



Safeguarding Adults Policy and Procedures

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1. Policy

1.1. Introduction

This document outlines the policy, procedures and guidance for safeguarding adults at risk of harm as a result of abuse or neglect. It should be read alongside the Buckinghamshire Safeguarding Adults Board's Multi-Agency Safeguarding Adults Policy.

This policy is governed by a set of key principles and practice standards consistent with the Care Act 2014 and Care and Support Guidance (DH 2014 updated April 2021), so as to ensure that people who are subject to abuse, neglect or self-neglect experience the process in such a way that it is sensitive to individual circumstances and is person-led and outcome-focused. It is vital for successful safeguarding that the procedures in section two are understood and applied consistently by all staff in Buckinghamshire Council.

The responsibility for the coordination of safeguarding adults' arrangements lies with Buckinghamshire Council, but the implementation of this policy and procedure is a collaborative responsibility and effective work must be based on a multi-agency approach with the individual adult placed firmly at the centre. The policy and procedure is a framework. Safeguarding Adults is a dynamic process that must be undertaken with people and not done to people.

1.2. What is safeguarding?

Safeguarding 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 risk and experience of abuse or neglect, whilst at the same time, making sure that the adult's general wellbeing is promoted in accordance with Section 1 of the Care Act 2014, including having due regard to the views, wishes, feelings and desired outcomes of the adult at the beginning the middle and the end stages of the process.

1.3. What is abuse?

Abuse is the violation of an individual's human and civil rights by another person or persons. Abuse may consist of a single act or repeated acts. It may be physical, verbal or psychological, it may be an act of neglect or an omission to act, or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented, or cannot consent. Abuse can occur in any relationship and may result in significant harm to, or exploitation of the person subjected to it.

Abuse and neglect can take many forms. Practitioners must not be constrained in their view of what constitutes abuse or neglect and should always consider the circumstances of the individual case.

For a detailed definition of abuse, see the Social Care Institute for Excellence's ['Types and Indicators of Abuse'](#)

1.4. Principles and values

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.”

1.4.1. Our values

It is every adult's right to live free from abuse and neglect in accordance with the principles of respect, dignity, autonomy, privacy and equity.

Where adults at risk are clearly able to make choices, they must be advised of the options available, and their wishes respected, unless there is a statutory responsibility to intervene or there is risk to others.

Priority should be given to the prevention of abuse and neglect by raising the awareness of adult safeguarding issues and by fostering a culture of good practice through support and care provision, commissioning and contracting or services within a well-defined quality assurance framework.

Safeguarding adults is a multi-agency responsibility and this policy promotes all staff working for Buckinghamshire Council to actively work in partnership with other agencies to address abuse and neglect of adults with care and support needs.

The need to provide support for unpaid carers will be taken into account when planning services for adults at risk of abuse and neglect following a safeguarding enquiry. At the very least, a carer must be offered an assessment

of their need for support and if eligible, support must be made available. Where the carer is at risk of harm the safeguarding process will be followed in the same way as with adults at risk.

This policy pays particular attention to equal opportunities and applies to all adults with care and support needs irrespective of race, culture, religion, disability, gender, age or sexual orientation.

Buckinghamshire Council is committed to supporting and promoting safeguarding training, education and information for everyone concerned, to create a climate in which adult abuse and neglect is regarded as unacceptable.

Buckinghamshire Council is committed to involving people who use safeguarding services in developing local policy, information and advice services and training. There are User forums that cover many aspects of Social Care including Safeguarding and ensure the residents of Buckinghamshire are involved in the co-production of service development.

1.4.2. Mental capacity

Our values are underpinned by the principles set out above and the Mental Capacity Act 2005 and Human Rights Act 1998 and, for registered social workers in England, the Health and Care Professions Council.

It should be noted that where an individual has capacity, they retain the right to make what might be seen as an eccentric or unwise decision. However, that does not mean that this policy would not be used to support people who have capacity and choose to live with risk, even where that risk is causing or likely to cause them harm. Therefore, where people do have capacity to make decisions, but such decisions result in ongoing risk of abuse or neglect, this policy must be followed proportionately so that any decision not to safeguard is a multiagency one, clearly evidenced and recorded.

If the adult has the capacity to make decisions in this area of their life and declines assistance this can limit the intervention that organisations can make. The focus should therefore be, on harm reduction. It should not however limit the action that may be required to protect others who are at risk of harm. The potential for 'undue influence' will need to be considered if relevant. If the adult suspected of being abused or neglected is thought to be refusing intervention on the grounds of duress, then appropriate action should be taken.

Where an individual does not have capacity in relation to the decision being asked of them, any action taken on their behalf must be the least restrictive of their basic rights and freedoms and in line with the five key principles of the [Mental Capacity Act 2005](#). Any actions taken should be in their best interests, and any actions / interventions must be proportionate to the level of concern.

The adult should always be involved from the beginning of any intervention unless there are exceptional circumstances that would increase the risk of abuse. If the adult has substantial difficulty in being involved, and where there is no suitable person available to support them, then Buckinghamshire Council must arrange for an independent advocate to represent them for the purpose of facilitating their involvement. Where the adult lacks mental capacity then an Independent Mental Capacity Advocate may be more appropriate depending on the kind of decision and interventions required in order to maintain safety.

1.5. Practice standards

1.5.1. Information sharing

Information sharing is key to delivering better and more efficient services that are coordinated around the needs of the individual. It is essential to enable early intervention and preventative work, for safeguarding, for promoting welfare and for wider public protection. Information sharing is a vital element in improving outcomes for all.

The Multi Agency Safeguarding Hub (MASH), see section 2.2 below, aims to enable much more effective information sharing for a faster and more coordinated response between agencies. Professionals in the MASH should understand the importance for people wanting confidence that their personal information is kept safe and secure and that practitioners maintain their right to privacy, while sharing appropriate information to deliver better services. All information shared within the MASH is on a need to know basis and only used to provide the most appropriate level of response by the most appropriate agencies.

1.5.2. Recording

Good record-keeping is an essential part of the accountability of organisations to those who use their services. Maintaining proper, accurate records is vital to

ensuring individuals' care and safety needs are met. If records are inaccurate or non-factual/untrue, future decisions may be wrong and harm may be caused to the individual. Where an allegation of abuse is made, all agencies have a responsibility to keep clear and accurate records. It is fundamental to ensure that evidence is protected and to show what action has been taken and what decisions have been made and why.

1.5.3. Feedback

At each stage of a safeguarding enquiry, it is important to ensure feedback is given to the adult at risk, the person raising the concern and partners. Referrers are entitled to be given appropriate information regarding the status of the safeguarding concern they have raised. The extent of this feedback will depend on various things (e.g. the relationship they have with the victim, confidentiality issues and the risk of compromising an enquiry). At the very least it should be possible to advise the referrer whether their concern has led to a safeguarding enquiry. Partners in provider organisations require feedback to allow them to continue to provide appropriate support and make staffing decisions.

1.6. Expectations

All staff in adult social care will practise with utmost integrity and respect for all people using services. Our thinking directs our actions and all staff involved in safeguarding adults work will ensure the following basic principles are applied in practise.

As an officer of Buckinghamshire Council's Adult Social Care be sure that:

- Your practice is inclusive and the individuals and people who are important to them are always at the centre of the process;
- You focus on the desired outcomes, views and wishes of the person subject to safeguarding enquiry and ensure that independent advocacy is available when needed;
- You are confident that your actions and behaviours are in accordance with best practice standards, statute, policy and procedure;
- You understand the importance of being honest with people who use services even if that honesty means saying sorry if things went wrong, being organised with your time, and writing down accurate information in

a way that is respectful and accessible to the people who need to read it and to whom it is about;

- Your approach and response to concerns are always proportionate and inclusive of the views, wishes and feelings of individuals, carers and/or their advocates;
- You always give information and advice that is accessible to the people you work with so that they know what to do, and where to get help if they are concerned about abuse or neglect.

Responsible managers need to consider carefully and on a case by case basis, the capability and competency of the workers most skilled and qualified to input on a safeguarding enquiry and ensure adequate supervision by a qualified professional at all times.

Strength-based supervision, support and where necessary, debriefing must be provided to all staff undertaking enquiries and any learning needs should be addressed. Staff should always look for opportunities for reflection at any stage of the safeguarding process, making use of reflective practice sessions.

1.7. Who do these procedures and this policy apply to?

Buckinghamshire Council's statutory adult safeguarding duties apply to adults at risk due to abuse or neglect or appear to have care and support needs regardless of whether those needs are being met and regardless of the extent of such needs.

It also does not matter what setting the abuse took place except in the case of prisons and approved premises where prison governors and National Offender Management Service (NOMS) respectively have responsibility. There may be a role for Buckinghamshire Council, where there is concern about contractor staff working in prison settings, and where it is in the interests of the wider community for the Local Authority (LA) to respond (e.g. Care UK provide primary care and support services to prisons in Bucks, if a member of staff abused a prisoner, we would need to be involved due to transferable risk).

1.7.1. Carers

Circumstances in which a carer (for example, a family member or friend) could be involved in a situation that may require a safeguarding response include:

- 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.

When referring to an adult at risk throughout this policy and procedure, the adult at risk may be an adult in need of care and/or support, or a carer in need of support.

1.7.2. Young adults in transition

Where someone is 18 or over but is still receiving children's services and a safeguarding concern is raised, the matter should be dealt with by Early Resolution and Safeguarding (First Response & Short Term Intervention) Team and the wider safeguarding adult arrangements. For example, this could occur when a young person with care and support needs is supported in a residential education setting until the age of 25. Where appropriate, adult safeguarding services must involve children's safeguarding colleagues as well as any relevant partners (e.g. the Police or NHS) or other persons relevant to the case. However, the level of needs is not relevant, and the young adult does not need to have eligible needs for care and support under the Care Act 2014, or be receiving any particular service from Buckinghamshire Council, in order for the safeguarding duties to apply.

2. Procedures for safeguarding concerns

2.1. Recognising concerns

Adult safeguarding means securing a person's right to live in safety, free from abuse and neglect. The Care Act (2014), Section 42 requires that Buckinghamshire Council must, after receiving it, assess the alert by:

- Making enquiries, or causing others to do so, if it believes an adult is being, or is at risk of, abuse or neglect.
- An enquiry should establish whether any action needs to be taken to stop or prevent abuse or neglect, and if so, by whom.

There are no eligibility criteria for adult safeguarding services, practitioners working within organisations need to be support and informed so that they are able to assess the seriousness and level of risk associated with a safeguarding adults concern.

Where Buckinghamshire Council has reasonable belief that an adult or carer in their area is at risk of abuse or neglect, but the adult or carer does not receive care and support services from the Council, in addition to the safeguarding enquiry, it must carry out an assessment of need (s. 9, s.10 CA14) and if called for, meet that need (s.18, s.20 CA14). The assessment should be an integral part of the wider aspects of an enquiry in order to identify the impact the abuse or neglect is having on the wellbeing of the adult concerned.

2.2. The Multi-agency Safeguarding Hub (MASH)

The Buckinghamshire Multi Agency Safeguarding Hub (MASH) is a 'function' delivered by a multi-agency group of professionals who work together as a single team but continue to be employed by their own agencies. The purpose of MASH is to build a holistic picture from information known to agencies to inform better decision making, identify and manage risk and make decisions on appropriate responses to risk.

The overall vision of the Buckinghamshire Multi Agency Safeguarding Hub (MASH) is to improve the way we work together to protect vulnerable children and adults from harm, neglect and abuse.

Key partners:

- Buckinghamshire Council Adult Social Care
- Buckinghamshire Council Children's Social Care
- Thames Valley Police

Virtual Partners (list is not exhaustive)

- Buckinghamshire Health Trust
- Oxford Health Foundation Trust
- Advocacy Services

2.3. The Early Resolution and Safeguarding (First Response & Short Term Intervention) Team

2.3.1. Role of the team

Early Resolution and Safeguarding (First Response & Short Term Intervention) Team incorporates a telephone helpline and referral service providing information, advice and guidance for professionals and the general public and is part of MASH. This helps to improve the quality of information provided and reduce the number of inappropriate referrals. This advice and guidance is available to all internal staff at Buckinghamshire Council.

Early Resolution and Safeguarding (First Response & Short Term Intervention) Team acts as the first point of contact (except for in emergencies when 999 should be called) receiving all external safeguarding concerns, assessing urgent concerns within 4 hours and collating information to build up a picture of the circumstances of the person(s) subject to the concern(s). At this stage, consent to share information should be sought from the adult subject to the concern unless it is considered that doing so would place the adult at greater risk.

The Early Resolution and Safeguarding (First Response & Short Term Intervention) Team practitioners will act as link workers to the locality teams. The link worker will be able to provide ongoing support to the locality teams in safeguarding enquiries.

2.3.2. Triage

Early Resolution and Safeguarding (First Response & Short Term Intervention) Team will assess any concerns raised, any immediate risk and ensure that the adult is supported, and their safety needs are met in a timely manner. Following the initial information gathering stage, which the safeguarding team aims to complete within 48 hours from the point of contact, the decision maker (a senior safeguarding practitioner) will decide whether the nature of the concern meets the criteria for a safeguarding enquiry. If it does, a proportionate safeguarding enquiry will begin within 24 hours by the most appropriate team:

Mental Health Teams will lead on all safeguarding enquiries for adults that are open to community mental health teams, older adults mental health teams or been subject to CPA within 6 months of the safeguarding concern.

Long Term and Review Teams will lead on safeguarding enquiries for adults where the allegation/suspicion meets the threshold of a section 42 enquiry.

Hospital Teams will lead on enquiries for adults in hospital or are the lead professional for the adult at risk at the time of the safeguarding concern.

2.4. Reporting a concern

Any individual that becomes aware of an adult at risk as a result of abuse or neglect must refer the matter to the Early Resolution and Safeguarding (First Response & Short Term Intervention) Team during office hours, or if out of hours, the Emergency Duty Team.

If the concern is urgent, and the adult is at immediate risk of harm dial 999 and report immediately to your manager before contacting the safeguarding team. The absence of your manager or difficulty in contacting them, should not delay seeking emergency assistance or referring to Early Resolution and Safeguarding (First Response & Short Term Intervention) Team or the Emergency Duty Team.

Early Resolution and Safeguarding (First Response & Short Term Intervention) Team

Telephone: 0800 137 915

Email: ascfirstresponse@buckinghamshire.gov.uk

Outside normal working hours, contact the Emergency Duty Team

Tel: 0800 999 7677

Email: ooheswt@buckinghamshire.gov.uk

Where professionals are making the referral they are advised to complete the [Safeguarding Referral Form](#) providing as much relevant detail as possible in order to help ensure a timely and proportionate response. The referrer should also have gained consent from the adult or explain at the time of referral why consent has not been obtained. Whilst it is important that people raise concerns about abuse and neglect, it needs to be noted that many of those concerns should be proportionately dealt with through contractual, managerial, complaints or disciplinary procedures.

If professionals are unsure whether to refer, they can contact the Early Resolution and Safeguarding (First Response & Short Term Intervention) Team for advice and guidance.

Safeguarding adults' process is not a substitute for standard mechanisms for dealing with poor quality services, with governance and/or contractual compliance issues or where complex social work case management is required. All decisions and actions pertaining to the safeguarding process including meetings must be recorded on LAS. It is the role of Buckinghamshire Council Adult Social Care to ensure that the agreed actions are completed within the timescales agreed and that robust progress chasing is applied to ensure actions do not drift.

2.5. Assessing a concern

Upon receiving a concern referral, safeguarding adults business support will enter the details on LAS either as a new safeguarding concern or as linked to an existing concern.

Once assigned to the safeguarding intake tray, the concern will be received either by Early Resolution and Safeguarding (First Response & Short Term Intervention) Team or Emergency Duty Team, who will:

- Ensure that the adult is safe and establish what steps have been taken to assess and manage risk
- Consider whether other adults or children may be at risk.
- If necessary, discuss with police where the information suggests that a crime may have been committed
- Establish whether the adult has given consent or whether a best interest or vital interest decision has been made, or where other people are at risk, whether action is required regardless of the adults consent.
- Establish with the adult their views, wishes and desired outcomes
- Establish whether the adult has a suitable person to support them in the process and consider need for independent advocate
- Consider whether the presenting information needs immediate escalation to the decision maker.
- Request information from other agencies if required
- Identify whether the alleged perpetrator is an informal carer for the alleged victim. If so, an urgent referral will be made to the appropriate team for a review of the carers assessment and contingency plans identified.

Professional referrers cannot remain anonymous as this is part of their professional responsibility, however, it is recognised that this can sometimes deter 'whistle blowing' in care settings so anonymity will be upheld. If the referral is from a member of public and they wish to remain anonymous, the caller will be encouraged to give their identity and contact details, explaining that their confidentiality will be respected if possible, but cannot be guaranteed.

Whilst there is no duty to make safeguarding enquiries if the person is able to take steps to protect themselves and nobody else is at risk, if there is reasonable cause to make enquiries to establish this, then a non-statutory

enquiry may be made, always seeking to obtain agreement from the adult or their representative.

If the adult denies that they have needs for care and support or are at risk, but the local authority thinks that this position is incapacitated or a result of coercion by a third party, then reasonable steps should be taken to make further enquiries.

The decision maker will ensure that a decision is made within 48 hours from the time of the referral, as to whether or not the circumstances surrounding the adult meets the criteria for a safeguarding enquiry.

When an adult at risk is subject to a safeguarding enquiry and further concerns are raised, the decision maker must decide whether to open a new enquiry or whether it can be linked to the existing enquiry. Confirmation of this decision will be made in writing by the Early Resolution and Safeguarding (First Response & Short Term Intervention) Team Manager.

If the concern meets the criteria for a Section 42 enquiry, the Early Resolution and Safeguarding (First Response & Short Term Intervention) Team Manager will allocate to the appropriate locality team.

2.5.1. Completion and transfer of referral records

Referrers should receive a response acknowledging their referral within 24 hours. Additional information on how the referral is progressing should be given while respecting legislation and guidance underpinning information sharing.

2.5.2. People in positions of trust

If a concern involves an allegation against people who work with adults with care and support needs, also known as people in positions of trust (PIPOT), it should be referred to the local authority safeguarding manager (LASM).

The Buckinghamshire Safeguarding Adults Board's Protocol for responding to concerns about a Person in a Position of Trust must be followed in these circumstances.

2.5.3. Informing others

Whether or not a concern raised requires an enquiry, the Early Resolution and Safeguarding (First Response & Short Term Intervention) Team must inform the Adults and Health commissioning team of the concern, including details of the care provider involved.

This information should be sent to the commissioning team's generic inbox:
opres_domcare_commissioning@buckinghamshire.gov.uk

The Early Resolution and Safeguarding (First Response & Short Term Intervention) Team must also inform the Care Quality Commission of this information: Safeguarding@cqc.org.uk

2.6. How and when to initiate an enquiry

If the concern does not meet the threshold for a safeguarding enquiry the Early Resolution and Safeguarding (First Response & Short Term Intervention) Team will take no further action and signpost to appropriate agencies / services or back to the referrer with advice.

If further information is required from partners to make an informed decision the Early Resolution and Safeguarding (First Response & Short Term Intervention) Team will record and request a MASH enquiry. Wherever possible, consent will be obtained from the adult directly. In cases where consent has not been obtained, the judgement for this decision will be considered under the relevant legislation and guidance. The rationale for this decision will be recorded on LAS

Buckinghamshire Council will make an enquiry, or require another individual or agency to do so, whenever abuse or neglect and some aspects of self-neglect are alleged or suspected in relation to an adult with care and support needs. The scope of that enquiry, who leads it and its nature, will be dependent upon the particular circumstances.

An enquiry may take the form of a conversation with the individual concerned (or with their representative or advocate). It may need the involvement of another organisation or individual. Or it may require a more formal process, perhaps leading to a formal multi-agency plan to ensure the wellbeing of the adult concerned.

2.6.1. Non-statutory enquiries

Where the adult does not meet the criteria as outlined in Section 42 of the Care Act 2014, Buckinghamshire Council Adult Social Care is not required by law to carry out enquiries for these individuals but may do so at their own discretion.

This Non Statutory Enquiry would relate to an adult who:

- Is believed to be experiencing, or is at risk of abuse, neglect or self-neglect
- Does not have care needs (but might have just support needs)
- Has care and support needs but is believed to be able to protect themselves

An example of a non-statutory enquiry might be in relation to an unpaid carer who is experiencing abuse whether that is intentional or unintentional.

2.6.2. Section 42 safeguarding enquiries

A Section 42 safeguarding enquiry is triggered when all four 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.

3. Procedures for safeguarding enquiries

3.1. Standards for safeguarding enquiries

3.1.1. Purpose

The primary purpose of any enquiry is to establish with the adult/representative whether any actions need to be taken and if so, by whom. Wherever possible a safeguarding enquiry should be resolved at the earliest point through actions agreed with the adult/representative.

Enquiries must be conducted in accordance with the six core principles of the Care Act (2014) and at all times will be subject to quality audit.

3.1.2. Timescales

A principle of no delay applies to all responses to safeguarding concerns, and the enquiries and actions to address the safeguarding concerns, and should be informed by the risk assessment with agreed timescales being overseen by the Advanced Practitioner with oversight from a Responsible Manager within Adult Social Care (Responsible Manager may be a Team Manager, Assistant Team Manager, Senior Social Worker or Senior Manager).

Availability of resources is not seen as an acceptable reason for delay and any such delays must be escalated to a senior manager. Buckinghamshire Council aims to complete all enquiries within 28 days. There will be occasions due to the complexity of the enquiry, or where multiple-lines of enquiry are going on, when it may take longer.

3.2. Roles and responsibilities

3.2.1. The Council

It is the role of Buckinghamshire Council to ensure that the agreed strands of the enquiry being undertaken by whichever organisation are completed within the agreed timescale and that robust progress chasing is applied to ensure actions do not drift. It is also the role of the Council to ensure that the person undertaking the enquiry has the requisite knowledge and skills to carry out the

enquiry and that there is adherence to the safeguarding principles outlined in section 14 of the Care Act Statutory Guidance (2014).

3.2.2. The responsible manager

The responsible manager will ensure regular reviews are conducted during the course of the safeguarding enquiry so that there is proactive coordination and communication provided to all parties. At the very least, a review should take place after 28 days and all parties including the adult/ representative /advocate updated on its progress if the enquiry has not been concluded.

The responsible manager must ensure that at the end of every enquiry, the point at which the local authority discharges its duty under section 42 of the Care Act 2014, the adult and/or representative is supported to provide feedback on their experience of the safeguarding process.

3.2.3. The Police

Where the safeguarding concern is potentially a criminal offence this will be investigated by the Police with support and assistance provided by Adult Social Care. The Adult Social Care Team Responsible Manager must consider involving an Video Recorded Interview (VRI) trained practitioner as part of any Special Measures in compliance with the Youth Justice and Criminal Evidence Act 1999 for which the adult at risk is entitled to.

Whilst it is acknowledged that a criminal investigation by Police takes priority over all other enquiries, it is best practice that a multi- agency approach is agreed to ensure that the interests and personal wishes of the adult are considered throughout, even if they do not wish to provide any evidence or support a prosecution.

3.3. The enquiry process

All enquires that meet Section 42 eligibility criteria will require the following sections in LAS to be completed by their responsible manager:

- safeguarding contact,
- safeguarding eligibility decision,
- safeguarding strategy planning discussion,

- safeguarding enquiry report,
- safeguarding meetings,
- safeguarding closure form

3.4. Risk assessment and risk management

Risk assessment is central to the enquiry process and should be in partnership with the adult and/or their representative and any other agencies.

Risk assessment should be recorded at each stage of the enquiry on LAS, to evidence whether risk has remained the same, reduced or been removed via the safeguarding enquiry. For enquiries carried out by other organisations on behalf of the local authority, it is expected that they would follow their own risk assessment policy, which should align with the [Multiagency Safeguarding Policy and Procedures](#).

3.4.1. Evaluation of the evidence

There is a need to evaluate the following evidence obtained within the enquiry from:

- Medical or forensic evidence
- Background reports, service records and previous histories
- Witness statements from formal/joint interviews
- Assessment of the individual's capacity and witness skills
- Any circumstantial evidence
- An assessment of the extent and seriousness of the harm and the effect it has had on the adult and others in their network.

3.5. Strategy meetings

3.5.1. Convening a strategy meeting & attendance

Where a referral requires a strategy meeting or discussion prior to being allocated to a worker to co-ordinate the enquiry, the duty manager in the Local Authority Early Resolution and Safeguarding (First Response & Short Term Intervention) Team will record their decision to convene / hold a strategy meeting.

A safeguarding strategy meeting or discussion may be recommended where:

- Several agencies have shared similar concerns
- Other legal or regulatory action is required
- The degree of harm or distress experienced by the adult is significant
- There is evidenced transferable risk and immediate action is required by several agencies
- Where a crime has been committed

Where there are several adults at risk in one place, the Large Scale Enquiry Procedure should be used as the framework to make decisions.

The outcomes of the strategy meeting will either be to:

- Progress with a safeguarding enquiry
- Gather more information to inform the safeguarding enquiry
- Confirm that threshold for a safeguarding enquiry has not been met and identify what action, if any, would be appropriate.

The duty manager will also determine the priority assigned to the case and the timescales for which information is required to be returned by each agency. If this information is required in less than 1 working day this will be evidenced in the mash enquiry form. Partners of whom information is requested may sit within the MASH itself or be virtual partners. Timescales will be agreed on a case by case basis.

The request for information will also set out the time at which the strategy meeting will be called so that partners can arrange to be present at the meeting if required. All relevant professionals involved with the adult will be invited to join the meeting by phone or in person. Operational Teams who receive information from the MASH such as those Social Workers or Police Officers undertaking assessments and investigations after referrals leave the MASH, will also be invited to attend the strategy meeting / discussion.

Attendees at strategy meetings / discussions must represent their agencies with the relevant information and expertise to contribute to decision making.

Strategy meetings / discussions will critically analyse shared available and relevant information, identify agencies to contribute to further enquiries or the response to the concern to mitigate immediate risk. A view will also be taken

about whether a criminal investigation is required if this decision has not already been made.

Wherever possible the views of the adult subject to the safeguarding enquiry will be invited to the strategy meeting or have his/her views available to inform the meeting. When an adult is likely to require an advocate to represent their views and wishes at a strategy meeting / discussion this will be explored prior to the meeting.

3.5.2. Strategy meeting record & interim protection plan

The strategy meeting/discussion will be recorded on LAS. This record will include any information shared, risks identified, outcomes of the meeting, lead agency(s), if a crime is suspected and any response to risk plans agreed.

An interim protection plan may be completed in the meeting, recorded on LAS, and shared with other agencies that were unable to attend as appropriate. Any decisions made in the strategy meeting/discussion is made in partnership by those agencies attending and any disagreements should be recorded and escalated in accordance with the BSAB Escalation and Challenge Procedure.

Where a strategy meeting/discussion has identified multiple concerns relevant to both adult and child safeguarding, then the Chair of the meeting must ensure that the relevant information is shared with children's social care.

For high risk domestic abuse cases the record of the strategy meeting will be forwarded to the Multi-Agency Risk Assessment Conference (MARAC) Co-ordinator to action.

Information requests and returns will be made from the MASH system so there is an audit trail of whose information has been requested, who has provided information and who has complied with agreed timescales.

For concerns that meet the threshold for a safeguarding enquiry and do not require a strategy meeting or discussion, the safeguarding adults' duty system will determine who, subject to internal policies and procedures, is best placed to co-ordinate the enquiry.

3.6. Safeguarding plans

Once the adult has been consulted with their views, wishes and the desired outcomes are known, a range of information gathering has been undertaken, and an interim risk assessment and management plan has been put in place, a decision as to what the safeguarding response will be made by the responsible manager within the relevant Adult Social Care Team. This decision will be made in partnership with the adult or their representative and other agencies.

One outcome of the enquiry may be the formulation of a person-centred safeguarding 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 safeguarding plan should set out:

- The views and wishes of the adult and/or their representative;
- Steps taken to assure the adult's safety in the future;
- The provision of any support, treatment or therapy including on-going advocacy;
- Any modifications needed in the way services are provided (e.g. same gender care or placement; appointment of an Office of the Public Guardian deputy);
- How best to support the adult through any action they intend to take to seek justice or redress;
- Any on-going risk management strategy as appropriate;
- Any action to be taken in relation to the person or organisation that has caused the concern;
- Names and contact details for people who are supporting the adult to manage risk;
- Contingencies for unplanned situations to ensure sustainability.

3.6.1. Developing the plan

Where the safeguarding plan may need to be developed within a safeguarding meeting, then it is vital that the adult/representative is enabled to attend this meeting and that there is an understanding that it is the adult's meeting and not a professional meeting.

Any meeting should be carefully planned with the adult to ensure that they feel able to fully participate and if possible, the adult or their representative may wish to either facilitate the meeting or nominate someone they feel comfortable to facilitate it on their behalf. If the adult does not agree to attend a meeting, another approach should be considered so that there is every opportunity for the adult and/or their representative to be fully included in any discussion before actions are agreed. Where there are safeguarding meetings then the facilitator must identify a suitable person to take notes.

3.6.2. Recording the plan

The safeguarding plan can be recorded at each stage of the process on LAS. The enquiry report will contain the safeguarding plan, where it can be exported to be shared with the appropriate parties.

3.7. Safeguarding meetings/Case conferences

A case conference is a multi-agency meeting held to discuss the outcome of the safeguarding enquiry, agree conclusions and to decide whether it is necessary to put in place a long-term protection or safety plan. Wherever possible, the adult who is experiencing or at risk of abuse or neglect should be invited, supported and enabled to attend the case conference.

In a complex or large-scale situation it may be necessary to hold more than one case conference meetings to ensure that the enquiry is progressing appropriately or to consider new information.

It may not be necessary to hold a case conference for all safeguarding enquiries, for example if it is established early on that the alleged abuse or neglect has not occurred, or if the enquiry is ceased at the adult's request.

3.7.1. Meeting purpose

- To consider the findings and outcomes of the enquiry, or to review the progress of the enquiry if it is large scale or complex.
- To assess ongoing risk.
- To produce or revise a safeguarding plan.
- To ascertain whether the adult is satisfied with the outcome of the enquiry.

3.7.2. Roles and responsibilities

The responsible manager should ensure that where required a case conference is convened, chaired and a record is taken (see local guidance for chairing arrangements).

In large scale enquiries a more senior / independent person may take the chair. The investigating officer will submit a report summarising the findings of the enquiry / assessment and will attend the case conference. Any reports made to date will be available to the meeting and will form the basis of discussion. Confidentiality arrangements relating to the reports should be clearly defined by the chair. Reports should not be shared with people who did not attend the conference without express permission of the chair.

3.7.3. Who should attend?

- The adult and / or their representative.
- The chair.
- The investigating officer.
- A minute taker.
- A competent and experienced manager from each organisation involved.
- Representatives from any other relevant organisations who are able to contribute to the protection plan or safety plan.
- The care manager, care coordinator or key worker for the adult at risk.
- Any other relevant professionals (for example the police, CQC representative, service contracts / commissioning staff, GP, psychiatrist or other health care workers involved with the adult.
- A representative from the Council's legal department may also need to be invited.

If any relevant professional is unable to attend, they must provide their contributory information in writing to the meeting.

All those attending should have the delegated authority to agree to make decisions about the provision of resources and services that will contribute to the protection plan or safety plan.

Family members do not have an automatic right to attend a case conference and should only be invited at the express wish of the adult if deemed

appropriate. If the adult does not have capacity to make that decision, it may be made in their best interests, or with the consent of a Lasting Power of Attorney or Deputy appointed by the Court of Protection.

3.7.4. Involving the adult

The adult should be:

- invited, supported and enabled to attend the case conference or equivalent part of the meeting as appropriate where it is safe for them to do so and they wish to participate
- supported to play an active part in the development of their protection plan or safety plan.

3.7.5. Conducting the case conference

The case conference will:

- receive and consider the investigating officer's report including the stated wishes of the adult at risk, and proposed outcomes of the enquiry;
- receive and consider reports from other involved agencies;
- evaluate the information in order to assess the levels of current risk/s;
- determine on the balance of probabilities whether abuse has occurred;
- assess the likelihood of risk reoccurring;
- consider whether any further action or information is required;
- discuss the views and wishes of the adult. This should include outcomes identified by the adult and whether these have or are likely to be achieved;
- consider whether legal advice and guidance is required;
- consider whether any statutory/regulatory action is required (for example, referral to professional bodies and regulators);
- review any existing protection plan or safety plan to ensure it is relevant and appropriate, or agree a protection plan or safety plan with the adult (or the person representing them or their best interests);

- decide which organisation/s / individual/s will monitor and coordinate the protection plan or safety plan;
- agree contingency measures if the protection plan or safety plan does not work;
- agree how the protection plan or safety plan will be shared with partners, taking into account information sharing considerations;
- review any actions taken so far in relation to the person alleged to have caused harm and decide what further action is / may be needed for the adult and / or the person causing harm (protection and / or support plan);
- decide what action is appropriate if the allegation has not been proved or was unfounded but concerns remain about potential risk;
- provide support and services to meet the needs of the adult and their carer/s;
- determine what additional information needs to be shared and with whom;
- set a date for a review if there are concerns that the protection plan or safety plan may not lead to a reduction of the risk or where the enquiry is incomplete at the time of the case conference;
- agree whether a further case conference is required.

3.7.6. The safeguarding plan

Those attending the case conference will:

- review any existing protection plan or safety plan to ensure it remains relevant and appropriate, or agree a new or revised plan with the adult (or the person representing them or their best interests), and decide which organisation will monitor and coordinate the plan;
- agree contingency actions if the protection plan or safety plan does not work;
- designate a protection plan or safety plan coordinator (this is likely to be different to the role of the managing officer and may be a social worker);
- agree how the plan will be shared with partners, taking information sharing considerations into account;

- determine what additional information needs to be shared and with whom;
- set a date for a review unless all the organisations involved agree that this can take place as part of the care management / care programme approach (CPA) or health and social care process;
- set a review date if there are concerns that the protection plan or safety plan may not lead to a reduction of risk or where the enquiry is incomplete at the time of the case conference;
- ensure the protection plan or safety plan is person centred focused.

3.7.7. Minutes

Minutes should be recorded on the relevant local authority or agreed multi-agency pro forma and approved by the chair of the meeting. The minutes record the decisions of the case conference and evidence of how the decisions were reached. This may involve recording separate decisions and outcomes for each allegation.

The minutes should be circulated within agreed timescales to:

- all attendees and invitees to the meeting;
- all those contributing to the protection plan or safety plan;
- the CQC where the case conference relates to a service that it regulates;
- all other relevant regulatory bodies, as appropriate.

Unless this would increase the levels of risk, a copy of the protection plan or safety plan should be sent to the adult or, with their permission, to another person. If the adult does not have mental capacity, a decision should be made in their best interests about to whom to send the minutes. If the adult has attended the case conference then the minutes will be shared with them subject to an assessment of risk. Where there is information that cannot be shared, it should be deleted from any documents sent out. It is imperative that Data Protection Act 2018 principles are adhered to.

3.8. Discharging the Section 42 duty

3.8.1. Review meeting

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.

The Responsible Manager will convene a review meeting with the adult and other relevant agencies. Attendees at the review meeting will review the report, to decide whether the outcomes as expressed by the adult have been achieved through the enquiry, whether risk has been managed, and no further action is required under Section 42.

At the review meeting, the adult or their representative will be asked to evaluate the outcomes and state whether they have been fully achieved, partially achieved or unachieved. Unachieved outcomes will need to be explored either by an ongoing enquiry or outside of an enquiry if they have no detrimental impact on the adult's safety needs.

3.8.2. Information sharing and feedback

The Responsible Manager will ensure that the decisions made at the review meeting are recorded on LAS. Where the decision is made that the Section 42 duty has ended and the outcomes have been achieved, there must be feedback to the adult and a discussion in relation to the outcomes and the closure. All other relevant partner agencies including, where appropriate, the referrer must also be advised of the outcome and closure ensuring that outcomes from the enquiries are considered and transferred into the adult's care and support plan.

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 LAS. This could be as part of a Multi-Agency Safeguarding meeting to which the adult and their advocate must be invited to attend.

Once all actions and outcomes from the Section 42 enquiry have been achieved the Responsible Manager must ensure that the adult is given the opportunity to share their views about the Safeguarding response and their experience. The outcomes of the evaluation must be considered by the Responsible Manager, the practitioner and relevant line manager's within Supervision to ensure that learning is transferred into future practice and personal development.

3.9. Actions at closure

The Responsible Manager must ensure that, on conclusion of the process:

- All actions are completed
- A Safeguarding Plan is in place (if needed) and/or support is reflected in the adult's care and support plan
- A schedule of review has been agreed and appropriate professional / team identified to undertake this task.
- All records are completed on LAS.
- Case records contain all relevant information and satisfactorily completed forms
- The adult and their advocate/representative(s) know that the process is concluded and where/who to contact if they have any future concerns about abuse. A standard letter must be sent to the adult, their representative and any other relevant party (e.g. care and support agency), notifying them of the closure of the enquiry.
- Evaluation of the adult's experience is undertaken and outcomes transferred into learning for the practitioners and professionals involved and the wider workforce.
- The responsible manager will authorise closure on LAS subject to all of the above standards being met.

3.10. Feedback

Complaints regarding the MASH will be investigated and responded to under the Buckinghamshire Council complaints process.

For more information regarding the complaints please refer to the Buckinghamshire Council website regarding Social Care Complaints website at

<https://www.buckinghamshire.gov.uk/your-council/contact-and-complaints/adult-social-care-compliments-and-complaints/>

3.10.1. Feedback from professionals & the escalation process

If an agency with a statutory responsibility is still unhappy with a decision then they have recourse to 'escalate' within their own agency and Senior Management Team, in line with Buckinghamshire Safeguarding Children's or Adults Board Escalation Policy.

Where this decision suggests learning for a particular worker or agency the MASH operational group will raise this with the relevant agencies to ensure continuous learning for that worker or agency. The MASH will actively seek feedback from agencies receiving packages to ensure constant learning occurs.

3.10.2. Disagreements amongst staff within the MASH

Learning from national, and local reviews indicate that all practitioners need to be robust in constructively challenging colleagues when necessary, to achieve best outcome for adults with care and support needs. If there is disagreement amongst staff within the MASH which cannot be resolved amongst the professionals involved, then the BSAB Escalation and Challenge Procedure should be followed.

<http://www.buckinghamshirepartnership.gov.uk/media/4138513/SafeguardingAdultsEscalationandResolutionProcedure.PDF>

3.11. Causing enquiries to be made by other agencies or organisations

Although Buckinghamshire Council is the statutory lead agency for safeguarding, its duty is to coordinate, and it may ask others to undertake safeguarding enquiries. The specific circumstances will often determine the right person to undertake an enquiry. In many cases a professional who already knows the individual will be the best person. They may be a social worker, a housing support worker, or health worker such as a community nurse.

Agencies or organisations asked to make enquiries by Buckinghamshire Council have a responsibility to agree the scope of the enquiry with the Council, agree actions to take forward and operate within the agreed timescales and feedback mechanisms as to the progress of the enquiry.

The relevant adult social care team will send a standard Request for Enquiry letter to the agency along with an Enquiry Report template which should be used to document the enquiry, including any immediate actions taken to safeguarding the adult(s), the views and wishes of the adult(s), the outcome and recommendations.

The report must be sent back to the council within the agreed timescale where it will be stored on the council's database. It is the council's discretion as to whether or not the enquiry has been successfully completed before it is able to discharge its duty under section 42 of the Care Act 2014.

If an agency decides not to undertake the enquiry, they must advise the Council in writing providing a clear rationale for this decision. The Council may decide that the agency is not acting reasonably or responsibly in refusing to carry out an enquiry, and as such, may raise the matter with a senior representative of the agency or any other agency as appropriate, e.g. the Care Quality Commission, NHS England.

4. Procedures for out-of-area safeguarding arrangements

There is increased safeguarding risk and complexity associated with adults whose care and support arrangements cross local authority boundaries. These may arise where funding/commissioning responsibility for an adult lies with an authority in one area and where concerns about potential abuse and/or exploitation arise in another area.

Care and Support Statutory Guidance states that the scope of an enquiry, who leads it and its nature, and how long it takes, will depend on the particular circumstances. Clarity about the responsibilities of host and placing authorities at the outset of the enquiry is essential to ensure the person's wellbeing and desired outcomes remain paramount.

The host authority, in holding the Section 42 Care Act enquiry duty, will have overall responsibility for ensuring there is good communication with all stakeholders, especially with regards to the scheduling of meetings and the planning of the enquiry.

Where there is a placing authority involved in commissioning a service, that authority will contribute to the enquiry as required, and maintain overall responsibility for the person they have placed, including needs assessment and care and support planning.

The Council's [Out-of-area Safeguarding Adults Procedures document](#) outlines the respective roles of the host authority, placing authority and service provider at each stage of the safeguarding process.