

Version: V7.1 FOI Status: Public	Derbyshire Safeguarding Vulnerable Adults Partnership. Safeguarding Adults Policy and Procedures	Issued: November 2009 Review Due: November 2010
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## Derbyshire County Council Adult Care

# Derbyshire Safeguarding Vulnerable Adult Partnership Safeguarding Adults Policy and Procedures

### Approval and Authorisation

Completion of the following signature blocks signifies the review and approval of this process

Name	Job Title	Date
Authored by: Andrew Hambleton	Project and Planning Manager (Safeguarding Adults)	October 2009
Approved by: Mary McElvaney	Assistant Director	October 2009
Authorised by:	Policy and Procedures Group	November 2009

### Change History

Version	Date	Name	Reason
V 1	January 1999		New Adult Protection Procedures
V 2	September 2001		Updated Procedures
V 3	January 2004		Updated Procedures
V 3.1	May 2006		Draft revision of procedures incorporating new title – Safeguarding Adults, in light of government guidance and introduction of Safeguarding Boards
V 4	February 2007		Revised Procedures
V 5	July 2008		Annual Review
V 6	November 2008		Revised Procedures
V 7	November 2009	Andrew Hambleton	Draft revision of procedures
V 7.1	November 2009	Andrew Hambleton	Final procedures

This document will be reviewed on a regular basis if you would like to make any comments, amendments, additions etc please email Dawn Nash – Procedures and Information, [dawn.nash@derbyshire.gov.uk](mailto:dawn.nash@derbyshire.gov.uk)



# Derbyshire Safeguarding Vulnerable Adult Partnership

## Safeguarding Adults Policy and Procedures



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**Contents**

	<b>Page</b>
<b>Policy</b>	2
Introduction	2
Policy Principles	6
<b>Procedures</b>	9
Introduction	9
Primary Prevention of Abuse and Neglect	10
Who is a Vulnerable Adult	10
Young People	10
The Safety of those who are not Vulnerable	11
What is Abuse and Neglect	11
Who are the potential Abusers	15
Circumstances in which Abuse or Neglect may Occur	15
Stage 1 Alerting others in Own Agency of Suspicions of Abuse or Neglect	17
Stage 2 Making a Referral	18
Stage 3 Decisions	20
Stage 4 Safeguarding Strategy Meeting	21
Stage 5 Safeguarding Case Conference	24

## Derby Safeguarding Adults Board and Derbyshire Safeguarding Vulnerable Adults Partnership Policy

### 1. Introduction

The purpose of the Derby City Safeguarding Adults Boards Policy, and the Derbyshire Safeguarding Vulnerable Adults Partnership Safeguarding Adults Policy and Procedures, is to make explicit the responsibilities of all professionals, volunteers and agencies working to protect vulnerable adults.

The effective operation of each boards Policy/Policy and Procedures requires:

- The recognition of the risk of abuse and neglect
- Knowledge of the six strands of diversity and equal opportunities
- Safeguarding Referral Form
- Legal, necessary and proportional strategies to respond to the risk of and reports of abuse and neglect
- Completion of an appropriate level of training including refresher training.

Copies of the Derby City Safeguarding Adults Boards Policy, and the Derbyshire Safeguarding Vulnerable Adults Partnership Safeguarding Adults Policy and Procedures as well as Safeguarding Referral Forms are available from:

**Derby City** – Telephone Derby Adult Social Care on 01332 717777

A copy of the Derby City Safeguarding Adults Board Policy and Procedures and for download and information on training is available from [www.derby.gov.uk](http://www.derby.gov.uk)

General queries only concerning the operation of the Procedures may be directed to the Safeguarding Adults Team on 01332 717777

**Derbyshire** – Telephone Call Derbyshire on 0845 605 8058

The Policy and Procedures, for download and information on training is available from [Safer Derbyshire](#).

This Policy has been revised following an Equality Impact Assessment.

These policy and procedures have been agreed by the Derby Safeguarding Adults Board and the Derbyshire Safeguarding Vulnerable Adults Partnership

### 1.2 Derby Safeguarding Adults Board

The Derby Safeguarding Adults Board have produced and agreed this Policy and Procedures.

The Board is a multi agency group led by Derby City Council with the remit to steer, and provide governance to the joint arrangements for safeguarding vulnerable adults.

The Board includes representatives of the chief executives of:

Derby City Council  
Derby Hospital NHS Foundation Trust  
NHS Derby City  
Derbyshire Mental Health Trust  
Derbyshire Police  
Derbyshire Probation  
Derbyshire Fire and Rescue Service  
East Midlands Ambulance Service  
Voluntary and User Led Representation

If a Board agency believes the Policy, or if the Procedures and Guidance, are not operating successfully, then their lead officer for safeguarding adults is responsible for assessing the concern and if appropriate to raise the issue with the Derby Safeguarding Adults Board.

The Derby Safeguarding Adults Board will jointly review this Policy with the Derbyshire Safeguarding Vulnerable Adults Partnership on an annual basis.

### **1.3 Derbyshire Safeguarding Vulnerable Adults Partnership**

The Derbyshire Safeguarding Vulnerable Adults Partnership have produced and agreed this policy and procedures. The Partnership is a multi agency partnership lead by the local authorities with the remit to steer, and provide governance to the joint arrangements for safeguarding vulnerable adults.

The Partnership includes representatives of the chief executives of:

Derbyshire County Council  
Derbyshire Police  
Derbyshire Probation  
Derby Hospital NHS Foundation Trust  
Chesterfield Royal NHS Foundation Trust  
NHS Derby City  
Derbyshire County Primary Care Trust  
Derbyshire Community Health Services  
Derbyshire Learning Disability Services Partnership  
Derbyshire Mental Health Trust  
Tameside and Glossop Primary Care Trust  
Crown Prosecution Service  
Care Quality Commission  
Derbyshire Advocacy  
Derbyshire Rape Crisis  
Age Concern Derby & Derbyshire  
Derbyshire Victim Support  
Derbyshire Independent Mental Capacity Advocate Service  
The Westwick Group (Independent Care Provider)

## Derbyshire Centre for Inclusive Living

The Safeguarding Vulnerable Adults Partnership includes representation from local groups advocating on behalf of vulnerable adults and their carers.

If a partner agency believes the policy and procedures are not operating successfully, then their lead officer for safeguarding adults is responsible for assessing the concern and if appropriate to raise the issue with the Safeguarding Vulnerable Adults Partnership.

The Derbyshire Safeguarding Vulnerable Adults Partnership will jointly review this Policy with the Derby Safeguarding Adults Board on an annual basis.

### 1.4 National Guidance

The Derby Safeguarding Adults Board and the Derbyshire Safeguarding Vulnerable Adults Partnership work in accordance with “No Secrets: Home Office and Department of Health guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse<sup>1</sup>”.

The Board and the Partnership have adopted guidance from the Association of Directors of Adult Social Services: “Safeguarding Adults: A National Framework of Standards for good practice and outcomes in adult protection work<sup>2</sup>”.

### 1.5 Area of Jurisdiction of Policy and Procedure

This Derby City Safeguarding Adults Boards Policy, and Procedures and Guidance, and the Derbyshire Safeguarding Vulnerable Adults Partnership Safeguarding Adults Policy and Procedures operate where the abuse or neglect of a vulnerable adult is alleged to have taken place in Derby or Derbyshire.

The local authority or mental health service responsible for the area in which the abuse or neglect has allegedly occurred will take responsibility for operation of their policy and procedures. Partners from the Board/Partnership will fully adhere to the procedures of the area taking responsibility.

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<sup>1</sup> No Secrets: Home Office and Department of Health guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse. Available from: [http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4008486](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4008486)

<sup>2</sup> Safeguarding Adults: A National Framework of Standards for good practice and outcomes in adult protection work. Available from: [The ADSS National Framework Safeguarding adults](#)

Where a vulnerable adult receives services from another authority but is resident or located in this area the other authority will be informed and will follow the safeguarding procedures for Derby or Derbyshire.<sup>3</sup>

## 2 Policy

### 2.1 Principles

The need for this joint Policy and each Boards procedures is based on each Boards:

- recognition that the Human Rights Act 1998 applies equally to every person regardless of their age, race, religion, gender, sexuality, disability or immigration status and that people have a right to make decisions for themselves
- knowledge that a lack of capacity, illness, age, race, religion, gender, sexuality, disability or immigration status may severely compromise a person's ability to keep safe
- that information sharing and multi-agency working raises the likelihood that vulnerable adults will be safeguarded
- a commitment to provide appropriate information to members of the public and training to staff and volunteers
- abuse can take place in any context. It may occur when a vulnerable lives alone or with a relative; it may occur within nursing, residential or day care settings, in hospitals, custodial situations, support services into peoples own homes and other places previously assumed safe or in public places.<sup>4</sup>

### 2.2 Definition of Vulnerable Adult

A vulnerable adult, for the purpose of the procedures is any person aged 18 years or over who:

- is or appears to be eligible for Local Authority/Mental Health Services' assistance by reason of mental ill health, physical or learning disability, illness or age related frailty

#### And

- may be unable to take care of him/herself or unable to protect him/herself against significant harm or exploitation.

**A vulnerable adult who has commissioned their own services will be safeguarded by this policy and the procedures for each respective authority.**

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<sup>3</sup> [ADSS Protocol for Inter-Authority Investigation of Vulnerable Adult Abuse](#)

<sup>4</sup> No Secrets page 11: Home Office and Department of Health guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse. Available from: [http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4008486](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4008486)

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## 2.3 Information Sharing

The appropriate sharing of information between agencies is vital for the identification of and reduction of abuse, neglect or risk to safeguard vulnerable adults. This information sharing agreement forms a Second Tier agreement under the overarching Derbyshire Partnership's Joint Information Sharing Protocol<sup>5</sup>. The Data Protection Act 1998 and Caldicott principles will apply.

If abuse of a vulnerable adult is alleged, discovered or suspected it will be made clear that such information may need to be shared with other agencies on a "need to know" basis. The person should be advised if the information is to be shared with another agency and the reasons for doing so.

The service user's consent to the sharing of information should always be sought before disclosure to another agency. In some circumstances information about a person may be disclosed without their consent. When overriding a service user's wish for confidentiality, staff will be clear about their reasons for doing so. Such reasons could include:

- the service user lacks mental capacity to make an informed decision when a specific decision needs to be made<sup>6</sup>
- there is a risk of harm to that vulnerable adult
- there is potential risk of harm to others
- the alleged abuser is a staff member or voluntary worker with access to other vulnerable people
- it is necessary for the prevention of crime or disorder
- the condition for information sharing regarding the Domestic Violence Multi Agency Risk Assessment Conferences (MARAC) is met: 'to identify those victims who are of a high risk of serious harm, personal harm, or injury from domestic violence which is life threatening and or traumatic and from which recovery whether physical or physiological can be expected to be difficult or impossible'.<sup>7</sup>

The "need to know" criteria should be applied to:

- those who are involved in a particular investigation of abuse

The information to be shared should only be that which is relevant to safeguard vulnerable adults.

## 2.4 Relationship with other Procedures and Policies

<sup>5</sup> Derbyshire Partnership's Joint Information Sharing Protocol.

<sup>6</sup> Mental Capacity Act 2005 Code of Practice. Available from <http://www.justice.gov.uk/docs/mca-cp.pdf>

<sup>7</sup> Domestic Violence Multi Agency Risk Assessment Conferences (MARAC) [Safer Derbyshire - MARAC](#)

Where there is concern that someone is being abused, neglected or is being affected by abuse, who does not meet the above definition as a vulnerable adult, then other procedures or guidance may apply:

- Safeguarding Children<sup>8</sup>
- Derbyshire Domestic Abuse: MARAC<sup>9</sup>
- Forced Marriage<sup>10</sup>
- Multi Agency Public Protection Arrangements (for more information contact the MAPPA Coordination Unit/Public Protection Unit based at Derbyshire Constabulary Headquarters (01773 572271)
- Community Safety Services – including anti social behaviour services

In all cases information will be supplied to the person about universal safety services.

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<sup>8</sup> Safeguarding Children <http://www.derbyshirescb.org.uk/procedures/>

<sup>9</sup> Domestic Violence Multi Agency Risk Assessment Conferences (MARAC [www.saferderbyshire.gov.uk/staying safe/domesticabuse/marac](http://www.saferderbyshire.gov.uk/staying-safe/domesticabuse/marac))

<sup>10</sup> Forced Marriage Unit [Forced Marriage Unit](#)

## Derbyshire Safeguarding Adults Procedures

### 1. Introduction

These procedures and professional guidance are available on the [Safer Derbyshire](#) website. Hard copies of the procedures are available from the Procedures and Information Team, Quality Assurance, County Hall, Matlock, Derbyshire, DE4 3AG or call 01629 53 2454 or 01629 53 2237

A workflow chart to provide guidance on the procedures is available [here](#)

These procedures **are inclusive** and describe the framework for responding to **all** adults who may be at risk of abuse and neglect in Derbyshire. It then provides detailed procedures to ensure the safety of those adults who are defined as vulnerable within these procedures as required by Home Office and Department of Health [No Secrets Guidance](#).

Derbyshire Adult Care Safeguarding Adult Managers have a specific responsibility to provide guidance and advice to staff as to which situations require the operation of these procedures.

- 1.2 These procedures have been endorsed by the executive body of each partner organisation.
- 1.3 The executive body of each partner organisation is accountable for the operation of these procedures and will designate a agency lead for safeguarding adults.
- 1.4 Partner organisations and the strategic partnerships to which they belong will actively promote these procedures with their staff. This will always include providing the [staff briefing card](#)
- 1.5 Partner organisations will actively encourage referrals from the public to ensure the earliest possible identification of risk of abuse and neglect.
- 1.6 The Safeguarding Vulnerable Adult Partnership will ensure that information about these procedures are accessible and available to all, alongside information as to how to stay safe. This will include providing the public with sight of the [safeguarding adult poster](#) and access to the [safeguarding adult information leaflet](#) and/or the [safeguarding adult easy read information leaflet](#). Reasonable access requires partner agencies to address the particular communication needs of the public they serve including minority communities and those excluded groups of vulnerable adults who are less resilient due to economic deprivation, or drug and alcohol abuse.
- 1.7 Each partner organisation and all the services they commission will have their own internal procedures which are consistent with these procedures and which specify the responsibilities of staff.

**1.8** These procedures have been endorsed by service user lead organisations. It emphasises that adults facing abuse and neglect must be fully involved in managing their own safety.

**1.9** Where a member of staff of a partner agency has concerns regarding the effective operation of these procedures then this will be raised with the lead officer for the agency. The lead officer will address with the relevant partner lead officer/s. Where differences can not be speedily resolved then the chair of the Safeguarding Vulnerable Adults Partnership will be informed in order to facilitate resolution through contact as necessary with relevant chief officers.

## **2. Primary Prevention of Abuse and Neglect**

Partner organisations will work to prevent abuse or neglect occurring in the first instance (primary prevention):

- In the community
- Within the service they deliver directly or via commissioned services

Further information is available from [the ADSS National Framework Safeguarding adults](#)

## **3. Who is a Vulnerable Adult?**

A vulnerable adult, for the purpose of these procedures is any person aged 18 years or over who:

- is or appears to be eligible for Adult Care/Mental Health Services' assistance by reason of mental ill health, physical or learning disability, illness or age related frailty

**And**

- may be unable to take care of him/herself or unable to protect him/herself against significant harm or exploitation.

**NB** Mental ill health, physical or learning disability, illness or age related frailty can impact on a person's ability to protect himself/herself against significant harm or exploitation **whether or not** the person has the mental capacity to make informed choices concerning their own safety.

Eligibility for adult care or mental health services can be triggered by a range of factors, and can only be properly understood through an assessment of the individual/family in its overall social context. Each situation needs consideration as to whether the persons physical and/or mental health or capacity needs adversely impacts on their access to safeguarding measures.

## **4. Young people**

When a young person reaches the age of 18 the responsibility for their wellbeing may transfer to adult service providers. Although they cease to be

subject of safeguarding children procedures, young adults may continue to be vulnerable. All staff involved in their care have a duty to ensure that during this transition, relevant and appropriate measures are taken to promote and safeguard their welfare.

This requirement is common with section 1.49 of the [Derby and Derbyshire Safeguarding Children Procedures](#)

Where a child is reaching the age of 18 years and is subject to safeguarding children concerns, or where there is identified risk of abuse or neglect on or following their 18<sup>th</sup> birthday, then a referral under Safeguarding Procedures will be made.

A referral will also be made where it is anticipated that there will be a identified risk of abuse regarding someone reaching the age of 18 because of change of legal status (for example the end of a child care order).

## 5. The safety of those who are not vulnerable as defined above

Partner agencies will ensure their statutory and legal responsibilities are discharged to ensure the safety of **all** citizens at risk of abuse and neglect including:

- Providing immediate and emergency assistance
- Sharing information with other agencies:

Agencies may be sharing information about an adult as part of their statutory responsibility to deliver more effective intervention at an earlier stage to prevent problems escalating and to increase the chances of achieving positive outcomes. However there may also be situations where agencies may want to share information because they are concerned about serious harm to an adult who is not vulnerable under these procedures.

Further information concerning both adults and children from [HM Government: Information Sharing: Guidance for managers and practitioners](#)

Application of other joint procedures and protocols including:

- [Joint Protocol for Domestic Abuse](#)
- [Multi Agency Risk Assessment Conference \(MARAC\)](#)
- Providing informed choice and access to other universal and specialist safety, and recovery services. See [Safer Derbyshire: Staying Safe](#)

## 6. What is abuse and neglect?

Abuse is a violation of an individual's human and civil rights by any other person or persons.

## 6.1 Physical Abuse

Threshold: Physical abuse is the physical ill treatment of an adult which may or may not cause physical injury or death\* such as:

Examples of physical abuse include:

- Assault and battery
- Hitting, slapping, scratching
- Pinching and shaking
- Misuse of medication and treatments
- Pushing or rough handling
- Unwarranted or inappropriate restraint, forced isolation or confinement, or
- Unauthorised deprivation of a persons liberty
- False imprisonment or abduction.

\* Where there is concern that abuse may be a contributory cause of death of a vulnerable adult the deceased vulnerable adult will be subject to these procedures in order to investigate and assess any risks to other vulnerable adults.

Physical abuse can also occur when people are not provided with adequate care and support, causing them unjustifiable, unwarranted or inappropriate restraint, forced isolation or confinement.

Physical abuse also includes the improper administration of drugs, treatments or medication.

## 6.2 Sexual Abuse

Threshold: The involvement of individuals in sexual activities, to which they may not have given informed consent, may not fully comprehend or with which they do not wish to continue or that violate the social taboos of family roles, eg:

Sexual abuse usually involves acts performed by the abuser on the person who is abused but it might sometimes involve situations where the perpetrator forces or persuades the other person to do things to the abuser or to others

Examples of sexual abuse include:

- Inappropriate touching/indecent exposure
- Non contact abuse - eg pornography
- Rape or attempted rape
- Sexual harassment
- Sexual assault
- Causing or inciting a person to engage in sexual activity without their consent
- Vulnerable adults involved in sexual exploitation.

### 6.3 Psychological Abuse

Threshold: Psychological abuse results from being repeatedly made to feel unhappy, anxious, afraid, humiliated or devalued by the actions or inactions and/or attitudes of others. This may result in the person self harming or attempting or committing suicide\* This may include:

- Emotional abuse
- Humiliation, ridicule and cruelty
- Abuse of Izzaat (honour/shame)
- Forced Marriage
- Threats of punishment
- Intimidation e.g. name calling, threats, shouting, verbal abuse
- Forced withdrawal from critical services or denying service access to vulnerable adult
- Significant community pressures such as anti – social behaviour.

Where there is concern that psychological abuse may be a contributory cause of death of a vulnerable adult the deceased vulnerable adult will be subject to these procedures in order to investigate and assess any risks to other vulnerable adults.

### 6.4 Discriminatory Abuse

Threshold: Discriminatory abuse is any type of abuse (refer to the separate sections) including psychological abuse and harassment that is racist, sexist or linked to a person's age, disability, sexual orientation, cultural background or religion.

Discriminatory abuse includes:

- Racial harassment
- Harassment based on gender or sexual orientation
- Insults or harassment based on disability
- Denial of cultural or religious needs
- Hate Crimes.

### 6.5 Financial Abuse

Threshold: Misappropriation of an individual's funds, benefits, savings etc or any other action that is against the person's best interests, eg:

- Theft of money, possessions, property or other material goods
- Misuse of money
- Fraud or extortion of material assets
- Persuading a vulnerable adult to enter into a financial agreement which is to their detriment.

### 6.6 Neglect

Threshold: Neglect is the deliberate withholding *OR* unintentional failure to provide appropriate and adequate care and support.

Neglect manifests itself in the extent to which a person's physical and/or mental well-being is seriously impaired or results in death\* eg:

- Failure to keep the person clean, warm and in good health
- Failure to provide reasonable care
- Failure to give prescribed medication
- Failure to give privacy and dignity
- Failure to provide supervision for behaviour which could be dangerous
- Failure to access medical care or technical aids
- Failure to provide nourishment
- Failure to manage tissue viability – guidance on tissue viability and safeguarding is available [here](#)

\* Where there is concern that neglect may be a contributory cause of death of a vulnerable adult the deceased vulnerable adult will be subject to these procedures in order to investigate and assess any risks to other vulnerable adults.

## 6.7 Self Neglect

Regard needs to be given to situations where a vulnerable adult may be neglecting him/herself. Examples of this may include any alcohol dependency, self neglect of health care or poor living conditions.

These procedures **apply** where individuals or agencies have not provided access to reasonable levels of information, advice or support to the person concerned.

These procedures do **not apply** where there is no perpetrator or system of care implicated. However a full multi agency review may be required to ensure the person is provided with full informed choice concerning their situation or where a best interest decision regarding safety is required where a person lacks capacity to manage their own safety.

## 6.8 Risk of Abuse/Neglect

An alert and referral will be made where:

- Systems of care provided to vulnerable adult or adults are **highly likely and imminently** to result in the abuse/neglect of a known vulnerable adult or adults.
- A individual is assessed as being at imminent risk of harming **known** vulnerable adult or adults.
- Indicators of individuals who may pose a imminent risk of harming vulnerable adults **may** include:
  - Individuals convicted of offences that indicate they may be a risk to children or adults; Individuals known to have been cautioned/warned or reprimanded in relation to an offence against children or adults;

- Individuals against whom there is a previous finding of fact in civil proceedings;
- Those about whom there has been a previous safeguarding children or adult enquiry which came to the conclusion that there had been abuse;
- An individual who has admitted past abuse of a child or vulnerable adult;
- Offenders convicted of serious crimes against adults who are notified to the local authority, because the prison or probation services are concerned about the possible risk to vulnerable adults;
- Offenders who come to the attention of the MAPPAs
- A person barred by the Independent Safeguarding Authority.

Where there is a concern that a individual poses a risk to vulnerable adults but there is **no** information available as to any **known and identifiable** vulnerable adults who may be at risk then partner agencies will ensure investigations are made and information is shared with due regard to the requirements of:

- the [Crime and Disorder Act](#)
- [Independent Safeguarding Authority](#) .and
- Derbyshire Multi Agency Public Protection Arrangements (for more information contact the MAPPAs Coordination Unit/Public Protection Unit based at Derbyshire Constabulary Headquarters (01773 572271))

## 7. Who are the Potential Abusers?

Vulnerable adults may be abused/neglected by a wide range of people including:

- Current or former partners or family members. **i.e. domestic abuse** (see 8.3 below)
- Professional staff:

Where a member of staff is alleged to have abused a vulnerable adult then it is important that any disciplinary investigation is coordinated with other safeguarding investigations and assessments tasked by the strategy meeting.

The disciplinary investigation is a separate investigation but coordination and ongoing information sharing is essential. The conduct of a disciplinary investigation should not prevent an investigation by the police, regulatory authorities or other agencies complying with these Safeguarding Adult Policy and Procedures. Equally the police, regulatory authorities or any other agency who undertake an investigation should not prevent a disciplinary investigation from taking place.

- Paid or unpaid care workers (including those employed through direct payments)
- Volunteers
- Other service users

- Neighbours and associates
- People who deliberately target vulnerable people
- Strangers
- Vulnerable adults may also be abusers.

**NB:** Abuse by strangers will warrant a different kind of response to abuse/neglect in an ongoing relationship or in a care location *but* in some instances these procedures should be used to ensure that the vulnerable person receives the services and support they need.

Even where the application of the procedures is not required there may be a need to consider the situation of vulnerable adults who may be associated with the alleged abuser eg family members.

Where the procedures are not required to assist a vulnerable adult abused by a stranger then other steps may need to be taken eg a direct report to the police if a criminal matter and/or consideration of any children associated with the abuser.

## 8. Circumstances in which abuse or neglect may occur

### 8.2 Institutions

These procedures apply in all group living and group care settings. These include residential and nursing homes, independent and NHS acute and community hospitals, custodial situations, probation hostels and all forms of group day care.

Abuse in an institution includes the practice of a regime or culture which is abusive and destroys the dignity and respect to which every person is entitled. Abuse can occur when the individual's wishes and needs are sacrificed for the smooth running of an institution, organisation or home.

Abuse in an institutional setting includes, for example:

- Treating adults as children
- Denial/failure to promote people's rights
- Provision of an unsafe or unhygienic environment
- Lack of privacy
- Lack of provision for dress, diet, religious observance or personal relationships for adults regardless of their age, disability, religion, gender, sexual orientation, race or immigration status.

### 8.3 Domestic Abuse

[The Derbyshire Domestic Abuse Protocol](#) defines abuse as: "Emotional, physical, sexual or psychological abuse by the partner, ex-partner, family member or someone with whom there has been a relationship.

Domestic abuse includes any form of physical, sexual or emotional abuse between people in a close relationship.

It can take a number of forms such as physical assault, sexual abuse, rape, threats intimidation and forced marriage. It may be accompanied by other kinds of intimidation such as degradation, mental and verbal abuse, humiliation, deprivation, systematic criticism and belittling.

In the overwhelming majority of instances the abuser is male and the victim is female although this is not always the case. The abuse is not always between partners or former partners but may occur across generations e.g. son to mother. It also occurs in same sex relationships.”

All domestic abuse services provided or commissioned by partner agencies will adhere to these procedures and ensure that a referral under these procedures are made whenever a vulnerable adult is domestically abused or is at risk of domestic abuse. Domestic abuse will impact on a persons ability to take care of him/herself or unable to protect him/herself against significant harm or exploitation

All safeguarding risk assessments and safeguarding plans under these procedures will address the requirements of the Joint Protocol.

#### **8.4 Self Directed Support**

Partners acknowledge that providing adults and or their representatives with the choice and control provided by self directed support enhances the person’s resilience to abuse and neglect. Mutually agreed risk assessments for service provision will enhance the likelihood of safe outcomes.

The person using self directed support will be fully involved in these procedures as a equal partner as both the vulnerable adult who may require assistance in order to make informed choices or “best interest” decisions, but also as a commissioner or employer of a implicated service or individual.

The risk assessment for self directed support and the delivery of the support plan will always be reviewed to address any risks and safeguarding actions identified through the operation of these procedures.

#### **8.5 Diversity**

Each community in Derbyshire has particular areas of resilience and vulnerability regarding different types of abuse and neglect.

Partner agencies will have regard to these areas in addressing whether a referral is required under these procedures.

Risk assessments and safeguarding plans will address these areas in ensuring safe outcomes for vulnerable adults.

## 8.6 Sexual Exploitation and Trafficking

Behaviours that indicate a vulnerable adult is involved in sexual exploitation can include:

- Physical symptoms such as sexually transmitted diseases
- Physical injuries consistent with physical or sexual assault
- Presence in an area where soliciting takes place
- Being contacted by men who would not normally feature in the social life of the vulnerable adult
- Development of a relationship with someone who encourages emotional dependence and control based on threats or violence
- Acquisition of money or other materials with no verifiable explanation
- Self harming behaviour
- Substance, drug or alcohol abuse.

For more information see [Section 58 of the Sexual Offences Act 2003](#) and [the UK Action Plan on Tackling Human Trafficking, United Kingdom Human Trafficking Centre \(UKHTC\)](#)

## Stage One: Alerting Others in Own Agency to Suspicions of Abuse/Neglect

### 9. All staff should refer to the [safeguarding briefing card](#).

The person who observes the abuse/neglect or is informed that abuse/neglect may have occurred is responsible for immediately alerting others in their own agency through their **own agency's agreed internal safeguarding procedures that will describe the responsibilities of staff and managers to ensure the timely operation of these procedures**. It is recognised that staff who alert others in good faith will receive full support for their actions.

Where that person is concerned that appropriate action has not or will not be taken, s/he should report directly to the officer, where designated, who has the lead for Safeguarding Adults within their organisation.

If there is no lead person or the person remains concerned that action will not be taken, the use of the agency's "whistle blowing procedures" will be followed to ensure appropriate action is taken. Action taken intended to secure the safeguarding of vulnerable adults may be covered by the "Public Interest Disclosure Act" 1998. Further information can be found from the independent [Public Concern at Work](#) or phone 0207 404 6609.

Written records of all information received from the vulnerable adult, any witnesses and the alleged perpetrator *must* be kept.

In emergency situations i.e. when the person is in immediate need of medical attention or where the abuse/neglect is observed, immediate action should be taken to safeguard the vulnerable person and/or preserve evidence.

Immediate support assistance with recovery and care should always be provided.

## Stage Two: Making a Referral: Time standard: Within the same working day as the alert being made

### 10. When Should a Referral Be Made?

A referral will be made in **every** instance where following as full assessment of the situation as is possible in the same working day as the alert being made:

- There is reasonable concern that a person has been abused or neglected (or is at risk of abuse or neglect) as defined above

#### **And**

- The person concerned is a vulnerable adult as defined above.

The only exception will be where the only suspected abuse is perpetrated by a stranger **and** these procedures are not required to ensure that the vulnerable person receives the services and support they need.

Each agency has the responsibility for ensuring that the concern is reasonably established before making a referral.

Where there is a decision **not** to refer then the manager will ensure the member of the public has full access to appropriate specialist and universal safety services and that any other relevant procedures, protocols or guidance are brought to bear to enhance the safety of the adult.

Each agency has the responsibility to ensure that the alerter is given appropriate feedback as to the actions taken to safeguard following their alert.

### 11. Who to Refer To?

Where the abuse/neglect of a vulnerable adult is alleged to have taken place, or is at risk of taking place in Derbyshire, the report will be made to a member of staff in Derbyshire County Council Adult Care or in Derbyshire Mental Health Services who is responsible for the services provided to the vulnerable adult.

Where no member of staff or duty officer can be quickly identified then contact will be made to Derbyshire Adult Care by telephoning Call Derbyshire 0845 605 8058

Where the abuse/neglect is alleged to have taken place outside of Derbyshire the safeguarding procedures of the area where the abuse/neglect has occurred should be followed

### 12. How will the Referral be Made?

- The referral will be by telephone or face-to-face contact.
- This referral will be confirmed by the completion of the Safeguarding [referral form](#). A copy of the referral will be sent to the address or fax

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number as directed by the person receiving the report. The use of the referral form ensures that those responsible for referring concerns on safeguarding are making it explicit that it is a safeguarding concern that prompts the referral.

- The person referring will preserve the original referral card and any other hand written (i.e. not electronic) information related to the safeguarding concern as a potential piece of evidence until the strategy meeting. Derbyshire Police at the strategy meeting stage will indicate whether they will request the retention of any such information.

**Stage Three: Decision: Time standard: By the end of the working day  
on which the referral was received.**

- 13.** A service manager within Derbyshire County Council Adult Care or Derbyshire Mental Health Services will ensure there is a immediate interim safeguarding plan in place and instigate local and cross-agency checks to gather relevant information related to the referral.

They will establish whether the vulnerable adult or the alleged perpetrator is known to any agency and whether that agency may have relevant information or require information to safeguard vulnerable adults.

All cases will proceed to a strategy meeting where within the terms of these procedures:

- The person concerned is a vulnerable adult.  
And
- There is reasonable concern that a person has been abused or neglected or is at risk of abuse or neglect in Derbyshire.  
And
- Where the alleged abuser is a stranger then use of the procedures will provide the support and services the victim needs to stay safe.

- 13.1** On the information provided, a service manager in Adult Care or Mental Health Services will make a recorded decision as to whether the referral will proceed under the Safeguarding Adults Procedure to a strategy meeting and inform the referrer of the decision.

Where there is a decision not to proceed to a strategy meeting then the manager will liaise with the referring agency or member of the public to ensure appropriate universal safety services are offered to the adult and any other relevant procedures, protocols or guidance are brought to bear to enhance the safety of the adult. Derbyshire Adult Care or Derbyshire Mental Health Services will record the assistance offered and provided.

**Stage Four: Safeguarding Strategy Meeting: Time standard: To commence on the day of the referral being received. To be completed within five working days of the referral being received**

14. The Safeguarding Strategy Meeting may be held as a single meeting **and/or** as a series of telephone/face to face discussions. A meeting may need to be held in stages to ensure that information is shared only on a need to know basis.

The meeting is the means by which a multi-agency strategy is formulated for investigating/assessing risks to vulnerable adults and to implement an interim safeguarding plan for the person concerned and to share information to ensure review of the immediate safety needs of other adults and children.

Risk assessments will always include consideration of those factors relating to the vulnerable adults situation but also the implicated system of care or individual perpetrator.

An appropriate manager within the Adult Care/Mental Health Services will be allocated to chair the strategy meeting and case conference. Normally this will be the manager who would be normally responsible for management of the services to that vulnerable adult. However in certain circumstances an Area Manager from Adult Care or a Senior Manager from Mental Health Services will ensure another manager will chair the strategy meeting and case conference. These circumstances include:

- Where the Local Authority or Mental Health Service is implicated (as providers or commissioners of services) then a manager of sufficient seniority from another service area, or the safeguarding vulnerable adults service manager will be allocated. In some circumstances it will be appropriate for another partner agency to chair via consultation between the relevant agency leads.
- Where the severity, complexity or wide impact of the issues raised by the referral (for example abuse within an institution impacting on several vulnerable adults) requires the meetings to be chaired by the Safeguarding Vulnerable Adults Manager.
- Where the locality of the alleged abuse is at a distance from the locality of the managers who have responsibility for the management of services to that vulnerable adult.

- 14.1 In **all** circumstances the Area Manager in Adult Care or the Senior Manager in the Mental Health Services normally responsible for services to that vulnerable adult **retains** overall responsibility for ensuring the operation of these procedures to ensure the safety of the vulnerable adult.

The allocated manager will decide on who is to be involved in the strategy meeting and whether this is best agreed via a series of separate discussions **and/or** via a meeting.

Telephone/face to face discussions should commence as promptly as possible, within the same day, to confirm the interim safeguarding plan and so that urgent investigations can commence to ensure the accurate recall of events by witnesses and the need to preserve and to secure further evidence.

The manager will be responsible for ensuring that the case is monitored. Derbyshire Adult Care managers should ensure monitoring is via framework input. Derbyshire Mental Health Managers will monitor via the [Safeguarding Monitoring Form](#).

The following agencies and/or individuals **will always be involved in a strategy meeting** whether as part of a meeting or via a telephone or face to face discussion which will form part of the strategy meeting and be recorded as such:

- Police where the matter referred may constitute a crime via the Central Referral Unit (0845 123 3333). See [Derbyshire Police Operating Guidance regarding vulnerable adult referrals](#)
- Care Quality Commission where a regulated setting is involved.
- The vulnerable adult and/or their advocate or representative
- The vulnerable adult concerned and/or their “suitable person” (as defined by [Guidance on Direct Payments 2009](#)) and Derbyshire Adult Care Direct Payments section where they are also employers of implicated staff or purchasers of implicated services.
- Purchasers of care and health arrangements from the relevant Local Authority (including “out of county” local authorities) or NHS body (for example NHS continuing care)
- Adult Care central assessments team, where financial abuse of a vulnerable adult without capacity is a concern.
- Providers and co-ordinators of any care/treatment to the vulnerable adult (including primary care).
- Where the provider/coordinating agency employs someone implicated in the referral the discussion may involve the provider/coordinator’s audit, counter fraud department as required.
- Any agency for which a implicated person is conducting a “regulated activity” under the [Safeguarding Vulnerable Groups Act 2006](#)
- Any Authority with [Section 17](#) responsibilities under the [Crime and Disorder Act 1998](#) who may have relevant information or responsibilities in this particular case. This might include

District Council Community Safety, Anti Social Behaviour or Housing Officers.

- o Universal services that are available to all adults facing the type of abuse and neglect identified

If any of the above agencies are implicated in the referral then the allocated manager will ensure that the appropriate level of manager (**if any**) from the implicated agency is involved.

The allocated manager will be responsible for ensuring the completion and distribution of an accurate written record of the complete meeting within five working days to all those invited to attend and the other agencies identified as to be informed. It may however be necessary to restrict access to the full record to certain parties to the meeting. In these circumstances the chair will ensure there is a record of what information has been shared with whom.

## 15. Safeguarding Strategy Meeting

### Agenda

The strategy meeting recording [template and checklist](#) will always be used.

1. Detail background information and the relevant chronology including previous safeguarding concerns
2. Detail the present safeguarding allegations/incidents/concerns raised in the referral
3. From the information available agree safeguarding risks and interim safeguarding plan based on the informed choice of the vulnerable adult or their "[best interests](#)"
4. Consider the need for information sharing and review of the safety needs of other members of the public including other vulnerable adults in light of the risk assessment. Task the review responsibilities. Is there now information available that requires a referral under these procedures concerning another vulnerable adult?
5. **If all risks are identified** then is the alleged abuse/neglect substantiated or unsubstantiated?
  - If unsubstantiated then confirm any actions outside of procedures which may enhance the safety of vulnerable adults
  - If substantiated then move to the case conference agenda **if all relevant parties are present at the meeting.**

6. **If all risks are not identified** then task the assessment/investigation required from each agency and the overall [safeguarding risk assessment](#) (other than where the vulnerable adult is deceased). Each partner agency will take responsibility for identifying those risks specifically related to their area of responsibility as they relate to a person's safety, recovery, civil and criminal redress. The risk assessment/investigation will always address the vulnerable adult's circumstances but also the risks posed by implicated individuals or provider and commissioning systems.
7. Commission an Independent Mental Capacity Advocate (IMCA) where the vulnerable adult does not have the capacity to agree safeguarding measures, and where the relative/informal carer or person who normally speaks for the vulnerable adult, is implicated in the allegation **or** that person requests the assistance of an IMCA.
8. Regarding any individual implicated adult or child; agree who will share what information and be responsible for addressing his/her needs outside of these procedures (including the commissioning of a IMCA for a perpetrator where required for an implicated adult lacking capacity to make informed decisions).

## Stage Five: Safeguarding Case Conference: Time standard: Within four weeks of the safeguarding strategy meeting

16. When the safeguarding assessment is completed, the Adult Care/Mental Health Services Manager will chair a Safeguarding Case Conference of the relevant individuals and agencies including all those individuals and agencies identified above (14) as being required.

This will use the safeguarding risk investigations/assessments to co-ordinate and write, as part of the record of the case conference, the confirmed multi-agency safeguarding plan. The safeguarding plan will address safety, recovery and civil and criminal redress for the person concerned and it determine any legal authorisation (e.g. Deprivation of Liberty Safeguards) and action needed to secure the safeguarding plan.

The safeguarding conference will also decide what information needs to be shared for the safety of other adults or children

The chair will be responsible for ensuring the accurate completion and distribution of the record of the safeguarding conference which should be distributed to relevant agencies within five working days of the Safeguarding Adults Case Conference.

The meeting may be staged to ensure information is shared on a need to know basis, and the full active participation of the vulnerable adult and/or family/advocate. The safeguarding plan will always be agreed with the vulnerable adult or (where there is no capacity to make an informed decision regarding proposed safety measures) be in the adults best interests.

### 16.1 Safeguarding Plan Case Conference

#### Agenda

The case conference recording [template and checklist](#) will be used/referred to:

1. Background to the case conference – what are the concerns?
2. Reports concerning investigations/assessments tasked at the strategy meeting.
3. Task any outstanding or new investigations or assessments identified. Where there are incomplete investigations/assessments another case conference will be convened.
4. Has abuse or neglect occurred or is it imminently likely to occur?  
Reason for decision
5. Establish the wishes and/or best interests (with use of IMCA report) of the service user with regards their own safety
6. Update the [risk assessment](#) and safeguarding plan. Each agency will be responsible for safeguards specifically related to their areas

- of responsibility. Make referrals will be made to associated safety procedures such as a [Multi Agency Risk Assessment Conference](#)
7. Task the review of Adult Care and NHS assessments and the authorisation and delivery of support plans in light of the safeguarding risks and actions identified.
  8. Does any information need to be shared regarding the implicated adult or system of care with any individual agency, [multi agency public protection arrangements](#) employer or user of personal budgets to ensure the safety of other adults or children? Task any action required including making any referral to the [Independent Safeguarding Authority](#)
  9. Consider the need for case review as required by the [remit](#) of the Quality Assurance Sub Committee of the SVAP.

The case will be closed to safeguarding if all investigations/assessments have been completed and any safeguarding plan required is in place.

Each agency has the responsibility for ensuring their agreed safeguarding actions are completed. Where a safeguarding plan is put in place Derbyshire Adult Care or Derbyshire Mental Health Services will ensure the safeguarding plan is monitored and reviewed as required to ensure safeguarding actions are being taken as per the safeguarding plan and to ensure safety outcomes are being met.

Any non compliance with the safeguarding plan (including actions to be taken by the vulnerable adult or carer or other member of the public) may be assessed as placing the vulnerable adult at risk of abuse or neglect and require a re - referral under these procedures.

A review of the safeguarding plan will take place six months following the final conference. The safeguarding plan will be reviewed annually thereafter **where** a safeguarding plan is still required.