciplinary

c) Serious Untoward Incidents (SUIs)

**12.15.1 Criminal Investigation**

These may apply where the alleged abusive act is in breach of criminal legislation.

**Purpose**

* To discuss the wishes of the Adult in respect of a potential Criminal Investigation.
* To gather collaborative evidence and scheduling rapport sessions, video interviews, Appropriate Adults, post-interview support, medicals and special measures.
* Whilst Criminal Procedures are the responsibility of the Police, where the victim is an Adult with care and support needs additional consideration must be given to information sharing between agencies, communication with the Adult and recording.

**Who has Responsibility?**

* The Enquiry Practitioner is responsible for maintaining contact with the Adult and keeping them updated throughout.
* The Safeguarding Adults Manager is responsible for ensuring liaison with the Police and recording progress.
* On notification of a Concern, the Police must act promptly to secure evidence or advice accordingly.
* Police must consider requirement for medical examination, photographs and other forensic evidence.
* Police must commence Criminal Investigation evidence-gathering and preparation of papers for consideration by Crown Prosecution Service, as appropriate.
* Police must update the Adult as per the Victim’s Charter, either personally or in conjunction with the Enquiry Practitioner.

**Timescales:** Timescales will be determined by the Criminal Investigation Process.

**Recording:** For the purpose of recording consistently a Criminal Investigation will be said to commence at the point where formal witness statements are taken by the Police. Information gathering prior to this are Police Enquiries.

The Safeguarding Enquiry may be “closed” once the Crown Prosecution Service has agreed to progress the case depending on circumstances. Where the Adult and/or their representatives needs further support in relation to the process the Enquiry will remain “open”.

The Enquiry Practitioner will record the final outcome on the Closure Summary

**12.15.2 Provider Disciplinary Investigation and Managing Allegation Process**

This may apply where the person who is alleged to have caused harm is a professional, employee or volunteer within an organisation providing care and support services to Adults. See the RBSAB Managing Allegations Procedures and Guidance for more details.

**Purpose**

* To establish the facts of the circumstances under which the Safeguarding Concern was made.
* To determine the severity and impact of any breach of procedure or expectations of conduct that may have occurred.
* To determine appropriate sanctions or remedial actions.
* A Disciplinary Investigation will identify a suitable named Lead Manager/Senior Officer of the employer’s organisation and outline the scope of the Disciplinary Investigation.
* Allegations of abuse and neglect by professionals/employees are dealt with through the Disciplinary Procedures of the employing organisation/agency and an Employer needs to make a decision if the criteria is met for a referral into the Allegation Management Process.
* A Disciplinary Investigation should not commence until it is confirmed, usually through the Allegation Management Process, that there will not be a Criminal Investigation or unless GMP has confirmed that the Disciplinary Investigation can commence.
* Disciplinary Rules are necessary to set the standards of conduct to which employers can reasonably expect employees to conform.
* Expectations about the way staff conduct themselves within services that support Adults are informed by general principles of social care, professional codes of practice and RBSAB Safer Working Practices.
* Understanding and following the rules and requirements and being aware of the consequences of contravening rules and requirements is an important measure which protects Adults from abuse and neglect.
* Disciplinary Procedures generally distinguish between ‘misconduct’ and ‘gross misconduct’.
* Abuse of an Adult may be so serious that a single incident could result in dismissal.
* Repeated incidents of less serious abuse could also result in dismissal, following adequate warnings. This generally includes a series of oral and written warnings.
* Where the Safeguarding Enquiry involves an allegation against a Professional and/or member of staff or volunteer who has access to children and young people consideration must be given as to whether it is appropriate to inform the Local Authority Designated Officer (LADO).
* If further allegations of abuse emerge during the Disciplinary Investigation, a new Safeguarding Concern must be raised and the information shared with the Allegation Management Lead.

**Suspension**

An Employer must ensure any risk to adults with care and support needs is managed. If this is not possible in the workplace, it may be necessary to suspend an employee who has allegedly abused or neglected an Adult to:

* Protect the Adult and other Adults with care and support needs.
* Prevent any actions or activities that may prejudice the Criminal or Disciplinary Investigation.
* Protect the employee from potential further allegations.

Suspension is a neutral act whilst an investigation takes place. It is the responsibility of the employing organisation to consider the welfare of the suspended individual, arranging support as necessary and keeping the individual informed of the progress of the investigation.

**Who has Responsibility?**

* The Enquiry Practitioner is responsible for maintaining contact with the Adult with care and support needs and keeping them updated throughout.
* The Employer is responsible for implementing a robust and timely Disciplinary Investigation.
* Where a referral has been made into the Allegation Management Process, the Employer is responsible for keeping the Allegation Management Lead informed of the progress of the internal Disciplinary Investigation.
* Where a referral to the Disclosure and Barring System and/or Regulatory Bodies, e.g. Health and Care Professional Council, General Medical Council, Nursing and Midwifery Council is required it is the employer’s responsibility to do so promptly.

**Timescales:** The Employer should refer a worker or volunteer to the Adult Care Allegation Management Lead as soon as there is a suspicion or concern that a worker has caused harm or abuse. An Allegation Management Strategy Meeting should take place within 5 days of the Allegation Management Lead receiving a referral.

**Recording:** The Allegation Management Lead is responsible for liaising with the Manager leading the Disciplinary Investigation.

The Enquiry Practitioner will record on-going contact with the Adult/others on case notes.

The Manager leading the Disciplinary Investigation must record the findings and

recommendations in accordance with the requirements of their own agency.

The Enquiry Practitioner will record the final outcome of the S42 safeguarding enquiry on the Closure Summary.

**12.15.3 Serious Incidents (sometimes referred to as Serious Untoward Incidents)**

Review processes for Serious Incidents (SIs) will apply within all NHS Trusts where an Incident meets the relevant criteria and involves abuse or neglect of an Adult.

**Purpose**

* To undertake a timely Root Cause Analysis so that the incident or circumstances can be fully understood and lessons learnt.

**Who has responsibility?**

* The NHS provider Adult Safeguarding Lead is responsible for ensuring that any SI review that involve the abuse of an Adult with care and support needs are also reported to Rochdale Adult Care Services as a Safeguarding Adults Concern.
* The NHS provider Adult Safeguarding Lead is responsible for liaison with the Adult and their family as per the SI Policy to be assured that the response has been sufficient to deal with the safeguarding issue.
* The Local Authority Safeguarding Adults Manager must maintain regular contact with the designated NHS provider Adult Safeguarding Lead so that information can inform the closure of a Safeguarding Enquiry.

**Timescales:** A SI review Root Cause Analysis report will be completed in accordance with NHS guidance; there are varying timescales appropriate to the level of the incident. The timescale must be confirmed by HMR Clinical Commissioning Group on a case by case basis.

**Recording:**

Confirmation that a SI has been agreed must be recorded by the Safeguarding Adults Manager.

The Safeguarding Adults Manager is responsible for liaising with the NHS Provider Adult Safeguarding Lead and recording progress.

The NHS provider Adult Safeguarding Lead must ensure that internal records are made as per the SI Policy.

The Enquiry Practitioner must record the final SI outcome on the Closure Summary.

**12.16 Feedback and outcomes**

Feedback to the Adult and/or their representative and others as appropriate, must be given at all stages so that the process is understood and expectations are clear.

It is the responsibility of the Enquiry Practitioner to provide feedback throughout, unless specifically agreed otherwise.

**Purpose**

* To understand the Adult’s experience and that the outcomes of the Enquiry as defined by the Adult and/or their representative have been achieved.
* Inform other agencies processes as appropriate, such as Provider Services, Complaints or Contracting/Commissioning functions, so that lessons can be learned.
* Demonstrate that the Safeguarding Concern is taken seriously and that enquiries were proportionate and appropriate.

**Who has responsibility?**

* The Enquiry Practitioner must make sure the Adult and/or their representative understand what is being or has been done in response to the Safeguarding Concern and any ongoing action.
* The Enquiry Practitioner must seek the Adult and/or their representative’s views on the extent to which the Enquiry has involved the Adult and achieved the outcomes they wanted. This discussion may take place:
  + Prior to a Closure Meeting or
  + When agreed actions are in place and a Closure Meeting is not considered necessary.
* The discussion may be in person or by telephone and will usually be confirmed by letter.
* The Safeguarding Adults Manager is responsible for identifying the most appropriate person to give feedback, e.g. Managers/owners of Provider Services, CQC, Enquiry Practitioner and other professional bodies.

**Timescales:** Timely feedback to the Adult and/or their representative and others as appropriate.

**Recording:** Verbal feedback to the Adult and/or their representative should be recorded by the Enquiry Practitioner on the organisation’s information system.

A Feedback Letter must be written sensitively by the Enquiry Practitioner to provide feedback to the Adult and/or their representative and others, as appropriate.

The letter must be signed, dated and scanned onto the organisation’s information system.

**12.17 Outcomes/ Closure Meeting**

An Adult Safeguarding Enquiry must be formally closed. It is not a requirement to hold a formal meeting to agree Closure, though it will be good practice in the more complex cases. The individual and/or representative should always be invited.

**Purpose**

* To enable the individual and/or their representative to state the extent to which the Enquiry has achieved the outcomes they desired and whether they feel risk has been reduced or removed
* To understand the issues that may have prevented the Adult and/or their representative’s desired outcome/s being realised
* To affirm that the agreed actions have been implemented and ensure that no further action is necessary in respect of the Safeguarding Concern
* To ensure that any ongoing support plan has been updated to ensure future risk is minimised and that this will be reviewed by the Care Management Review process
* Should the enquiry have been conducted alongside a Managing Allegations process, the Allegation Management Lead will provide the information that can be fed back to the individual and/or representative
* To reach a collective decision as to whether the Enquiry can be closed
* If there is disagreement in respect of closure, the matter must be referred to the relevant Safeguarding Lead
* To identify cases which have potential for a Safeguarding Adult Review (SAR).

Please see Appendices 3 and 4.

**Who has Responsibility?**

* In more straightforward cases, where a formal meeting is not required, the decision to close the case is made by the Safeguarding Adults Manager in conjunction with the Enquiry Practitioner and the Adult and /or their representative
* The Safeguarding Adults Manager has the responsibility for convening invitations to the Closure Meeting where this is appropriate
* The Closure Meeting must be chaired by the Safeguarding Adults Manager
* Where the Concern originated as a complaint or contractual concern, consideration must be given to informing the relevant Complaints/Contracting Officers of the outcomes
* All those involved in the Enquiry (e.g. Individual and/or representative, professionals in other agencies) must also be informed that the Enquiry has been concluded if they did not attend the closure meeting.

**Timescales:** A date and time for the Outcomes/Closure Meeting must be scheduled as soon as possible after the enquiry has concluded.

If any persons/agencies do not agree to closure, the matter must be referred to the relevant Safeguarding Lead within **2 normal working days**.

**Recording:**

The Safeguarding Adults Manager (Chair) has responsibility for recording, electronically storing and distributing the minutes to relevant persons and agencies involved in the care and support of the Adult.

**12.18 Enquiry Closure Summary**

A summary of key information is required to provide a readily accessible overview of the Safeguarding Enquiry and is also the point from which reportable data is gathered.

**Purpose**

* To ensure that the Adult is satisfied with the outcome
* To evidence that all Investigation and Protection Actions have been robustly and appropriately completed
* To ensure any ongoing support plan has been updated to ensure future risk is minimised and that this will be reviewed by the Care Management Review process
* To check that referrals to regulatory bodies have been made where this has been identified
* To ensure that all relevant recording has been completed
* To ensure management oversight of the Safeguarding process and of the Closure decision
* To ensure the Adult and others involved have received feedback of the Enquiry outcomes
* To record if the risk has been removed, reduced or remains

**Who has responsibility?**

* The Enquiry Practitioner will present the Closure Summary to the Safeguarding Adults Manager for approval or closure.
* The Safeguarding Adults Manager will audit to ensure that actions are completed as appropriate.
* All outstanding actions should be addressed prior to closure. Any outstanding issues will, be returned to the Enquiry Practitioner to action within agreed timescales.

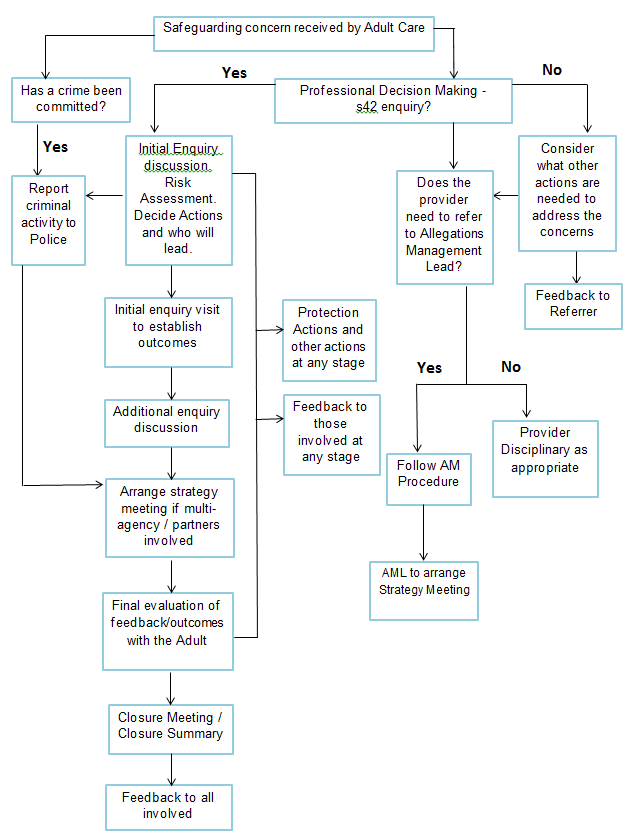
**Recording:** The Enquiry Practitioner must complete the Closure Summary following all Safeguarding Enquiries unless advised otherwise.

The Safeguarding Adults Manager must approve the Closure Summary and in doing so undertake a Case File Audit.

**Timescales**

The timescales will be dictated by the complexity of the Enquiry – some may be closed in a day and other may last years. What is important is to ensure there is active risk management.

Where possible, the number of days from the date of Safeguarding Concern to Closure Summary date should not exceed 90 calendar days in cases that DO require a Strategy Meeting.



**Appendix 1** – Strategy Meeting Agenda template



**Appendix 2** – Strategy Meeting Minutes template



**Appendix 3** – Outcomes Meeting Agenda template



**Appendix 4** – Outcomes Meeting Minutes template

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