Buckinghamshire

Multi-Agency Policy and Procedures

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# Introduction

This policy sets out Buckinghamshire’s Safeguarding Adult Board (BSAB) multi-disciplinary and multi-agency framework for safeguarding adults in accordance with the Care Act (2014) and associated statutory guidance. As such BSAB’s duty is to provide leadership across organisations throughout the county to keep people safe from harm. Abusive behaviour in any environment is never accepted.

This policy describes how agencies and communities should proactively prevent abuse occurring and respond if it is identified, suspected or disclosed.

This supports the Board’s statement that: Safeguarding is Everyone’s business.

All agencies must take account of the fact that abuse and neglect of adults does occur. It is a requirement of all signatories to this policy to ensure that their responses to all allegations of abuse and harm follow this policy and its supporting procedures.

The policy and procedures described in this resource should also be used in conjunction with individual organisations’ adult safeguarding procedures on and related issues; such as domestic violence and abuse, fraud, disciplinary procedures, and health and safety.

## What is safeguarding?

Safeguarding is defined as ‘protecting an adult’s right to live in safety, free from abuse and neglect.’ ([Care and Support statutory guidance, chapter 14ii](https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance)). Adult safeguarding is about preventing and responding to concerns of abuse, harm or neglect of adults. Staff should work together in partnership with adults so that they are:

* Safe and able to protect themselves from abuse and neglect;
* Treated fairly and with dignity and respect;
* Protected when they need to be;
* Able easily to get the support, protection and services that they need.

The aims of Adult Safeguarding are to:

* Stop abuse or neglect wherever possible;
* Prevent harm and reduce the risk of abuse or neglect to adults with care and support needs;
* Safeguard adults in a way that supports them in making choices and having control about how they want to live;
* Promote an approach that concentrates on improving life for the adults concerned;
* Raise public awareness so that communities as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect;
* Provide information and support in accessible ways to help adults understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or well-being of an adult; and
* Address what has caused the abuse.

## What is abuse and neglect?

Abuse or neglect may be the result of deliberate intent, negligence or ignorance. Exploitation can be a common theme in the experience of abuse or neglect. Whilst it is acknowledged that abuse or neglect can take different forms, the Care Act guidance identifies the following types of abuse or neglect:

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

**Abuse can take place anywhere.**

For more detail on these types of abuse, see the Social Care Institute for Excellence’s [‘Types and Indicators of Abuse’](https://www.scie.org.uk/files/safeguarding/adults/introduction/types-and-indicators-of-abuse.pdf) document.

### Patterns of abuse

Incidents of abuse may be one off or multiple and can affect one person or more. Patterns of abuse vary and include:

* **serial abuse** in which the perpetrator seeks out and ‘grooms’ individuals. Sexual abuse  sometimes falls into this pattern as do some forms of financial abuse;
* **long term abuse** in the context of an ongoing family relationship such as domestic violence and abuse between spouses or generations or persistent psychological abuse; or
* **opportunistic abuse** such as theft occurring because money or jewellery has been left lying around.

## Safeguarding principles

This policy adheres to the idea that safeguarding work should be based on the following principles:

* No abuse is acceptable.
* Every person has a right to live a life free from abuse, neglect and fear.
* Safeguarding adults is everyone’s business and responsibility.
* Support is in place for adults to prevent abuse from occurring and following incidents of abuse.
* To empower adults.
* To support choice and attempt to meet the desired outcomes of the person.
* All reports of abuse will be treated seriously.
* Every person should be able, where possible, to access information about how to protect themselves from abuse and neglect.
* Adult safeguarding work is aimed at the prevention and / or the swift and proportionate response to abuse and neglect.
* All partner agencies and organisations across Buckinghamshire should work collaboratively to ensure accountability, transparency and appropriate professional challenge.
* People working or involved with supporting adults have the appropriate knowledge, skills and training to effectively safeguard adults.

The Care Act and the Care Act Guidance sets out the statutory requirement for local authority social services, health, police and other agencies to both develop and assess the effectiveness of their local safeguarding arrangements. This is founded on the six key principles, which should underpin all safeguarding practice.

The six safeguarding principles

**Empowerment**

People being supported and encouraged to make their own decisions and informed consent.

“I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens.”

**Prevention**

It is better to take action before harm occurs.

“I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help.”

**Proportionality**

The least intrusive response appropriate to the risk presented.

“I am sure that the professionals will work in my interest, as I see them and they will only get involved as much as needed.

**Protection**

Support and representation for those in greatest need.

“I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want.”

**Partnership**

Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.

“I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me.”

**Accountability**

Accountability and transparency in delivering safeguarding.

“I understand the role of everyone involved in my life and so do they.”

‘[Care and support statutory guidance’](https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#safeguarding-1), Department of Health and Social Care (2020)

## Wellbeing Principle

The Care Act 2014 introduces a duty to promote wellbeing when carrying out any care and support functions in respect of a person. This is sometimes referred to as “the wellbeing principle” because it is a guiding principle that puts wellbeing at the heart of care and support.

The wellbeing principle applies in all cases where carrying out any care and support function, or making a decision, or safeguarding. It applies equally to adults with care and support needs and their carers.

“Wellbeing” is a broad concept, and it is described as relating to the following areas in particular:

* personal dignity (including treatment of the individual with respect)
* physical and mental health and emotional wellbeing
* protection from abuse and neglect
* control by the individual over day-to-day life (including over care and support provided and the way it is provided)
* participation in work, education, training or recreation
* social and economic wellbeing
* domestic, family and personal
* suitability of living accommodation
* the individual’s contribution to society

Promoting “wellbeing” means actively seeking improvements, at every stage in relation to the adult with care and support needs (regardless of whether they have eligible needs or not) and carers. It is a shift from providing services to the concept of “meeting needs”.

Promoting “Wellbeing” should inform: planning of individual care packages, delivery of universal services and strategic planning. To promote “wellbeing” it should be assumed that individuals are best placed to judge their own wellbeing, their individual views, beliefs, feelings, wishes are paramount and individuals should be empowered to participate as fully as possible. Promoting an individual’s “wellbeing” should be balanced with those of their carers.

## Making safeguarding personal

At the heart of empowerment is the ‘Making Safeguarding Personal’ (MSP) approach, which aims to promote responses to safeguarding situations in a way that enhances involvement, choice and control as well as improving quality of life, wellbeing and safety. It is about seeing people as experts in their own lives and working alongside them to identify the outcomes they want, with the aim of enabling them to resolve their circumstances and support their recovery. Making Safeguarding Personal is also about collecting information about the extent to which this shift has a positive impact on people’s lives.

## Legal framework

### The Care Act 2014

[The Care Act 2014](https://www.legislation.gov.uk/ukpga/2014/23/contents/enacted) sets out a clear legal framework for how local authorities and other statutory agencies should protect adults with care and support needs at risk of abuse or neglect. New duties include the Local Authority’s duty to make enquiries or cause them to be made, to establish a Safeguarding Adults Board; statutory members are the local authority, Clinical Commissioning Groups and the police. Safeguarding Adults Board must arrange Safeguarding Adult Reviews (SARs) as per defined criteria, publish an annual report and strategic plan. All these initiatives are designed to ensure greater multi-agency collaboration as a means of transforming adult social care.

### Mental Capacity Act (Including DoLS) 2005

[The Mental Capacity Act 2005](https://www.legislation.gov.uk/ukpga/2005/9/contents), covering England and Wales, provides a statutory framework for people who lack capacity to make decisions for themselves, or who have capacity and want to make preparations for a time when they may lack capacity in the future. These can be small decisions – such as what clothes to wear – or major decisions, such as where to live, what happens if abuse has occurred. The Act sets out who can take decisions, in which situations, and how they should go about this.

In addition - in some cases, people lack the capacity to consent to particular treatment or care that is recognised by others as being in their best interests, or which will protect them from harm. Where this care might involve depriving vulnerable people of their liberty in either a hospital or a care home, extra safeguards have been introduced in law – Deprivation of Liberty Safeguards, to protect their rights and ensure that the care or treatment they receive is in their best interests.

### Human Rights Act 1998

[The Human Rights Act 1998](https://www.legislation.gov.uk/ukpga/1998/42/contents) applies to all public authorities (such as central government departments, local authorities and NHS Trusts) and other bodies performing public functions (such as private companies operating prisons). These organisations must comply with the Act – and individual’s human rights – when providing a service or making decisions that have a decisive impact upon an individual’s rights. The Care Act (2014) extends the scope of the Human Rights Act (1998). This incorporates registered care providers (residential and non-residential) providing care and support to an adult, or support to a carer, where the care and support is arranged or funded by the local authority (including Direct Payment situations (LGA, 2014)). It does not incorporate entirely private arrangements concerning care and support.

Although the Act does not apply to private individuals or companies (except where they are performing public functions), sometimes a public authority has a duty to stop people or companies abusing an individual’s human rights. For example, a public authority that knows a child is being abused by its parents has a duty to protect the child from inhuman or degrading treatment.

The Human Rights Act covers everyone in the United Kingdom, regardless of citizenship or immigration status. Anyone who is in the UK for any reason is protected by the provisions in the Human Rights Act.

## Prevent

Prevent is part of the Government's counter-terrorism strategy CONTEST and aims to safeguard and provide support to divert vulnerable individuals at risk from being radicalised or groomed into supporting terrorist activity, before any crimes are committed. Radicalisation is comparable to other forms of exploitation, such as grooming and Child Sexual Exploitation. It is the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups. Radicalisation is process rather than an event, and there is no single profile or pathway by which someone can be drawn into terrorism.

There are instead a range of contributing factors including, peer pressure, bullying, family tensions, race/hate crime, lack of self-esteem or identity and personal or political grievances which can make people more vulnerable. Vulnerable individuals are often targeted and influenced by radicalisers either directly or increasingly in online chat rooms or through social media. [The Counter-Terrorism and Security Act](http://www.legislation.gov.uk/ukpga/2015/6/contents/enacted) (2015)xlviii places a specific legal duty on specified authorities, including local authorities and health providers in the exercise of their functions, to have due regard to the need to prevent people being drawn into terrorism.

# Who do adult safeguarding duties apply to?

**2.1** **The Community**

Safeguarding is the responsibility of everyone across all communities in Buckinghamshire.   Whether you are a neighbour, friend or someone who has a concern about a person in your community there is a role for you to play in ensuring that that person is safe and well. If you identify that further help is required it is important to take the steps  to ensure that the health and well-being of that person is supported.

## Individuals included in the scope of these policy and procedures

In the context of the legislation, specific adult safeguarding duties apply to any adult who:

* Has care and support needs, and
* Is experiencing, or is at risk of, abuse or neglect, and
* Is unable to protect themselves from either the risk of, or the experience of abuse or neglect, because of those needs.

Within the scope of this definition are:

* All adults who meet the above criteria regardless of their mental capacity to make decisions about their own safety or other decisions relating to safeguarding processes and activities;
* Adults who manage their own care and support through personal or health budgets;
* Adults whose needs for care and support have not been assessed as eligible or which have been assessed as below the level of eligibility for support;
* Adults who fund their own care and support;
* Children and young people in specific circumstances as detailed below in sections 5.7, 5.8 and 5.9.

## Other individuals in specific circumstances included

In addition to the adults in circumstances listed above, adult safeguarding duties also apply to individuals in the following circumstances.

### Transitions

Transition is a vulnerable time for young people. Not all young people who have been abused as a child will need support from Adult Services however, work needs to be done with them prior to them leaving Children Services to make sure that they are supported going into adult hood.

For those young people who require support from Adult Services, planning needs to be started when they are 17 to prepare for the transition between the two services, any open safeguarding enquiries at time of transition should be dealt with sensitively, to ensure the young person is appropriately supported.

### Children and young people

Local authorities have specific duties under the Children Act 1989 in respect of children in need (Section 17) and children at risk of significant harm (Section 47). All those working with adults and children in health, social care and voluntary sector settings have a responsibility to safeguard children when they become aware of, or identify, a child at risk of harm. They should do this by following [Buckinghamshire Safeguarding Children Partnership](https://bscb.procedures.org.uk/) procedures.

If a child or children is/are causing harm to an adult covered by the adult safeguarding procedures, action should be taken under these adult safeguarding procedures, and a referral and close liaison with children’s services should take place.

Abuse towards parents and other relatives (for example, grandparents, aunts, uncles), some of whom may be adults at risk, can be carried out by adults and by young people and children, some of which can cause serious harm or death. The UK prevalence study of elder abuse identified younger adults (rather than the person’s partner) as the main perpetrators of financial abuse.

### Young carers

In respect of young carers, Section 1 xix of the Care Act 2014, alongside Section 96 xxxv and Section 97 xxxvi of the Children and Families Act 2014, offers a joined up legal framework to identify young carers and parent carers and their support needs. Both Acts have a strong emphasis on outcomes and wellbeing.

### Carers and safeguarding

Circumstances in which a carer could be involved in a situation that may require a safeguarding response includes when:

* A carer may witness or speak up about abuse or neglect;
* A carer may experience intentional or unintentional harm from the adult they are trying to support or from professionals and organisations they are in contact with; or,
* A carer may unintentionally or intentionally harm or neglect the adult they support on their own or with others.

Where there is intentional abuse, adult safeguarding under Section 42, the Care Act, should always be considered.

### Adults who were abused as children

Non-recent abuse (also known as historical abuse) is an allegation of neglect, physical, sexual or emotional abuse made by or on behalf of someone who is now 18 years or over, relating to an incident which took place when the alleged victim was under 18 years old.

The role of Adult Safeguarding, with people who were abused as child is limited, however the Safeguarding team can direct people to support and help the adult at risk including the police. However, should the alleged perpetrator be still be working with either children or adults at risk then a referral can be made to the MASH for consideration under the [“Persons in Position of Trust” policy.](https://www.buckssafeguarding.org.uk/adultsboard/information-for-professionals/)

## Outside the scope of these policy and procedures

Adults in custodial settings i.e. prisons and approved premises are outside the scope of these policy and procedures. Prison governors and National Offender Management Services have responsibility for these arrangements. xxvii The Safeguarding Adults Board does however have a duty to assist prison governors on adult safeguarding matters. Local Authorities are required to assess for care and support needs of prisoner which take account of their wellbeing. Equally NHS England has a responsibility to commission health services delivered through offender health teams which contributes towards safeguarding offenders.

# Procedures

Below is a basic outline and definition of the adult safeguarding process. However, this outline is not a complete description of all adult safeguarding processes. **Each partner agency will have their own processes and guidance, whose staff must be familiar with** ([see Chapter 5](#_Safeguarding_workforce)).

## Concerns

Any individual that becomes aware of an adult at risk as a result of abuse or neglect must refer the matter to the Buckinghamshire Council’s Safeguarding Adults Team during office hours, or if out of hours, the Emergency Duty Team.

On receipt of a concern, the Safeguarding Adults Team will make a decision regarding the most appropriate way to respond. The outcome of the decision may be:

* that on the basis of the information provided, the concern meets the threshold to initiate a safeguarding adults enquiry and therefore the concern becomes a referral;
* that it is more appropriate for the concern to be addressed through another process;
* that further information is required in order to make this decision.

The purpose of an enquiry is to decide whether or not the local authority or another organisation, or person, should do something to help and protect the adult.

## Enquiries

A Section 42 Safeguarding Enquiry is triggered all three criteria are met as follows:

* The person is 18 years and older, and
* Has care and support needs (whether or not the local authority is meeting any of those needs) and;
* Is experiencing, or at risk of, abuse or neglect, including some aspects of self-neglect; and;
* As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

Whether it is Buckinghamshire Council or another agency undertaking the enquiry, the objectives are to:

* Ascertain the adults view, wishes and desired outcomes and gain consent /best interests decision;
* Reduce, contain or manage the risk of abuse or neglect in accordance with the wishes of the adult;
* Assess the risks and support needs of the adult and how they might be met;
* Consider at this stage whether the adult has ‘substantial difficulty’ in taking part in the enquiry. Where there is no other suitable person available such as a relative, friend or carer to represent and support them, an independent advocate must be offered, and if accepted, must be provided in accordance with S.68 Care Act 2014.
* Make sound decisions by assessing the adult’s emotional, physical, intellectual and mental capacity in relation to self-determination and consent and signs of intimidation, misuse of authority or undue influence;
* Make decisions as to what follow-up action should be taken with regard to the person or organisation responsible for the abuse or neglect;
* Make decisions as to what course of action will be taken to enable the adult to achieve resolution and recovery.

## Outcome of an enquiry

One outcome of the enquiry may be the formulation of a person-centred safeguarding plan (My Plan) for the adult at risk. This will be the responsibility of the relevant agencies to implement and should be overseen by an appropriate individual or organisation. The purpose of the plan is to ensure a person-centred approach to managing risk that is sustainable and only involves those who need to be involved or those that the adult chooses to be involved.

Once the enquiry and actions are completed, the outcome must be notified to the Responsible Manager within the Adult Social Care Team who must review the enquiry report submitted and where necessary challenge the outcome of an enquiry where it is believed that the process and or/outcome of the enquiry is unsatisfactory.

In consultation with the adult and partner agencies the Responsible Manager will determine that all outcomes have been achieved and determine whether there is a need for a further Safeguarding Plan to be developed, the outcome of which should be recorded on AIS. This could be as part of a Multi- Agency Safeguarding meeting to which the adult and their advocate must be invited to attend.

## Timescales

These combined adult safeguarding procedures do not set definitive timescales for each element of the Safeguarding process; however, target timescales are indicated. In addition, individual local authorities or Safeguarding Adults Boards may make decisions on timescales for their own performance monitoring. Local guidance on timescales should reflect the ethos of the Making Safeguarding Personal agenda.

The approach within the combined procedures is as follows:

* **Managing immediate risks.** Some adult safeguarding concerns will require an immediate assessment and response to safeguard the adult. These policy and procedures set out some target timescales for responding to and managing immediate risks.
* **Making decisions about safeguarding concerns and undertaking enquiries.** There are some target timescales, however, as with all adult safeguarding work, responses must be timely.
* **Remember**, it is important to respond at the pace that is right for the adult, and puts them in greatest control of what happens in their life.

# Roles and responsibilities

**4.1 Working Together**

It is the responsibility of all of us whether we are a statutory body, an organisation, Elected Members, local communities or individuals to share a common aim to promote safety and protect adults at risk of abuse and neglect. Through a strong focus on prevention our aim should be to enable adults to live an independent life free from harm, whilst making their own choices and decisions.

Prevention can cover many different types of support, services and facilities. There is no single definition for what constitutes prevention activity as this can range from neighbours looking out for each other to targeted social care interventions aimed at addressing vulnerability factors that may increase a vulnerable person’s risk of abuse, neglect or exploitation.

## 4.2 Buckinghamshire Safeguarding Adults Board

Under the Care Act 2014, a local authority must establish a Safeguarding Adults Board (SAB). The main objective of an SAB is to assure itself that local safeguarding arrangements and partners act to help and protect adults who:

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

There are three statutory members: the local authority, the local clinical commissioning group (CCG), and the police. Each SAB has a strategic role that is greater than the sum of the operational duties of the core partners. It oversees and leads adult safeguarding across the locality and will be interested in a range of matters that contribute to the prevention of abuse and neglect. These include the safety of patients in local health services, and the quality of local care and support services.

An SAB has three core duties:

* It must publish a strategic plan for each financial year that sets how it will meet its main objective and what the members will do to achieve this. The plan must be developed with local community involvement, and the Safeguarding Adults Board must consult the local Health watch organisation.
* It must publish an annual report detailing what the Safeguarding Adults Board has done during the year to achieve its main objective and implement its strategic plan, and what each member has done to implement the strategy as well as detailing the findings of any Safeguarding Adults Reviews and subsequent action.
* It must conduct any Safeguarding Adults Review in accordance with Section 44 of the Act. Safeguarding requires collaboration between partners in order to create a framework of inter-agency arrangements. Local authorities and their relevant partners must collaborate and work together as set out in the cooperation duties in the Care Act and, in doing so, must, where appropriate, also consider the wishes and feelings of the adult on whose behalf they are working those adults who have been involved in a safeguarding enquiry.

The SAB has the statutory responsibility to ensure a robust, proportionate, timely and professional approach is taken when adults with care or support needs are at risk of, or experiencing abuse or neglect.

As such, developing a multi-agency policy and procedure to safeguard adults with care and support needs is a requirement of all SABs. Both increased awareness and improved collaboration between agencies are essential to improving both prevention and responsiveness to abuse and neglect. All organisations working with adults in Buckinghamshire must ensure they are:

* aware of safeguarding issues
* familiar with these policies and procedures
* equipped to act in accordance with their responsibilities under this framework

## Buckinghamshire Council

The Care Act 2014 requires that local authorities and their relevant partners must collaborate and work together as set out in the cooperation duties in the Care Act and, in doing so, must, where appropriate, also consider the wishes and feelings of the adult on whose behalf they are working.

Local authorities may cooperate with any other body they consider appropriate where it is relevant to their care and support functions. The lead agency with responsibility for coordinating adult safeguarding arrangements is the local authority, but all the members of the SAB should designate a lead officer.

Section 42 of the Care Act 2014 requires that each local authority must:

* Make enquiries, or cause others to do so, if it believes an adult is experiencing, or is at risk of, abuse or neglect. An enquiry should establish whether any action needs to be taken to prevent or stop abuse or neglect, and if so, by whom.
* Where Mental Capacity is an issue or the adult concerned has ‘substantial difficulty’ in being involved in the process of a safeguarding enquiry, the local authority must arrange for them to be supported by an advocate.
* Where there is no other suitable person to represent them, an independent advocate must be provided.
* Co-operate with each of its relevant partners in order to appropriately protect the adult. In turn, partners must cooperate with the local authority.

The combined effect of section 42 and 79 of the Care Act is that the local authorities safeguarding responsibility cannot be delegated. The duty on the local authority under s.42 is to “make (or cause to be made) whatever enquiries it thinks necessary to enable it to decide whether any action should be taken…” The statutory service does not have to undertake the actual enquiry itself, it has to coordinate and quality assure the response, including the quality and outcomes of any delegated enquiry.

### The Multi-agency Safeguarding Hub

Buckinghamshire Council co-ordinates the Multiagency Safeguarding Hub (MASH), which co-locates key partners in order to improve the initial response to safety concerns. MASH is staffed by safeguarding professionals from; Bucks County Council, Thames Valley Police and Bucks Healthcare Trust, who work from Aylesbury Police Station. Mash can be contacted on 0800 137 915 during normal working hours, or via 0800 999 7677 outside of these.

Part of MASH is the **Safeguarding Adults Team**, which acts as the first point of contact for ALL safeguarding concerns in Buckinghamshire, except for in an emergency situation, wherein 999 should be called.

Upon receipt of a concern into the MASH, information will be collated to build up a picture of the circumstances of the person(s) subject to the concerns and in order to assess whether intervention under the safeguarding. MASH will collect information from partner agencies using information sharing request forms.

MASH has replaced a range of existing referral points and allows agencies to work together more closely than previously and ensures a timely and consistent response for all safeguarding concerns. Staff within MASH also provide information, advice and guidance for professionals and the general public, helping improve the quality of information provided and the number of inappropriate referrals.

## Thames Valley Police

The Thames Valley Police (TVP) are statutory members of the Safeguarding Adults Board. Many forms of abuse or neglect may amount to criminal offences. Whilst Safeguarding is everyone’s business; prevention, identification, investigation, risk management and detection of criminal offences is a fundamental role of the Police.

Criminal Investigations will take precedence over other forms of enquiry, but safeguarding planning will need to be undertaken in parallel. The Police coordinate criminal investigations with wider safeguarding responses – this requires partnership, effective communication and co-operation, making best use of each organisations skills and expertise in order to achieve safe, affective and timely outcomes for those at risk.

## Buckinghamshire Clinical Commissioning Group

The ‘[NHS Accountability and Assurance Framework 2019’](https://www.england.nhs.uk/publication/safeguarding-children-young-people-and-adults-at-risk-in-the-nhs-safeguarding-accountability-and-assurance-framework/) sets out the framework for Adult Safeguarding within the Health Service. It clearly sets out roles, duties and responsibilities of agencies commissioning NHS health care. It does not generate new policy or priorities, but articulates how the performance of the wider NHS, with respect to duties and priorities defined elsewhere, will be delivered and assured.

The Clinical Commissioning Group (CCG) is the statutory partner of the Safeguarding Adults Board. The CCG is the commissioner of local health services and needs to assure itself that the organisation’s, from which they commission, have effective safeguarding arrangements in place. CCGs are responsible for securing the expertise of Designated Professionals, on behalf of the local health system. Designated Professionals and Adult Safeguarding Leads undertake a whole health economy role – it is crucial they play an integral role in all parts of the commissioning cycle, from procurement to quality assurance if appropriate services are to be commissioned that support those at risk of abuse and neglect, as well as effectively safeguarding their well-being. Safeguarding forms part of the NHS standard contract and commissioners will need to agree with providers what contract monitoring processes are used to demonstrate compliance with safeguarding duties.

CCGs must gain assurance from all commissioned services, throughout the year to ensure continuous improvement. Assessment may consist of assurance visits, section 11 audits and attendance at provider safeguarding committees. CCGs are also required to demonstrate they have appropriate systems in place for discharging their statutory duties in terms of safeguarding.

## The Channel Panel

Channel is a confidential, voluntary, multi-agency safeguarding process designed to support vulnerable children and adults who may be at risk of being radicalised and drawn into terrorist activity. It is an early intervention service which has been mandated in every local authority in England and Wales.

The [Buckinghamshire Channel Panel](https://www.buckscc.gov.uk/services/community/preventing-extremism/channel/) is co-chaired by Buckinghamshire Council and Thames Valley Police and has multi agency involvement including from social services and health. The panel works collaboratively to assess the nature and extent of the risk and, if necessary, provide an appropriate support package tailored to the vulnerable individual’s needs. This is monitored closely and regularly reviewed. The care plan will vary according to the risk that has been identified, and may include targeted interventions (including faith guidance, counselling or diversionary activities) or access to specific services, such as health or education.

Local safeguarding structures have a role to play for those eligible for adult safeguarding. Referrals to Channel can be made through the local authority Prevent lead or the local police Prevent engagement officer.

The Channel Vulnerability Assessment is used by safeguarding professionals in the Channel Panel to identify specific factors which make some vulnerable to extremist messages and provide appropriate support as required. It should be read alongside the [Channel Duty Guidance](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/425189/Channel_Duty_Guidance_April_2015.pdf) (2015)xlix.

## All partner agencies

Each partner agency will have its own internal safeguarding procedures, which should comply with the multiagency framework, and should clearly set out the responsibilities of all persons who operate within them. These internal procedures must include:

* Statement of purpose relating to promoting wellbeing, preventing harm and responding effectively if concerns are raised
* Statement of roles and responsibilities, authority and accountability, specific enough to ensure all personnel understand their role and limitations
* Statement of process for dealing with safeguarding concerns, including for emergency situations and reporting to Police when appropriate
* Full information on how to make a referral, whether inside normal working hours or not, including comprehensive list of contact details both locally and nationally
* Information on how to record allegations, enquiries and all associated work.
* Full description of channels for multiagency communication and procedures for information sharing and decision making
* Details of how Professional disagreements are to be resolved, especially with regard to disagreements about whether a referral should be made or not.

### Prevention

Section 2 of the Care Act xxiii requires Local Authorities to ensure the provision of preventative services (i.e. services which help prevent or delay the development of care and support needs, or reduce care and support needs). Organisations should take a broad community approach to establishing safeguarding arrangements, working together on prevention strategies.

A core responsibility of a Safeguarding Adults Board is to have an overview of prevention strategies and ensure that they are linked to the Health and Wellbeing Board’s, Quality Surveillance Group’s (QSG), and Community Safety Partnerships prevention strategies. Prevention strategies might include:

* Identifying adults at risk of abuse;
* Public awareness;
* Information, advice and advocacy;
* Inter-agency cooperation;
* Training and education;
* Integrated policies and procedures;
* Integrated quality and safeguarding strategies;
* Community links and community support;
* Regulation and legislation;
* Proactive approach to Prevent.

Partners should embrace strategies that support action before harm can occur. Where abuse or neglect has occurred, steps should be taken to prevent it from reoccurring wherever possible, doing so within relevant parameters but sharing intelligence to support a holistic partnership approach to prevention. For example, visiting staff might identify an adult with a combination of characteristics that may render them more vulnerable to a fire risk and take action to refer to Buckinghamshire Fire and Rescue Service’s [Fire and Wellbeing Visits](https://bucksfire.gov.uk/service/fire-and-wellness-visits/).

Organisations should implement robust risk management processes that identify adults at risk of abuse or neglect and take timely appropriate action. Safeguarding functions should be integrated into quality management and assurance structures.

Prevention should be discussed at every stage of safeguarding, and is especially important at the closure stage (which can happen at any time) when working with adults on resilience and recovery. Discussions between staff and adults, their personal network and the wider community (if appropriate) help build up resilience as part of the recovery process. Where support is needed to prevent abuse, this needs to be identified and put into safeguarding planning.

Public awareness campaigns can make a significant contribution to the prevention of abuse. They are more effective if backed up by information and advice about where to get help, and there is effective training for staff and services to respond. Joint initiatives to raise awareness can be very effective.

### Information

Information and advice is critical to preventing or delaying the need for services and, in relation to safeguarding, can be the first step to responding to a concern. Section 4, the Care Act states that local authorities must: ‘establish and maintain a service for providing people in its area with information and advice relating to care and support for adults and support for carers.’ This includes information and advice about safeguarding and should include:

* How to raise concerns about the safety or wellbeing of an adult who has needs for care and support needs;
* Awareness of different types of abuse and neglect;
* How people can keep safe, and how to support people to keep safe;
* The safeguarding adults process;
* How Safeguarding Adults Boards work.

All organisations should ensure that they are able to provide this service and can signpost adults to receive the right kind of help by the right organisation.

### Advice

Advice and information should, where possible, be provided in the manner preferred by the person seeking it and in a way to help them understand the information being conveyed. This should be cognisant of the Equality Act 2010xxvi. ‘Reasonable adjustments’ should be made to ensure that disabled people have equal access to information and advice services. Reasonable adjustments could include the provision of information in accessible formats or with communication support.

Organisations have a number of direct opportunities to provide, or signpost people to information and advice, in particular for safeguarding:

* At first point of contact;
* During or following an adult safeguarding enquiry;
* Safeguarding planning;
* Risk management;
* Through complaints and feedback about a service which identifies a safeguarding concern.

Procedures should be updated to incorporate learning from published research, peer reviews, case law and Safeguarding Adults Reviews. Where appropriate, partner agencies should agree to integrate assessment tools, which identify risk of abuse and neglect, into their assessment practice and risk management protocols, and adopt a process for carrying out annual audit of cases concerning safeguarding.

Each partner agency should ensure its staff and volunteers at all levels have access to relevant information and training and have the necessary knowledge and skills to enable them to fulfil their individual roles in relation to safeguarding work. All personnel within partner agencies should know who they can contact to report concerns of abuse or neglect, including how to access and follow whistleblowing protocols. Regular supervision of staff and volunteers should address safeguarding concerns and identify related training needs.

# Safeguarding workforce

This section covers the responsibility of organisations, with leadership from Safeguarding Adults Boards, to support staff and to ensure that there is a well trained workforce equipped to safeguard people at risk of abuse and neglect.

Workforce development is a key enabler of change to meet the standards set out. The tool enables effective scrutiny of safeguarding work at all levels and across all agencies with safeguarding responsibilities in the context of making safeguarding personal and ensuring greater independence and choice for users of services. The shift in culture and practice, in response to what we now know about what makes safeguarding more or less effective from the perspective of the person being safeguarded, is the greatest challenge for organisations.

For agencies involved in making Section 42 enquires, there may be particular cultural and learning and development needs including improving skills in:

* Communication with a wider range of people
* Risk assessment – making complex interpretations of information about the safety and well-being of people in order to balance professional assessment of risk with the rights of adults at risk to determine their own safeguarding outcomes.

Learning from the work of Munro, there is a danger that, ‘When the organisation does not pay sufficient attention to these skills, then procedures may be followed in a way that is technically correct but is so inexpert that the desired result is not achieved.’ [The Munro Review of Child Protection: A child-centred system](https://www.gov.uk/government/publications/munro-review-of-child-protection-final-report-a-child-centred-system) (2011)

A positive workplace culture (key in preventing abuse in the provision of care) should be developed through strong leadership and management. Changes in the way that the workforce responds to concerns about abuse or neglect may mean that some organisations may have to assess their capacity to meet their safeguarding responsibilities.

## Prevention

Knowing how to stop abuse and neglect and prevent it happening in the first place should be at the forefront of safeguarding developments. Staff need to be mindful of potential risks and discuss these with people who might be at risk of abuse or neglect at every opportunity, giving them information and support that enables them to make informed choices. Awareness campaigns for the general public and multi-agency training for all staff might contribute to achieving these objectives.

Dealing with the variety of need is better achieved by professionals understanding the underlying principles of good practice in assessment, risk management and safeguarding work, and developing the expertise to apply them throughout.

## Recruitment

All organisations that employ adults or volunteers to work with children or vulnerable adults should adopt a consistent thorough process of safer recruitment to ensure those recruited are the best candidates for the role and are suitable to work with vulnerable groups. The Disclosure and Barring Service (DBS) provides criminal records checking and barring functions to help employers make safe recruitment decisions. In addition, recruitment processes should evidence:

1. Right to work in the UK
2. Application process (forms, supporting statements, Curriculum Vitae, interview and selection)
3. Qualifications
4. Verifiable references

Standards and guidance on safe recruitment can be found in the following documents, helping employers make safer recruiting decisions and values based recruitment. Related issues:

* Rehabilitation of Offenders Act 1974cxiii - People working with children or vulnerable adults are required to reveal all convictions, both spent and unspent.
* Registration with professional bodies – if registration with a professional body is a condition of employment, staff are responsible for maintaining their registration. Employers should carry out compliance audits as part of their safeguarding quality assurance measures.

## Induction

It is important for all workers to know exactly what is expected of them in their role. Employers should ensure that there is an agreed induction period that covers cultures, standards, HR policy and procedures, terms and conditions. Additionally, staff should be supported through this period to understand their safeguarding role and responsibility.

## Professional development

For frontline workers in health and social care the Care Certificate sets out the minimum standards required and aims to ensure that workers have the same introductory skills, knowledge and behaviours to provide compassionate, safe and high quality care and support.

It is designed for new staff, and also offers opportunities for existing staff to refresh or improve their knowledge. It was developed jointly by Skills for Care, Health Education England and Skills for Health. The Care Certificate:

* Links to National Occupational Standards and units in qualifications
* Gives workers a good basis from which they can further develop their knowledge and skills

For managers in adult social care there are also Manager Induction Standards Assessed and supported year in employment (ASYE) is designed to help newly qualified social workers (NQSWs) to develop their skills, knowledge and capability. It aims to strengthen their professional confidence. It aims to provide them with access to regular and focused support during their first year of employment. Their safeguarding skills should be developed part of this process.

## Learning and development

The Safeguarding Board will lead and each organisation will determine their own Learning and Development activities which may include seminars on specific topics, practice development forums whereby staff learn from audits and performance data, and peer challenges as well as formal training. Learning and Development activity should be informed by learning from SARs and a shared approach to learning.

## Training

All organisations need to ensure that staff and volunteers have access to training and continuous professional development that is appropriate to their level of responsibility.

## Capability framework

The BSAB Competence Framework sets out levels of skills, knowledge and experience expected of individual staff. The framework supports organisations:

* To raise standards and ensure consistent and proportionate response to safeguarding
* Improve partnership working and consistency to secure better outcomes for people
* To support work-based evidence of learning and competence in practice
* To provide managers with a framework to evaluate performance and identify training needs
* Clarify expectations of the role of all relevant members of the workforce in safeguarding
* Provide quality assurance tools for commissioners and contract monitoring officers

All staff should be assessed as competent against the competences that are relevant to their occupational role. Whatever their role, all staff should know when and how to report any concern about abuse or neglect of an adult. Therefore all staff need to be competent at the first level and beyond this it will depend on their occupational role and level responsibilities. Training can be linked to a particular staff group to ensure the workforce is able to meet the specified competence. All commissioned training can be evaluated against the specific competences for specific roles. An [updated framework is available here.](http://www.buckinghamshirepartnership.gov.uk/safeguarding-adults-board/learning-and-development/)

The required staff training levels will be determined locally, and organisations may wish to reflect similar levels of training for specific staff in line with training available in safeguarding children. There may be scope for joint training for example domestic abuse.

# Summary

This policy and procedure document is overarching and is intended to provide the background for all other safeguarding documentation produced by Buckinghamshire Safeguarding Adults Board.

Changes to the policy and procedure will be considered by the board on completion of requests made using the [policy and procedures amendment form](http://www.buckinghamshirepartnership.gov.uk/media/4664409/Amendment-of-policy-form.docx).