



Newcastle Safeguarding Adults Board

Multi-Agency Safeguarding Adults Policy

Revised March 2018

If you have a concern that someone is being abused or neglected then you must take action.

In an emergency always contact the Police or emergency services: 999

Adult Safeguarding

If your concern is about an adult contact:

Community Health and Social Care Direct: 0191 278 8377

Emergency Duty Team (out of hours): 0191 278 7878

Child Safeguarding

If your concern is about a child contact:

Initial Response Service: 0191 277 2500

Emergency Duty Team (out of hours): 0191 278 7878

For more information about safeguarding adults in Newcastle visit our web pages:

<http://www.newcastle.gov.uk/care-and-wellbeing/adult-social-care/safeguarding-adults>

If you have a concern about an adult or child who is being abused or neglected in a different area (e.g. outside of Newcastle upon Tyne), please contact the local council for that area.

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1. Introduction

The Newcastle Safeguarding Adults Board works in partnership to ensure that adults, with care and support needs, are protected from abuse and neglect. We wish to ensure that anyone raising a concern that an adult, with care and support needs, is being abused or neglected is taken seriously and it is acted on promptly and appropriately.

This multi-agency policy confirms the priority we give to safeguarding adults, outlines the principles and definitions that underpin this work, and describes how agencies will fulfil their statutory duties under the Care Act 2014.

The policy is supported by the multi-agency procedures and practice guidance produced in partnership with the key agencies in Newcastle. By defining different kinds of abuse and outlining what should happen when confronted with possible abuse, we set out an agreed procedure to be followed. Together, these documents will help to clarify the safeguarding responsibilities of those people working or volunteering with adults.

Additionally, we are committed to providing learning and development opportunities for all staff to support them in their safeguarding responsibilities.

Mistreatment and abuse of any person is not acceptable. Doing nothing is not an option. Your actions can help make a difference.

2. Newcastle Safeguarding Adults Board

Newcastle Safeguarding Adults Board (NSAB) is the statutory multi-agency partnership responsible for helping and protecting adults in Newcastle who are experiencing, or at risk of, abuse or neglect. The NSAB ensures this by assuring itself of the local safeguarding adults arrangements including how partners act to help and protect adults.

Members of the NSAB are signatories to this policy and its associated procedures.

The following organisations are members of the NSAB:

- National Probation Service, Northumbria
- Newcastle City Council
- NHS Newcastle Gateshead CCG
- The Newcastle upon Tyne Hospitals NHS Foundation Trust
- NHS England
- Northumberland Tyne and Wear NHS Foundation Trust
- Northumbria Police
- Northumbria Community Rehabilitation Company
- Tyne and Wear Fire and Rescue Service
- Your Homes Newcastle
- Community and Voluntary Sector.

3. Scope

Who does this policy safeguard?

This policy and accompanying procedural guidance is intended to safeguard any adult who:

- is aged 18 or over; and
- has needs for care and support (whether or not those needs are being met); and
- is experiencing, or is at risk of, abuse or neglect; and
- as a result of those needs is unable to protect him or herself against the abuse or neglect or the risk of it.

These adults may previously have been defined as a “vulnerable adult” or an “adult at risk”. The adult experiencing, or at risk of abuse or neglect will hereafter be referred to as the adult/adults throughout this policy and procedures.

This definition includes those at greater risk to a range of abuses because of physical, mental, sensory, learning or cognitive disabilities or illnesses, substance misuse or brain injury. It includes the carers, family and friends of those people, who provide care to them on an unpaid basis. It includes

those adults who purchase their own care through personal budgets, those who fund their own care; and those whose care is funded by local authorities and/or health services.

Where someone is aged 18 or over but is still receiving children's services and a safeguarding issue is raised, the matter should be dealt with through this policy and procedure. Please see **Safeguarding Transition Protocol** for more information.

Subject to the criteria being met in section 3, this policy and procedure applies to adults who are in Prison or Approved Premises.

The criteria for safeguarding adults procedures is different to the eligibility criteria for adult social care. Statutory adult safeguarding duties apply equally to those adults with care and support needs regardless of whether those needs are being met, regardless of whether the adult lacks mental capacity or not, and regardless of setting.

Being disabled or ill does not necessarily mean that a person is unable to take care of themselves or protect themselves from abuse or exploitation. However, research tells us that generally the more dependent a person is on the help of others with the tasks of day to day living (e.g. personal and health care, eating and drinking, mobility, finances) the more vulnerable he or she is likely to be. This is especially so where there is also a degree of mental incapacity or mental disorder that affects the person's ability to make informed decisions and exercise choice.

Furthermore, the NSAB recognises its public duty to protect the human rights of all citizens, including those who are the subject of concern but are not covered by this policy, or those who are not the subject of the initial concern. It recognises that this duty is the responsibility of each of its member organisations, who through a shared network of initiatives, will offer signposting, advice and support services aimed at enabling all people to live lives that are free from violence, harassment, humiliation and degradation.

Cross-boundary concerns

Overall responsibility for co-ordinating the safeguarding adults process lies with the local authority where the alleged abuse or neglect occurred. The ordinary residence of the adult does not matter¹. If the abuse directly or indirectly affects a person either placed by, or ordinarily resident in, another local authority area then they must be involved in the Safeguarding Adults Enquiry.

The principles are:

- The local authority where the abuse or neglect occurred will have overall responsibility for co-ordinating the Safeguarding Adults Enquiry and for ensuring clear communication with all other local authorities, especially with regards to scheduling meetings.
- The local authority where the adult is ordinarily resident will have a continuing duty of care to the adult whom the concern is about.
- The local authority where the adult is ordinarily resident will contribute to the Enquiry as required, and maintain overall responsibility for the individual.
- The local authority where the adult is ordinarily resident should ensure that the provider, in service specifications, has arrangements in place for safeguarding adults which link with the host authority's multi-agency safeguarding adults policy and procedure.

Who needs to follow this policy?

This policy is for all organisations and people working or volunteering with adults in Newcastle. Single-agency safeguarding adults policies and associated procedural guidance must reflect this multi-agency policy and procedure.

The following agencies have a duty to cooperate² with this policy and associated procedures:

- Local authorities
- NHS England
- Clinical Commissioning Groups (CCGs)

¹ "This section (*section 42*) applies where a local authority has reasonable cause to suspect that an adult in its area (whether or not ordinarily resident)..." Care Act 2014

² Care Act 2014 Section 6(7)

- NHS trusts and NHS Foundation Trusts
- Department for Work and Pensions
- The Police
- Prisons
- Probation Services.

Newcastle City Council must cooperate with other agencies or bodies, as appropriate, in order to exercise its safeguarding adults functions³ including but not limited to:

- General practitioners
- Dentists
- Pharmacists
- NHS hospitals and community healthcare services
- Housing, health and care providers.

Abuse

Abuse and neglect can take many forms. Professionals should not be constrained in their view of what constitutes abuse or neglect, and the circumstances of an individual case should always be considered.

Abuse may be:

- A single act or repeated acts;
- an opportunistic act or a form of serial abusing where the perpetrator seeks out and “grooms” individuals;
- an act of neglect or a failure to act;
- multiple in form (many situations involve more than one type of abuse);
- deliberate or the result of negligence or ignorance;
- a crime.

For the purposes of this policy, abuse is categorised as follows:

- **Discriminatory**

Including forms of harassment, bullying, slurs, isolation, neglect, denial of access to services or similar treatment; because of race, gender and gender identity, age, disability, religion or because someone is lesbian, gay,

³ Care Act 2014 Section 6(7)

bisexual or transgender. This includes racism, sexism, ageism, homophobia or any other form of hate incident or crime.

- **Domestic abuse or violence**

Including an incident or a pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse, by someone who is, or has been, an intimate partner or family member regardless of gender or sexual orientation. This includes psychological/emotional, physical, sexual, financial abuse; so called 'honour' based violence, forced marriage or Female Genital Mutilation (FGM).

- **Financial or material**

Including theft, fraud, internet scamming, exploitation, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

- **Modern slavery**

Encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

- **Neglect and acts of omission**

Including ignoring medical, emotional or physical care needs, failure to access appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.

- **Organisational (sometimes referred to as institutional)**

Including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in a person's own home. This may range from one off incidents to on-going ill treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

- **Physical**

Including assault, hitting, slapping, pushing, burning, misuse of medication, restraint or inappropriate physical sanctions.

- **Psychological (sometimes referred to as emotional)**

Including threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber-bullying, isolation or unreasonable and unjustified withdrawal of services or support networks.

- **Sexual**

Including rape, indecent exposure, sexual assault, sexual acts, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts to which the adult has not consented or was pressured into consenting. It also includes sexual exploitation which is exploitative situations, contexts and relationships where the person receives “something” (e.g. food, accommodation, drugs, alcohol, mobile phones, cigarettes, gifts, money) or perceived friendship/relationship as a result of them performing, and/or another or others performing sexual acts.

- **Self-neglect**

Includes a person neglecting to care for their personal hygiene, health or surroundings; or an inability to provide essential food, clothing, shelter or medical care necessary to maintain their physical and mental health, emotional wellbeing and general safety. It includes behaviour such as hoarding.

The response to the concern of abuse or neglect will be proportionate to the level of harm that has occurred or may occur. There is a **Risk Threshold Tool** which explains the types of response that can be expected.

The seriousness of harm, or extent of the abuse, is not always clear at the point of concern or referral. All reports of suspicions or concerns should be approached with an open mind.

Abuse can be perpetrated by anyone and can occur in any relationship. More often, people are abused by someone who is well known to them.

Abusers may be:

- Spouses/partners
- Other family members
- Neighbours
- Friends

- Acquaintances
- Local Residents
- People who deliberately exploit adults they perceive as vulnerable to abuse
- Paid staff or professionals
- Volunteers
- Strangers.

Abuse often occurs where the person who is abusing is in a more powerful position than the person who is being abused. In some instances, the abuser themselves may be at risk of, or vulnerable to, abuse.

Abuse can take place anywhere, including in people's own homes, in the homes of their family or friends, in a public place, in care settings such as hospitals or care homes, at places of work or education.

4. Principles

Guiding principles and values

Safeguarding adults means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted.

The NSAB is committed to ensuring that all adults have the right to:

- live their lives free from fear, violence, harassment, humiliation, degradation, abuse and neglect
- be safeguarded from harm and exploitation
- be protected from mistreatment and abuse; and
- live an independent lifestyle and to make choices, even if some of those choices involve a degree of risk.

In recognition of this, the NSAB identifies the following principles (from the Care Act 2014) and commitments that underpin safeguarding adults work in Newcastle. We are committed to ensuring that:

- **Empowerment.** We ask people what outcomes they want as a result of the safeguarding adults process and these directly inform what happens.
- **Protection.** We help and support people to report abuse. We support people to be involved in the safeguarding adults process to the extent to which the adult wants.
- **Prevention.** We can effectively identify and appropriately respond to signs of abuse and suspected criminal offences and take action before harm occurs. We make everyone aware, through provision of appropriate training and guidance, of how to recognise signs and take any appropriate action to prevent abuse occurring.
- **Proportionality.** We work in the best interests of the adult and undertake the least intrusive response appropriate to the risk that is presented.
- **Partnership.** We will work together to place the welfare of individuals above organisational boundaries. We have effective local information-sharing and multi-agency partnership arrangements in place and staff understand these.
- **Accountability.** The roles of the agencies are clear, together with the lines of accountability. Staff understand what is expected of them and others. Agencies recognise their responsibilities to each other, act upon them and accept collective responsibility for safeguarding arrangements.

In addition to these principles, the NSAB recognises the importance of ensuring that safeguarding adults interventions are person-led and outcome-focused. This means that all partners will have regard to the views, wishes, feelings and beliefs of the adult whom the concern is about in determining what action to take.

5. Dealing with alleged abuse or neglect

This section does not cover the detailed procedures for responding to an allegation of abuse or neglect but does cover some of the core considerations and standards that individuals and organisations need to adhere to. Please refer to the procedures for detailed guidance.

Whenever there is concern about a risk of abuse or harm, use of this safeguarding adults policy and associated procedures will enable the risk to be assessed and owned on a multi-agency basis.

The primary focus/point of decision-making must be as close as possible to the adult, and individuals must be supported to make their own choices. The circumstances surrounding any actual or suspected case of abuse will also inform the response.

Adults should be offered support services as appropriate to their needs. This includes support to participate in all aspects of the safeguarding adults process. Under the Care Act 2014, there is a duty to provide independent advocacy for adults who have a substantial difficulty in participating in the safeguarding adults process and where there is no other appropriate adult to represent them⁴.

There is a presumption that adults have the mental capacity to make informed decisions about their lives. If someone has been assessed as not having mental capacity to make decisions about their safety, those decisions will be made in their best interests as set out in the Mental Capacity Act (MCA) 2005 and the MCA Code of Practice.

Where an adult who has mental capacity takes a decision to remain in an abusive situation, consideration must be given to whether the adult is making the decision free from intimidation or coercion, with an understanding of the risks involved, and with access to appropriate services should they change their mind. If it is felt that a person's decision may have been influenced by threat or coercion, and consequently lack validity, consideration will need to be given to their best interests and overriding their consent to take further action.

It is important that decisions made about safeguarding interventions at any one time are not taken to be irreversible or non-negotiable.

Sometimes an adult with mental capacity may not want action to be taken but their consent has to be overridden because: there are risks to others;

⁴ Care Act Section 68

there is a risk of serious harm; or a serious crime has occurred or is at risk of occurring.

Adults who have been or are at risk of abuse should be given information, advice and support in a form that they can understand and have their views included in all forums that are making decisions about their lives.

All decisions taken by professionals about a person's life should be timely, reasonable, justified, proportionate, ethical and fully recorded.

Adults have the right to privacy and confidentiality throughout the safeguarding adults process, except where there is a requirement to override this e.g. where it is needed to share the person's information to safeguard others who may be at risk. The need for an adult to be identified should be considered at each stage to ensure it is not shared unless it is absolutely necessary to do so.

Staff have a duty to report promptly any concerns or suspicions that an adult is being, or is at risk of being, abused. Staff should fully understand their role and responsibilities in regard to this policy and procedures and that they know how to recognise abuse and how to report and respond to it.

When a concern is reported on a multi-agency basis to the local authority, Newcastle City Council must make enquiries, or cause others to do so, if they reasonably suspect that an adult who meets the criteria in section 3 is, or is at risk of, being abused or neglected⁵.

Where it is believed that the abuse or neglect is a crime, the Police should be notified as soon as possible.

Actions to protect the adult from abuse should always be given high priority by all organisations involved. Concerns or allegations should be reported without delay and all agencies must cooperate with each-other to protect the adult(s) concerned. Early sharing of information is key to providing an effective response where there are emerging concerns.

⁵ Care Act Section 42

Any action taken to stop or prevent abuse must be lawful and proportionate to the risk. Organisations working to safeguard adults at risk should make the dignity, safety and wellbeing of the individual a priority in their actions.

As far as possible organisations must respect the rights of the person causing, or alleged to be causing, harm. If the person alleged to have caused harm is also an adult with care and support needs, then these should be taken into consideration.

Action taken under these procedures does not affect the obligations on partner organisations to comply with their statutory responsibilities, such as notification to regulatory authorities, employment legislation or other regulatory requirements.

Partner organisations will contribute to effective inter-agency working, multidisciplinary assessments and joint working partnerships in order to provide the most effective means of safeguarding adults.

Partner organisations will have information about individuals who may be at risk from abuse and may be asked to share this where appropriate, with due regard to confidentiality and information sharing protocols.

6. Prevention

It is far better to put in place strategies to minimise the likelihood of abuse occurring – preventative strategies – than to deal with abuse after it has happened.

Each of the Newcastle Safeguarding Adults Board members commits themselves to the prevention of abuse and neglect in the development of planning and commissioning processes, as well as within direct service delivery.

Services that deal with crime and disorder, regeneration, and health and well-being will ensure that they are accessible to, influenced by, and monitor the inclusion of people covered by this safeguarding adults policy.

Commissioners, regulators and licensing bodies of all services should ensure that services implement appropriate minimum standards that prevent abuse and respond appropriately to safeguarding adults issues. Over and above this, partner agencies can form agreements with local providers encouraging achievement of even higher standards.

Each partner agency will ensure that they are aware of how to make a referral into the Multi-Agency Public Protection Arrangements (MAPPA) for sexual or violent offenders felt to pose a risk to others within the community. Those individuals who are subject to Level 2 or Level 3 MAPPA will have a multi-agency risk management plan in place coordinated by the Police and the National Probation Service.

People can be at risk of abuse whilst they are receiving health and/or care services, whether that is in a care setting or in their own home. Successful prevention of abuse and neglect demands that service providers tackle the factors which contribute to its occurrence at all levels.

All organisations that work with adults (as defined in section 3) should have:

- a clear, well-publicised policy of 'zero-tolerance' of abuse within its organisation;
- a safeguarding adults policy and clear procedural framework that is consistent with this multi-agency policy, and which is publicised and made available to all staff, volunteers, service users and carers in a range of appropriate and accessible formats;
- a clear policy and procedure for reporting to the Police all suspected crimes taking place within its service;
- clear policies against discrimination and harassment towards any person on any grounds;
- a code of conduct or policy - compatible with the law - for all staff and volunteers, setting clear standards for relationships between people in a position of trust and service users;
- a 'whistle blowing' or 'speaking out' protocol, cross-referenced with these safeguarding adults procedures;
- a commitment to implementing the safeguarding adults information sharing protocol, and to encouraging good communication between staff, managers and stakeholders;

- a clear, accessible and well-publicised complaints procedure, which includes information about how to contact and escalate concerns to external bodies such as regulators and service commissioners;
- effective quality assurance and governance processes that are cross-referenced with safeguarding adults issues; and
- a clear policy and procedure for dealing with staff disciplinary and grievance issues.

Additionally each organisation will ensure it has clear operational guidelines in accordance with regulations and best practice in respect of:

- robust recruitment standards;
- the provision of adequate induction and relevant ongoing learning and development. Staff or volunteers will receive clinical and/or management supervision that allows them to reflect on their practice and the impact of their actions on others;
- its response to concerns or allegations that a member of staff has perpetrated or contributed to abuse; and
- referral to the Disclosure and Barring Service (formerly the Independent Safeguarding Authority) of managers, staff or volunteers who are engaged in regulated activity and are believed to have harmed an adult (as defined in section 3) or a child, whether or not that is in the course of their employment.

Health and social care providers particularly will ensure that:

- guidance is in place for staff undertaking personal and intimate care tasks with service users/patients, moving and handling tasks, physical interventions (restraint), control and administration of medicines, handling of finances and risk assessment and risk management;
- they have clear procedures for dealing with, recording, and monitoring: serious incidents; accidents; health and safety issues; violent and challenging behaviour; tissue viability; sexuality and relationships between service users.
- where a safeguarding issue has been identified for a particular individual, that this is reflected in their care/treatment/support plan where relevant. This may include a risk assessment in relation to the person's safety or any risk they may pose to others;

- methods for addressing identified risks will be clearly documented and where appropriate joint risk assessment processes will be used.

Commissioners and regulators of health and social care services will:

- regularly audit risk of harm and require providers to address any issues identified - where there are a series of minor incidents a review may need to be carried out. In both cases, where necessary, subsequent recourse to the safeguarding route will be taken;
- actively liaise with each other and safeguarding adults leads (see page 21), making regular assessments of the ability of service providers to effectively safeguard users – they will use these assessments as a key factor in their decision making.

Organisations will carry out regular reviews of incidents not referred to the safeguarding adults procedures. If as a result of these reviews safeguarding adults concerns come to light, these should be shared on a multi-agency basis as per this policy and procedure.

The NSAB has a multi-agency protocol for reviewing serious cases (**Safeguarding Adults Reviews**) to ensure that the necessary lessons are learned to improve responses in all agencies and strengthen the multi-agency partnership.

7. Key roles and responsibilities

Whilst Newcastle City Council has the lead responsibility for co-ordinating the multi-agency response to concerns of abuse or neglect, safeguarding adults is everyone's responsibility. This section explains the roles and responsibilities of particular individuals or organisations in safeguarding adults.

The adult who has been abused or is at risk of abuse

In safeguarding situations the adult who has been abused, or is at risk of abuse, must be involved from the beginning of the Safeguarding Adults Enquiry (unless there are exceptional circumstances that would increase the risk of abuse). Where possible, their consent should be sought prior to the concerns being shared on a multi-agency basis. The adult's (or their

representative's) opinions and desired outcomes from the safeguarding adults process must be sought and considered as part of the ongoing Safeguarding Adults Enquiry. The adult (or their representative) must be included throughout the process and at the conclusion a check must be made to establish whether their desired outcomes have been met.

Family members or friends of the adult who has been abused or is at risk of abuse

Family, friends and other relevant people who are not implicated in the allegation of abuse often have an important part to play in the safeguarding adults process, and can provide valuable support to the individual. In some cases they can also assist in managing the risk.

Where the adult has mental capacity, involvement of family, friends or informal carers should be agreed with the adult themselves. If the adult does not have mental capacity, family and friends must be consulted in accordance with the principles of the MCA 2005.

The local authority has a duty to involve an appropriate person to facilitate an adult's involvement in the safeguarding adults process if it is deemed that they would have substantial difficulty in participating themselves. In most circumstances this is likely to be either a family member/friend or an advocate (see Advocacy section below).

A record should be made of the decision to consult or not to consult family and friends with reasons being given and recorded.

Advocacy

As part of the safeguarding adults process consideration must be given to whether the adult may benefit from the support of an independent advocate.

Where a person has "substantial difficulty" in participating in the safeguarding adults process (and there is no other appropriate person to assist them) independent advocacy must be arranged by the local authority under the Care Act 2014⁶.

⁶ Care Act Section 68

Advocates should be invited to safeguarding adults meetings (other than in exceptional circumstances e.g. where the relationship between the adult and the advocate is considered abusive), either accompanying the adult or attending on their behalf, to represent the person's views and wishes.

Front line staff/volunteers

Operational staff/volunteers are responsible for identifying and responding to allegations of abuse. They need to understand what constitutes abuse or neglect and what an initial response to a suspicion or allegation should be.

Managers

The roles and responsibilities of all managers are:

- to ensure the alleged victim is made safe and to preserve any evidence relating to the abuse;
- to ensure that any member of staff or volunteer who may have caused harm is not in contact with the alleged victim, other service users or others who may be at risk;
- to ensure that safeguarding adults referrals are raised as appropriate;
- to ensure that appropriate information is provided in accordance with local policy guidance and timeframes.

The primary responsibility for co-ordinating information in response to a safeguarding adult concern is Newcastle City Council but the investigation or enquiries into the concerns may be undertaken by another organisation (e.g. the Police, commissioners, provider organisations, the Care Quality Commission or community and voluntary sector organisations). All managers in all organisations have a key role to play.

Managers have a central role in ensuring high standards of practice and that practitioners are properly equipped and supported.

Managers need to develop good working relationships with their counterparts in other agencies to improve cooperation locally and swiftly address any differences or difficulties that arise between front line staff/volunteers.

All managers should ensure that they:

- make staff/volunteers aware of their duty to report any allegations or suspicions of abuse to their line manager, or if the line manager is implicated, to another responsible person or to the local authority, and the procedure for doing so;
- meet their legal responsibilities, to ensure compliance with registration, outcomes and guidance on compliance, quality, safeguarding and safety standards.

Each member of the NSAB should have a **safeguarding adults lead** responsible for the management and oversight of individual complex cases and coordination where allegations are made or concerns raised about a person, whether an employee, volunteer or student, paid or unpaid. Other organisations, who are not a member of the NSAB, should consider appointing a safeguarding adults lead who would be champion for safeguarding adults in their agency or service.

Senior Managers

Each agency should identify a senior manager to take a lead role in the organisational and inter-agency arrangements, including the NSAB (where their organisation is a member).

Newcastle City Council

Newcastle City Council has the lead role in co-ordinating the multi-agency approach to safeguard adults. This includes the co-ordination of the application of this policy and procedures, co-ordination of activity between organisations, review of practice, facilitation of joint training, dissemination of information and monitoring and review of progress within the local authority area.

The annual report of the NSAB will be reported to full Council, Wellbeing for Life Board and Health Scrutiny Committee where members will have the opportunity to review and challenge the work undertaken or planned. In addition to this strategic co-ordinating role, Newcastle City Council's Adult Social Care department have responsibility for co-ordinating the

action taken by organisations in response to concerns that an adult is being, or is at risk of being, abused or neglected.

Elected Members (Newcastle City Council)

Local authority members need to have a good understanding of the range of abuse and neglect issues that can affect adults in vulnerable situations and of the importance of balancing safeguarding with empowerment.

Elected members need to understand proportionate interventions, the dangers of risk adverse practice and the importance of upholding human rights.

Elected members should be informed of any critical, local issues, whether of an individual nature or matters affecting a service or a particular part of the community.

An elected member will be invited to be a participating observer of the NSAB.

The Health Scrutiny Committee will play a valuable role in assuring local safeguarding measures and ensuring that the NSAB is accountable to local communities.

Director for People (Newcastle City Council)

The Director for People (the designated Director of Adult Social Services) has a particularly important role to play in adult safeguarding as they are the Chief Officer within the Lead Agency. The Director has the responsibility to ensure that statutory requirements and other national standards are met.

Other Chief Officers/Chief Executives

Chief Officers/Chief Executives should support and promote the development of initiatives to improve the prevention, identification and response to abuse and neglect. They need to be aware of and respond to national and local developments.

Service Manager, Safeguarding Adults (Newcastle City Council)

The Service Manager, Safeguarding Adults (with the support of staff within the Safeguarding Adults Unit) is responsible for ensuring the effective functioning of the NSAB and safeguarding adults systems in the local authority. They may also advise in complex cases.

The Service Manager, Safeguarding Adults is the lead for safeguarding adults in the local authority and as such, will liaise closely with the Local Authority Designated Officer (LADO) for children as well as other local authority safeguarding adult leads in the region.

Safeguarding Adults Managers (Newcastle City Council)

Safeguarding Adults Managers (either Team Managers from Adult Social Care or Managers from the Safeguarding Adults Unit) have a lead co-ordinating and decision-making role in relation to individual cases.

The Safeguarding Adults Manager has overall responsibility to ensure that:

- Safeguarding Adults Enquiries (Section 42, Care Act 2014) are co-ordinated effectively;
- the action being taken by organisations is co-ordinated and monitored;
- the adult who has been abused or is at risk of abuse is involved in all decisions that affect their daily life as far as possible;
- those who need to know are kept informed;
- a decision is made in consultation with other relevant organisations to instigate or continue with a Safeguarding Adults Enquiry;
- a multi-agency meeting or discussion is held to determine how the Safeguarding Adults Enquiry will be conducted and who will conduct any investigation, and that decisions are recorded and copied to relevant organisations;
- if required, further safeguarding adults meetings are convened and chaired;
- a record is made of the decisions taken and this information is circulated to all relevant organisations;
- if required, a Safeguarding Adults Plan is agreed with the adult if they have mental capacity to participate in this, or in the best interests of the person if they have been assessed not to have mental capacity;
- all safeguarding documentation is completed including monitoring information.

Emergency Duty Team (Newcastle City Council)

The Emergency Duty Team (EDT) operates out of normal working hours, at weekends and over statutory holidays. If a safeguarding adults referral is made to EDT which indicates an immediate or urgent risk, the officer receiving the referral will take any steps necessary to protect the adult including ensuring emergency medical treatment has been arranged, contacting the Police and taking any other action to ensure that the adult is safe.

A member of EDT would not be responsible for coordinating a Safeguarding Adults Enquiry. Whether or not any immediate action is necessary, the out of hours worker will record the facts concerning the alleged abuse or neglect and pass all relevant information to Community Health and Social Care Direct to be dealt with on the next working day.

In a situation where staff who work for other organisations out of hours, become aware that an adult is being abused or at risk of abuse and the situation does not indicate an immediate risk of harm, staff should refer to the local authority on the next working day.

NHS Services

NHS staff and services come into contact with a large number of adults covered by this safeguarding adults policy and procedure.

NHS Newcastle Gateshead CCG and NHS England are in the best position to ensure that NHS providers and services, such as The Newcastle upon Tyne Hospitals NHS Foundation Trust (NUTH), Northumberland Tyne and Wear NHS Foundation Trust (NTW), and North East Ambulance Service NHS Foundation Trust (NEAS) meet their safeguarding adults responsibilities through their commissioning and governance arrangements.

NHS providers must work collaboratively with other statutory, voluntary and charitable organisations to ensure the safety and wellbeing of any person deemed to be at risk. The primary aim is to prevent abuse where possible but, if this fails robust procedures must be in place for the effective management and investigation of incidents of abuse.

GPs have a significant role in safeguarding adults. This includes:

- making safeguarding adults referrals should they suspect or know of abuse, in line with this policy and associated procedures.
- playing an active role in the Safeguarding Adults Enquiry.

NHS Newcastle Gateshead CCG and NHS England should make sure that effective training and reporting systems are in place to support GPs and GP practices in safeguarding adults work.

NEAS staff may be the first professionals on the scene and their actions and recording of information may be crucial to subsequent enquiries.

Northumbria Police

Northumbria Police play a critical role in safeguarding adults. The Police can protect adults from abuse and neglect, bring perpetrators to justice and provide information and intelligence where an adult is at risk. Northumbria Police must work very closely with partner agencies to ensure effective information sharing, risk assessment and decision-making takes place every time an incident of abuse is reported via this multi-agency policy and procedure.

Where criminal proceedings are deemed inappropriate Northumbria Police will work closely with partners to identify the most suitable course of action. Where a criminal offence appears to have been committed, Northumbria Police will be the lead investigating agency and will direct investigations in line with legal and other procedural protocols. Where Northumbria Police are the lead investigating agency they will work closely with the local authority and other partner agencies in line with this policy and associated procedures to ensure that the identified risks are acted on and a risk management and Safeguarding Adults Plan is agreed at an early stage.

The Police lead on and coordinate the MAPPA (with the National Probation Service) and Multi-Agency Risk Assessment Conference (MARAC) processes.

There are now special measures that can be put into place to help vulnerable people through the court process e.g. appointing intermediaries to support vulnerable victims through the court process and achieve the best possible evidence in interviews. The Police will discuss these special measures with victims at the earliest stage possible in the investigation. The Police will liaise with support networks such as Victim First, Independent Domestic Violence Advisors and Independent Sexual Violence Advisors.

National Probation Service and Northumbria Community Rehabilitation Company

The National Probation Service is the statutory criminal justice service that supervises high-risk offenders released into the community. In particular, the Service contributes to the local MAPPA procedures to help reduce the reoffending behaviour of sexual and violent offenders, so as to protect the public and previous victims from serious harm.

Northumbria Community Rehabilitation Company is responsible for the majority of other probation services across Northumbria. This includes Community Payback, offending behaviour programmes and supervision sessions, where structured programmes of work are undertaken to challenge attitudes, address lifestyle issues and improve victim awareness.

Although the focus of the National Probation Service and Northumbria Community Rehabilitation Company is on those who cause harm, they are also in a position to identify offenders who are either at risk from abuse or who pose a risk to other adults and to take steps to reduce this risk in line with the principles of this policy and procedure.

Care Quality Commission

The Care Quality Commission (CQC) has a role in identifying situations that give rise to concern that a person using a regulated service is or has been at risk of harm, or may receive an allegation or complaint about a service that could indicate potential risk of harm to an individual or individuals. The CQC should make a safeguarding adults referral as per this policy and procedure.

The CQC will be directly involved with the Safeguarding Adults Enquiry where:

- one or more registered people are directly implicated;
- urgent or complex regulatory action is indicated; or
- a form of enforcement action has been commenced or is under consideration in relation to the service involved.

Service providers

All service providers, including the independent sector, voluntary and community sector, housing and housing support providers have a responsibility to identify concerns of abuse and neglect and participate in the safeguarding adults process to stop or prevent abuse happening.

Each provider should have clear operational policies and procedures in place that reflect the multi-agency policy and procedures.

Where a provider contracts with a third party, the contract will have specific clauses referencing safeguarding adults and the relevant roles and responsibilities.

Commissioners

Commissioners of services are crucial to safeguarding adults work. As well as playing a key role in preventing abuse (see section 6), they must be involved in the Safeguarding Adults Enquiry where they commission or fund an organisation that is implicated in alleged abuse.

Safeguarding Adults Managers must inform commissioners of concerns in these situations and ensure they are invited to safeguarding adults meetings as commissioners may have information essential to robust decision-making and risk assessment.

Complaints and Patients Advice and Liaison Service

If a complaint indicates that an adult is being abused or is at risk of abuse, the complaints officer should make a safeguarding adults referral under this policy and associated procedures. The complaints officer and Safeguarding Adults Manager should make a joint decision about suspending all or parts of the complaints investigation until safeguarding adults procedures have

concluded (where this would compromise the Safeguarding Adults Enquiry). The complainant would be informed of this course of action and the reason for it.

Patient Advice and Liaison Service (PALS) staff should be in a position to recognise that a concern raised by a patient, carer or friend could indicate that a person is at risk of abuse or neglect. They should raise this concern within their own safeguarding/complaints policy. This policy will in turn ensure that appropriate action is taken.

The Coroner

Coroners are independent judicial officers who are responsible for investigating violent, unnatural deaths, sudden deaths of unknown cause, deaths whilst a person is subject to a Deprivation of Liberty and deaths in custody, which must be reported to them. The coroner may have specific questions arising from the death of an adult (as defined in section 3). These are likely to fall within one of the following categories:

- where there is an obvious and serious failing by one or more organisations;
- where there are no obvious failings, but the actions taken by organisations require further exploration/explanation;
- where a death has occurred and there are concerns for others in the same household or other setting (such as a care home);
- where a death falls outside the requirement to hold an inquest but follow-up enquiries/actions are identified by the coroner or his or her officers.

In the above situations, the NSAB will consider instigating a **Safeguarding Adults Review**. This procedure will be agreed with the coroner.

8. Related policies and procedures

There are numerous policies, procedures and frameworks that are related to safeguarding adults work. This section does not provide a definitive overview of those. It intends to highlight the most important and in particular those with specific local application.

Domestic Abuse

Domestic abuse is 'any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality'. Domestic abuse can be reported to Northumbria Police to the Domestic Abuse Helpline (0800 066 5555) or 999 in an emergency.

High risk domestic abuse cases should be considered by the Multi-Agency Risk Assessment Conference (MARAC). The MARAC is a fortnightly conference chaired by the Police which considers domestic abuse cases where there is a high risk of harm.

Forced marriage and honour based violence are forms of domestic abuse. In forced marriage, one or both spouses do not (or in some cases, cannot) consent to the marriage and duress is involved. Honour based violence includes a variety of acts of criminal violence, perpetrated because there is a belief that the person has, or allegedly has undermined what the family or community believes to be the correct code of behaviour. Both forced marriage and honour based violence require careful and sensitive handling as often there may be only one chance to speak to potential victim and save a life⁷. There is specific local guidance for dealing with cases of forced marriage or honour based violence where the victim is an adult with care and support needs.

Multi-Agency Public Protection Arrangements (MAPPA)

Regular meetings are held between Northumbria Police, National Probation Service, prison services and other partners to manage violent and sexual offenders and protect the public.

⁷ The "one chance rule" – Multi-agency practice guidance: Handling cases of forced marriage, 2014

Occasionally perpetrators of abuse considered under this policy and procedure will also need to be considered under **MAPPA arrangements**.

Counter-terrorism

There is a local procedure in place to protect people who may be vulnerable to radicalisation to extreme views. This is called the Prevent Framework. Where there is a concern that an adult (meeting the criteria in section 3) is being radicalised a safeguarding adults referral should be made as per this policy and procedure. In an emergency dial 999.

Hate Crime

Hate crime involves any criminal offence which is perceived, by the victim or any other person, to be motivated by hostility or prejudice based on a personal characteristic. The definition covers five main strands: disability; gender-identity; race; religion or faith and sexual orientation. Hate crime in Newcastle can be reported to ARCH (0800 032 32 88) or to Northumbria Police (101).

“Mate Crime” is a form of disability hate crime which happens when someone ‘makes friends’ with a person and goes on to abuse or exploit that relationship. The founding intention of the relationship, from the point of view of the perpetrator, is likely to be criminal. The relationship is likely to be of some duration and, if unchecked, may lead to a repeat and worsening abuse. There have been a number of Safeguarding Adults Reviews/Serious Case Reviews involving this type of abuse.

Where the victim of hate or mate crime is an adult at risk, safeguarding adults procedures should be used. This is regardless of whether the threshold for a crime has been met.

Safeguarding Children

Local child protection procedures apply to people who have yet to reach their 18th birthday. Any concerns about abuse, neglect or the welfare of a child or young person should be reported to the Initial Response Service (0191 277 2500).

There is a **safeguarding transition protocol** in place where a person aged 17.5 years (or above) is subject to safeguarding children procedures to ensure that this is a robust handover to safeguarding adults procedures.

Modern Slavery

Modern slavery is a type of abuse covered by safeguarding adults procedures. It can manifest itself in different ways (please see page 9). It is often difficult to know the extent or presence of care and support needs in such cases because the victims are often unknown to services. Therefore, safeguarding adults referrals are encouraged for all adult victims of modern slavery in order that their needs can be explored further as part of a safeguarding adults enquiry, rather than initially excluding cases because of the lack of an appearance of care and support needs.

Many of the adult victims identified to date in Newcastle have been vulnerable and have had care and support needs; and this is often the reason they have been targeted by the perpetrators.

Section 52 of the Modern Slavery Act (2015) created a statutory duty for local authorities and the Police to notify the Home Office when they have reasonable grounds to believe that a person may be a victim of slavery or human trafficking. A National Referral Mechanism (NRM) form is used.

The NRM can provide access to initial support, including accommodation, for victims of modern slavery. Adults have to consent to a referral into the NRM but their mental capacity and/or ability to freely consent should be a key consideration for referrers.

Where the victim is aged under 18, referrals should be made via safeguarding children procedures.

As well as making safeguarding referrals, professionals need to identify and manage any immediate risks.

9. Dissemination and review

This policy and associated procedure will be reviewed on a three-yearly basis unless it is identified that changes need to be made before this date.

It will be made available on the NSAB web pages hosted by Newcastle City Council.

It will be circulated by the NSAB and its partners to: all independent providers; commissioners; contracted services; and the community and voluntary sector.