

SAFEGUARDING ADULTS POLICY AND PROCEDURE

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Responsible officer:	Head of Safeguarding (Adults)
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VERSION CONTROL

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2	29 th October 2012	Liz Allen	Draft	Further revisions to apply to CCG member practices and staff
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4.1	9 th February 2016	Helen Hart/Matt O'Connor		Separate Policy and Procedures documents have been merged into one document. Content has been updated to reflect The Care Act (2014) and revised West and North Yorkshire and York Safeguarding Adults procedures.

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1 INTRODUCTION

- 1.1 Safeguarding adults is everybody's business. All CCG staff have a responsibility to help prevent abuse and to act quickly and proportionately to protect people where abuse is suspected.

'All persons have the right to live their lives free from violence and abuse. This right is underpinned by the duty on public agencies under the Human Rights Act (1998) to intervene proportionately to protect the rights of citizens.' ADASS (2005) Safeguarding Adults.

'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 risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action.' (The Care Act, 2014).

- 1.2 This policy is one of 2 Safeguarding adults approved documents:

- This document set out the CCGs responsibilities and arrangements for safeguarding adults, as an NHS organisation, including what CCG staff should do if they have a safeguarding concern about an adult(s) (Appendix B and C).
- The CCGs Safeguarding Adults Commissioning Policy describes the CCGs contract monitoring arrangements in relation to safeguarding adults including expectations placed upon all organisations that provide NHS funded services commissioned by the CCGs.

Both these policies complement (and should be read with reference to) the [West and North Yorkshire and York Multi-Agency Safeguarding Adults Policy and Procedures](#).

- 1.3 All CCG staff are expected to follow the multi-agency procedures referred to above, comply with this policy and assist in taking any necessary action to safeguard adults experiencing or at risk of abuse.
- 1.4 Safeguarding adults is often intrinsically linked with the safeguarding of children and any concerns regarding children should be dealt with using the Safeguarding Children Policies and Procedures.

2 BACKGROUND

'The experience of abuse and neglect is likely to have a significant impact on a person's health and well-being. By its very nature, abuse (the misuse of power by one person over another) has a large impact on a person's independence. Neglect can prevent a person who is dependent on others for their basic needs exercising choice and control over the fundamental aspects of their life and can cause humiliation and loss of dignity.' ADASS (2005) Safeguarding Adults

- 2.1 Abuse can be experienced or caused by anyone and in any circumstances. It can be wilful or unintentional and can take many different forms including physical, sexual, emotional (including verbal), financial or material, neglect and discriminatory abuse. Abuse can occur in many different contexts including; domestic violence situations, modern day slavery, discrimination, organisational abuse and neglect.

- 2.2 The Care Act (2014) recognises that some people in need of care and support services may be at particular risk of abuse or neglect and may also be less able to protect themselves without additional support. The Care Act uses the term 'adult at risk'. The act also acknowledges that some instances of self-neglect may benefit from a safeguarding approach.
- 2.3 'Safeguarding' adults includes any work which aims to prevent abuse or to protect someone who may be already experiencing abuse. Effective safeguarding depends on a culture of zero tolerance of abuse, where concerns can be raised with confidence that action will be timely, effective, proportionate and sensitive to the needs of those involved.
- 2.4 The first national guidance for safeguarding in the NHS was published by the Department of Health in March 2011. This included specific guidance for commissioners, trust boards and health practitioners, based around the following six principles.
- Empowerment
 - Protection
 - Prevention
 - Proportionality
 - Partnerships
 - Accountability

These Principles have been used to underpin the Care Act (2014) and associated statutory Guidance which sets out a clear legal framework for how local authorities and its multiagency partners should protect adults at risk of abuse or neglect.

- 2.5 The Care Act puts Safeguarding Adults Boards, led by the Local Authority, on a statutory footing and names the police and health organisations as statutory partners. Local authorities are required to make enquiries (or request others to make them), when they think an adult with care and support needs may be at risk of abuse or neglect. Safeguarding Adults Boards (SABs) must carry out Safeguarding Adults Reviews (SARs) when someone with care and support needs dies as a result of neglect or abuse and there is a concern that the local authority or its partners could have done more to protect them.
- 2.6 This policy takes into account the expectation that the CCG will operate within a culture of participation and will contribute to the work of the local Safeguarding Adults Board(s) and wider safeguarding initiatives.

3 POLICY STATEMENT

- 3.1 The CCGs will adopt a zero tolerance approach to adult abuse and will work within legislation, national guidelines and local multi-agency safeguarding adults procedures to meet its obligations as a commissioner and local health leader.
- 3.2 The CCGs are committed to ensuring a proportionate and timely response in order to safeguard adults at risk from abuse. Where appropriate, the CCG will actively contribute to multi-agency safeguarding procedures, including where there are concerns of abuse within any commissioned service.
- 3.3 Within agreed protocols and legislation, the CCGs are committed to sharing risk, quality, performance and safeguarding information with Local Safeguarding Boards and partner agencies including regulators, in order to safeguard people who may be

at risk of abuse.

- 3.4 All CCG staff are expected to contribute to the safeguarding of people who may be experiencing, or at risk of experiencing abuse and to work to the CCG's safeguarding adults policy and locally agreed multi-agency procedures to report any concerns about abuse (Appendix C and D: Raising a concern guides).
- 3.5 Where staff feel unable to raise safeguarding concerns within the CCG for any reason, they must raise the concerns directly with the relevant Adult Protection Unit or with the police if they believe a crime has been committed.
- 3.6 As commissioning organisations, CCGs will work with partner agencies in order to effectively monitor the quality and performance of providers in relation to safeguarding adults from abuse and neglect (Appendices A and E: Useful contacts).

4 SCOPE

- 4.1 This document, along with the multi-agency policy and procedures mentioned above, is primarily focused on adults in need of care and support services that may be particularly 'at risk' of abuse or neglect and may also be less able to protect themselves without additional support.
- 4.2 The policy also aims to support staff who are concerned about other adults that may experience abuse and are not considered 'at risk' according to The Care Act (2014). This may include risk of radicalisation, trafficking, modern day slavery, sexual exploitation, forced marriage and female genital mutilation (not exhaustive list).
- 4.3 This policy and procedures applies to all staff within the CCG. This includes all Governing Body members; Clinical Board/Executive Board members; partners; employees; locums; and agency staff; contractors; volunteers; students and any other learners undertaking any type of work experience or work related activity.

5 EQUALITY AND DIVERSITY STATEMENT

- 5.1 In accordance with the CCG's public sector equality duty, this policy aims to support staff in their efforts to safeguard all individuals from abuse, irrespective of age, disability, gender reassignment, marital status, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
- 5.2 All CCG staff must respect the adults (and their family's) identity and culture, however this must not prevent action to safeguard someone who is at risk or experiencing abuse.
- 5.3 Approaches to safeguarding adults must be person centred and consistent with the principles of 'Making Safeguarding Personal'. All staff must take into account the individual's wishes, culture, religious beliefs, gender and sexual orientation when assessing risks and formulating individual protection plans.
- 5.4 All reasonable endeavours must be used to establish the person's preferred method of communication and to communicate in a way people can understand. This will include ensuring access to the interpreting service where people use languages (including British Sign Language) other than English. Every effort must be made to respect the person's preferences regarding gender of the interpreter.

6 CCG INTERNAL GOVERNANCE ARRANGEMENTS

- 6.1 The CCG's have clearly identified roles and responsibilities for safeguarding adults which are detailed in Appendix G.
- 6.2 The Chief Clinical Officer has Governing Body and Executive Group level responsibility for safeguarding within the CCG.
- 6.3 They are supported by The Director of Collaboration, who has lead responsibility for safeguarding across Airedale, Wharfedale and Craven CCG (AWC CCG), Bradford City CCG (BC CCG) and Bradford Districts CCG (BD CCG) and reports jointly to the Chief Clinical Officer of AWC CCG and the Chief Officer of BC CCG and BD CCG.
- 6.4 The Head of Safeguarding (Adults) and Safeguarding Manager (Adults) report to the Director of Collaboration. The Named GP for Safeguarding Adults supports practitioners in primary care and reports to the Head of Safeguarding Adults.
- 6.5 The CCGs Governing Bodies receive an annual report from the safeguarding team. Other reports pertaining to safeguarding adults are provided to the Clinical Quality and Governance Committee, by exception and are escalated to the Governing Body as necessary. Risk registers are used to escalate high level strategic safeguarding risks to the Executive Group and Governing Body.
- 6.6 The Head of Safeguarding (Adults) and Safeguarding Manager (Adults) receive notification about all serious incidents and provide the CCG governance and risk team(s) with a safeguarding review and scrutiny of serious incident reports and action plans.
- 6.7 Complaints, which include concerns about abuse will be shared with a member of the CCG Safeguarding Team and reported according to local guidance into the West and North Yorkshire and York safeguarding adult procedures.

7 LOCAL HEALTH LEADERSHIP AND SUPPORT: SAFEGUARDING ADULTS

- 7.1 As the local health leader, the CCGs have an obligation to share the safeguarding adults message and lead the development of health focused safeguarding initiatives within a wider multiagency approach.
- 7.2 The CCGs safeguarding adults team will work to inform all aspects of the commissioning process; including raising awareness and understanding of CCG staff responsibility and contribution to safeguarding; supporting CCG staff in safeguarding issues; support and leadership to providers in meeting their regulatory, contractual and legal obligations.
- 7.3 This will primarily be achieved by working in partnership with the local Safeguarding Adults Board(s) and through contact with named leads from key health providers, and Local Safeguarding Adults Board and network meetings.

8 SHARING INFORMATION

- 8.1 The CCG's is committed to sharing information with other agencies, in a safe and timely manner, where this is necessary for the purposes of safeguarding adults in accordance with the law and local multi-agency procedures. This may include personal and sensitive information about:
- the person(s) at risk of, or experiencing, abuse
 - family members

- CCG staff
- Staff of other agencies
- members of the public

8.2 The CCG will also share anonymised and aggregated data where requested, for the purposes of monitoring and developing safeguarding practice.

9 MANAGEMENT OF SAFEGUARDING ADULTS-RELATED SERIOUS INCIDENTS (SIs)

9.1 All safeguarding adult SIs must be reported in accordance with local SI policies, NHS England WYAT Standard Operating Procedures (2014) and the NHS England CCG Assurance Framework (2015). This may include allegations of abuse or neglect against staff providing NHS funded services.

9.2 All safeguarding adult Serious Incidents applicable to the CCGs will be reported to the NHS England area team safeguarding lead via the STEIS system and will be performance managed by the area team from then on.

9.3 The Safeguarding Adults team will lead the investigation and the providers (including member practices) will submit reports and attend meetings as required to a specific set timeline.

9.4 Any senior manager acting on behalf of the CCGs when dealing with any claims, complaints, disciplinary or performance issues, will be responsible for seeking advice regarding any safeguarding risks and raising concerns according to the local multi-agency safeguarding adults policy and procedures. These include allegations of abuse or neglect against any member of staff unless there is clear and immediate evidence that the allegation is false (see section 11).

9.5 All suspicions of fraudulent use of NHS resources in safeguarding cases should also be reported to the CCG's Local Counter Fraud Specialist, Director of Finance, or the National Fraud and Corruption Line. This is in accordance with the CCG Counter Fraud and Corruption Policy.

9.6 The relevant Adult Protection Unit may inform the CCGs of any potentially serious safeguarding adults concerns raised within services commissioned by any or all of the CCG's.

10 SAFE RECRUITMENT OF STAFF

10.1 The CCGs are alert to the possibility that individuals employed by them or other organisations may pose a risk of causing harm to adults at risk of abuse and neglect. The CCG will ensure that staff recruitment and employment practices follow national guidelines and local safeguarding policy, including appropriate Disclosure and Barring Service checks on employees where required. This applies to all staff working on behalf of the CCG, including where recruitment and employment functions are provided by agencies or contracted out to other service providers.

10.2 CCG will ensure that all job descriptions include a clear expectation that staff will contribute to the safeguarding of people from abuse and raise any safeguarding concerns according to CCG policy and local safeguarding arrangements.

11 ALLEGATIONS OF ABUSE AGAINST CLINICIANS AND STAFF

- 11.1 The CCGs must ensure that all allegations that a member of staff has caused or been complicit in abuse or neglect will be managed and reported according to local multi-agency safeguarding adult procedures.
- 11.2 In line with local multi-agency safeguarding adult procedures, if there is clear and immediate evidence that an allegation is false, use of multiagency procedures may not be appropriate. However, the reasons for not undertaking any further investigation must be clearly recorded along with any other measures taken to manage risks. A history of making allegations does not constitute evidence that an allegation is false.
- 11.3 In the event of an allegation of abuse against a member of CCG staff, managers must consider the need for temporary exclusion or redeployment under the disciplinary policy based on potential risk to the adult at risk if the allegation is found to be true.
- 11.4 The CCGs will ensure that all other concerns relating to the conduct or capability of staff are monitored and that any safeguarding related concerns are managed in accordance with this policy and local multi-agency procedures.
- 11.5 The CCGs will ensure that any safeguarding concerns arising from disclosures made during the course of any activity, including incident investigation, quality monitoring or human resources process, are managed in accordance with this policy and local multi-agency safeguarding adults procedures.

12 TRAINING AND DEVELOPMENT FOR CCG STAFF

- 12.1 Line managers will identify the level of training appropriate for all posts with reference to Appendix H.
- 12.2 As a minimum requirement, all new starters will attend the safeguarding awareness training (children & adults) session as part of their induction programme, within three months of commencing in post.

The CCG's may also identify additional training for staff who:

- have regular contact with patients/service users
- review packages of care
- manage complaints or concerns
- review serious incidents requiring investigation
- have professional leadership roles
- have corporate responsibilities related to safeguarding

- 12.3 Staff may attend further safeguarding adults training appropriate to their specific role where this need is agreed as part of their Joint Performance Development Review (See Appendix H).
- 12.4 Line managers are responsible for checking that staff have attended the required training as part of induction review (for new starters) and demonstrate required on-going learning and competence as part of the Joint Performance and Development Review processes.

13 SAFEGUARDING SUPPORT

- 13.1 The CCG safeguarding team are available to support and advise CCG staff in relation to any safeguarding issues. This might include concerns about individual(s) or safeguarding aspects of the CCGs business and commissioning process.
- 13.2 The team will aim to discuss any staff's safeguarding concerns in a confidential and sensitive manner and will support the staff to access support or contact other agencies where appropriate. This might include where the concern needs to be shared using local safeguarding procedures.

APPENDIX A

CCG Safeguarding Team Contact Details

Safeguarding Adults

Matt O'Connor – Head of Safeguarding Adults
Phone: 01274 237331
Mobile: 07949 886909
Email: matt.o'connor@bradford.nhs.uk

Helen Hart – Safeguarding Manager (Adults)
Phone: 01274 237426
Mobile: 07958476997
Email: helen.hart@bradford.nhs.uk

Dr Seemab Khan – Named GP for Safeguarding Adults
Phone: 07904648171
Email: Seemab.khan2@bradford.nhs.uk

Nancy O'Neill – Director of Collaboration
Phone: 01274 237693

Safeguarding Children

For general advice and support contact: **TEAM MOBILE 07432 719806**

Sue Thompson – Designated Nurse (Children)
Phone: 01274 256082
Mobile: 07904 332588
Email: sue.thompson2@bradford.nhs.uk

Jude MacDonald - Deputy Designated Nurse (Children)
Phone: 01274 237344
Mobile: 07967 593661
Email: jude.macdonald@bradford.nhs.uk

Louise Clarke – Named GP Safeguarding Children
Mobile: 07814 025779
Email: louise.clarke@bradford.nhs.uk

Valerie Wilson - Named GP Safeguarding Children
Mobile: 07973 427928
Email: Valerie.wilson@bradford.nhs.uk

Jag Picknett - Named GP Safeguarding Children
Mobile: 07432 721848
Email: jag.picknett@bradford.nhs.uk

Amanda Robinson – Domestic Violence Manager
Mobile: 07506 367566
Email: Amanda.robinson@bradford.nhs.uk

Vicky Senior – Safeguarding Team Administrator
Phone: 01274 237645
Email: Vicky.senior@bradford.nhs.uk

APPENDIX B

RECOGNISING ABUSE

It is **everyone's responsibility** to watch out for abuse and to take immediate action if abuse is suspected.

'The experience of abuse and neglect is likely to have a significant impact on a person's health and well-being. By its very nature, abuse (the misuse of power by one person over another) has a large impact on a person's independence (ADASS, 2005).

Abuse can take many different forms and occur in different contexts including:

- physical
- sexual
- psychological
- financial or material
- neglect
- discriminatory abuse
- organisational
- domestic violence
- modern slavery, including human trafficking
- self-neglect
- radicalisation
- female genital mutilation
- forced marriage

Exploitation and grooming, in particular, are common themes in the above list of types of abuse and neglect.

Abuse can be perpetrated by anyone including: other patients or service users, family members, visitors, staff, contract workers, volunteers, learners or students, neighbours, people providing goods or services or members of the public.

You should remember that:

- Anyone can experience abuse
- Abuse may be one off or repeated
- Abuse can result from actions or in-actions
- Abuse can be deliberate or unintentional
- Abuse can be perpetrated by an individual, a group or an organisation
- Abuse can take place in any setting

Where abuse is occurring, other people may also be at risk, including children. If you think someone may be being abused, you should also consider who else might be at risk.

Where you suspect abuse of a child, you must inform the child protection unit and follow the CCG Safeguarding Children policy and procedures.

Quick Guide to Safeguarding Adults Procedures for staff and volunteers

What to do if an adult is at risk

If you are informed or become aware of possible abuse or neglect:

- Take action to ensure the immediate safety and welfare of the adult (and any other person at risk)
- If urgent attention is needed for health or safety dial 999
- If a crime needs to be reported call the police on 101
- Preserve any evidence
- Accurately record the incident, any action or decisions. Make sure you sign it and add the date and time
- Follow the prompts on the rest of this guide.

How to respond

- If possible, **speak** to the adult at risk without putting them or yourself at further risk
- Reassure them that what they say will be taken seriously
- Use open ended questions e.g. 'Tell me / Explain/ Describe what has happened' (remember 'TED')
- Do not probe: this is a preliminary conversation only about the safeguarding issues and the adult's views and wishes
- If possible, **support** the person to make immediate decisions, including whether they want a Safeguarding Concern to be raised
- Look out for any signs that the person may lack mental capacity to make decisions about their own safety
- Explain to the adult what you will do next
- Consult with your line manager for advice and support.

Views and wishes of the Adult at Risk

Always **consider** the adult's views and wishes and **act** upon them, if possible. However, the adult's wishes may be overridden in some circumstances for example:

- In the public interest e.g. if there is a risk to others, a member of staff or volunteer is involved or it relates to a care setting
- In the person's vital interests – to prevent serious harm or distress or in life threatening situations
- If the person is subject to coercion or undue influence to the extent that they are unable to give consent
- If the person lacks mental capacity and it is in their best interests.

How to raise a Safeguarding Concern

Talk to your line manager, Safeguarding Concerns Manager, Safeguarding Adults Lead or contact the Adult Protection Unit.

Report adult abuse online at:

www.bradford.gov.uk/makeanalert

If you have difficulty completing the online form call the Adult Protection Unit on **01274 431077**.

The full version of the West Yorkshire Safeguarding Adults Policy and Procedures is available on www.bradford.gov.uk/apunit

The wording in this publication can be made available in other formats such as large print and Braille. Please call 01274 431077



Look!

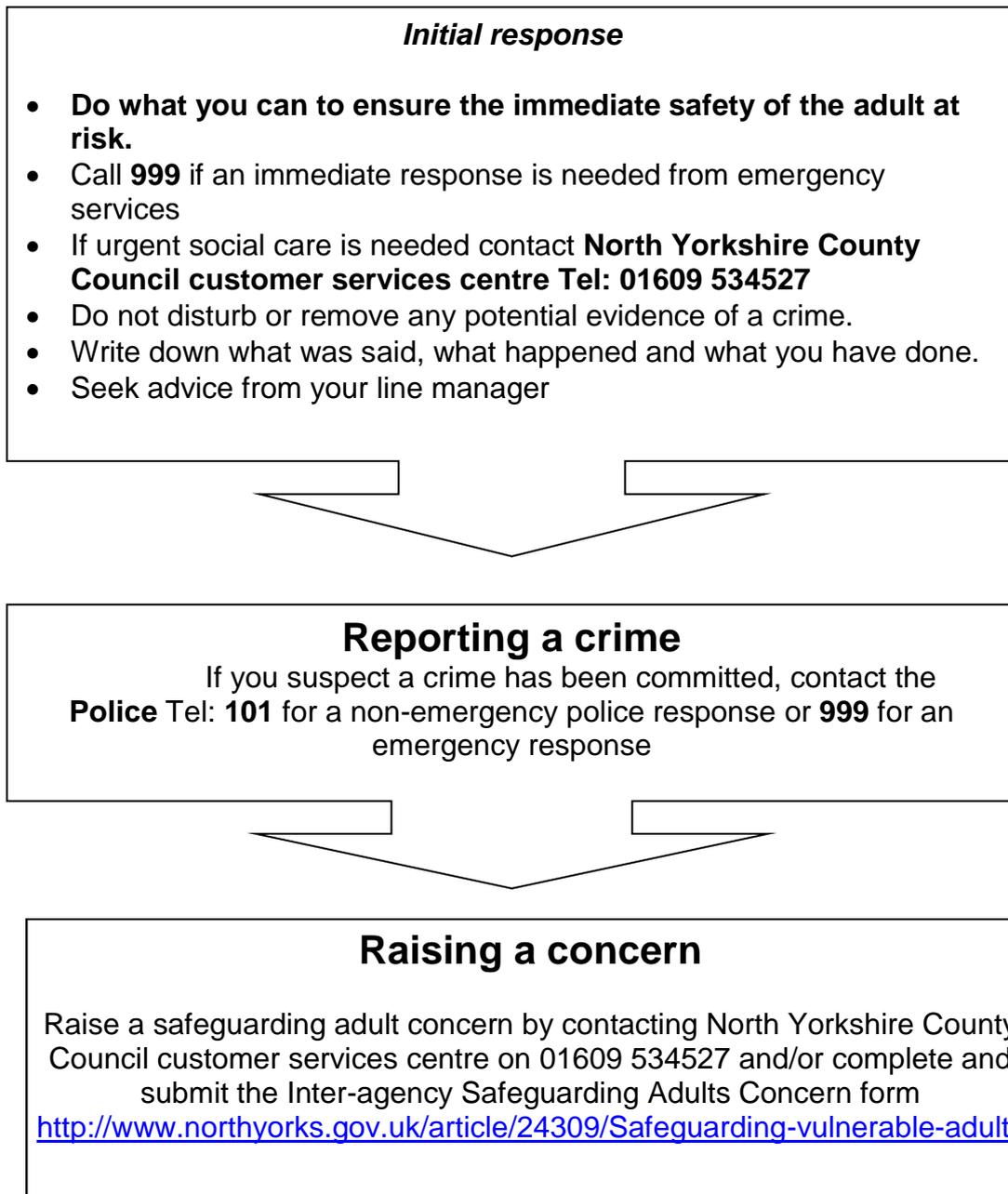


Listen!



Speak out!

APPENDIX D – **Craven Flowchart**: What to do if you witness or suspect abuse (summary)



APPENDIX E

USEFUL CONTACTS

Police – Emergency Response

- Where an emergency response is required to make the person safe or to secure evidence – **Call 999**

Police – Safeguarding Unit

- Where an emergency response is not required to make the person safe or to secure evidence – **Tel: 01274 474708**

Raising a multi-agency concern

Bradford District Adult Protection Unit

- **Tel: 01274 431077 Mon - Fri only**
- Raising a concern: <http://www.bradford.gov.uk/makeanalert>
- Out of hours – **Tel: 01274 431010**

North Yorkshire

<http://www.northyorks.gov.uk/article/24309/Safeguarding-vulnerable-adults>

- General Enquiries and raising a concern – North Yorkshire County Council Customer Services
- **Tel 01609 534527**

MARAC

- MARAC Co-ordinator– **Tel: 01274 437604**

Counter Fraud Contacts

Liz O'Reilly – Local Counter Fraud Specialist, Bradford CCGs
Tel: 07771 390548 liz.oreilly@nhs.net

Fraud and Corruption Reporting Line: 0800 028 4060

CHILDRENS' SOCIAL CARE SERVICES

For referrals (Monday to Friday 9.30-5pm) contact: Phone: 01274 434343

Childrens' Initial contact point Phone: 01274 437500

NORTH YORKSHIRE CHILDRENS' SOCIAL CARE SERVICES

For referrals / advice in office hours contact: Phone: 0845 034 9410

For referrals / advice outside office hours contact: Phone: 0845 034 9417
<http://www.safeguardingchildren.co.uk/worried-about-child.html>

APPENDIX F

DEFINITIONS

Adult

For the purposes of this document, adult refers to anyone who is aged 18 years or older. Children and young people under the age of 18 are subject to safeguarding children policy and procedures.

Adult Protection Unit

Adult Protection units (APU) provide advice and support to agencies or individuals involved in safeguarding adult work.

APUs also co-ordinate strategy meetings where there is concern about an adult at risk within health and social care services or where the person alleged to have caused harm is a member of staff.

APUs and Safeguarding Adults Co-ordinators can also receive concerns directly from adults at risk, carers, staff and members of the public.

Concerns

This refers to any suspicion, allegation, or other concern relating to the safety or wellbeing of an adult who may be experiencing or at risk of abuse. Individuals do not need 'proof' in order to raise concerns under the safeguarding adults' procedures. The agreement of the adult at risk should be sought if possible.

Mental capacity

Mental capacity is the ability to understand, retain and weigh up information in order to make a decision and to communicate the choice they have made. When an adult's ability to make a particular decision is reduced, they can be at increased risk of abuse, including neglect.

Mental Capacity Act

The Mental Capacity Act (MCA) 2005 provides a statutory framework to empower and protect people who may require help to make decision or may not be able to make decisions for themselves.

The Mental Capacity Act is accompanied by a 'Code of Practice' which provides practical guidance and everyone who works with people who may lack capacity has a duty to work within and have 'due regard' to the Code. The CCG expects all staff who work with people who may have reduced capacity to work within the Code of Practice.

Multi-Agency Procedures

This refers to the locally agreed multi-agency adult protection procedures coordinated through the local Safeguarding Adults Boards. This is the West and North Yorkshire and York multi-agency safeguarding adults policy and procedures:

<http://www.bradford.gov.uk/NR/rdonlyres/4D19AF25-AEE4-4ACD-B6C2-2D9D8898CDC5/0/SafeguardingAdultsMultiAgencyPolicyandProceduresDecember2015.pdf>

Neglect

Neglect is a form of abuse and may be defined as the persistent failure to meet a person's basic physical and/or psychological needs. Neglect can be either unintentional or deliberate.

Neglect can involve failing to provide adequate food, shelter and clothing, failing to protect from physical harm or danger, or the failure to facilitate access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness, to a person's basic emotional needs. Examples could include:

- Poor quality care
- Inadequate hygiene support
- Failure to ensure adequate hydration or nutrition
- Under or over use of medication
- Lack of privacy or dignity
- Serious pressure ulcer (category 3 or 4)
- Failure of care due to inadequate equipment, systems, procedures or practice

Provider

This refers to all organisations and individuals who provide services that are commissioned by the CCG, and extends to all their employees, locums and agency staff, sub-contractors, volunteers, students and learners undertaking any type of work experience placement or work related activity.

APPENDIX G

Roles and responsibilities within the CCGs

Role	Outline of responsibilities
Governing Body	<p>Provide Governing Body representation to the Clinical Quality and Governance Committee.</p> <p>Identify a lead director with executive responsibility for Safeguarding Adults.</p> <p>Undertake Safeguarding Adults training appropriate to their role and responsibilities.</p>
Executive Group/Clinical Board	<p>Ensure that the CCG has effective systems and resources in place to meet its legal obligations, monitor safeguarding activity and to safeguard adults who may be at risk of or experiencing abuse, within commissioned services.</p>
Quality Committees	<p>Monitor provider performance in relation to safeguarding adults on behalf of the Executive Group.</p> <p>Receive an annual report in relation to safeguarding adults' activity, risks and development.</p> <p>Approve the CCG's policy and procedural documentation relating to safeguarding adults.</p> <p>Monitor the effectiveness of safeguarding adults' systems and controls and make recommendations to the Executive Group.</p>
Chief Clinical Officer	<p>The Chief Clinical Officer is responsible for ensuring that the Executive Group and Governing Body receive relevant information regarding safeguarding issues within the CCG's and commissioned services, in order to inform the decisions of the Executive Group and Governing Body.</p>
Director of Collaboration	<p>Ensure that the CCG's have in place policy and assurance systems to monitor the safeguarding performance of commissioned services.</p> <p>Provide executive leadership on safeguarding issues to commissioners</p> <p>Ensure senior health commissioning representation on the Local Safeguarding Adults Boards and sub groups</p> <p>Provide management and leadership to the safeguarding team</p>
Head of Safeguarding (Adults) and Safeguarding Manager (Adults)	<p>Represent the CCG at the Safeguarding Adults Boards and sub-groups as required and report back any issues likely to impact on the CCG's or any commissioned services.</p> <p>Provide leadership and advice on all relevant aspects relating to the Mental Capacity Act (2005)</p>

	<p>Liaise with the Adult Protection Units and advise the relevant CCG officers and managers regarding cases of suspected abuse within their sector.</p> <p>Liaise with the Chief Operating Officer regarding the monitoring of safeguarding allegations against staff.</p> <p>Provide professional advice to the organisations and teams regarding CCG and multi-agency safeguarding procedures.</p> <p>Lead and support the development of safeguarding adults documentation and practice across the organisation.</p> <p>Provide advice and support the commissioning and contract management process to ensure that commissioned services have appropriate safeguarding systems and monitoring in place.</p> <p>Inform the Clinical Quality and Governance Committee of safeguarding adults activity, developments and potential risks via an annual report.</p> <p>Support and advise the work of Contract Management Boards and Quality and Performance Groups.</p> <p>Contribute to the management of SIs requiring investigation where appropriate.</p> <p>Liaise with and advise risk management colleagues regarding risk registers in relation to safeguarding adults.</p>
Chief Operating Officer	<p>Ensure that Disclosure and Barring checks are carried out in accordance with legal requirements and national guidance.</p> <p>Ensure that concerns about staff are monitored and referred to the Disclosure and Barring Service according to current national guidance and that Human Resource systems are compliant with any succeeding legal requirements or guidance in respect of the protection of adults at risk.</p> <p>Ensure that recruitment procedures comply with NHS Employment Check Standards and legal requirements in relation to the protection of adults.</p> <p>Ensure that systems are in place to monitor allegations against staff and to inform managers and other agencies in line with the CCG's legal requirements and agreed multi-agency policy and procedures.</p>
CCG managers	<p>Ensure the implementation of CCG and multi-agency safeguarding adult policy and procedures applicable within their sphere of responsibility.</p> <p>Ensure that safeguarding concerns are reported using organisational and multi-agency procedures.</p> <p>Identify support for staff that raise safeguarding concerns.</p> <p>Identify potential safeguarding related risks within their area of responsibility and ensure that risks which cannot be managed are escalated to the CCG risk register.</p> <p>Ensure that systems are in place to monitor staff attendance on identified</p>

	<p>safeguarding adults training relevant to their role, according to agreed CCG guidelines.</p> <p>Ensure that implications for the safeguarding of adults are considered in all service developments.</p>
All CCG staff	<p>Working actively to identify and safeguard people who may be experiencing or at risk of abuse.</p> <p>Support and work within agreed CCG and locally agreed multi-agency safeguarding adult policy and procedures relevant to their role and responsibility.</p> <p>Attend safeguarding adults training appropriate to their role and responsibilities and draw any learning needs (in relation to safeguarding adults) to the attention of their manager.</p> <p>Take immediate action to minimise risk to adults where abuse is suspected.</p> <p>Reporting suspicion of abuse or neglect using organisational or multi-agency procedures.</p> <p>Report serious crimes or situations where a person is at immediate risk due to a crime to the police.</p> <p>Reporting suspicions of fraud according to the Fraud and Corruption Policy.</p> <p>Reporting concerns to a senior manager or via the Whistleblowing Policy where they feel unable to report to their Line Manager or remain concerned that the adult(s) is still at risk.</p> <p>Reporting concerns directly to the Adult Protection Unit (or the police if they believe a crime has been committed) when they feel unable to raise concerns within the organisation or believe that their concern has not been acted upon.</p> <p>Work within professional codes of practice.</p> <p>Identify the need for additional safeguarding advice and support and seek this from the CCG Safeguarding Team or Adult Protection Unit when required.</p>
Governance and risk team	<p>Work with members of the adult safeguarding team to ensure that governance and risk management arrangements effectively monitor performance in relation to safeguarding adults.</p> <p>Work with members of the adult safeguarding team to identify safeguarding related issues and ensure that these are effectively managed where appropriate within locally agreed multi-agency adult protection procedures.</p>

APPENDIX H – Safeguarding adults CCG training requirements

Title	Duration	Target Audience
<u>Safeguarding Children and Adults Awareness Training (including Prevent awareness)</u>	1 hour 30 minutes	Mandatory for all new starters and existing CCG staff, including those who do not have regular contact with patients or the public. To be attended three yearly thereafter.
<u>Recognising & Responding to abuse (Multi-agency)</u>	1 day	This is the minimum level of multi-agency training available and is suitable for: <ul style="list-style-type: none"> • Clinicians and staff who have regular contact with patients or carers • Case managers • Those involved in the development and delivery of health services • Complaints and PALS managers • Staff in professional leadership roles • Staff responsible for conducting investigations or disciplinary procedures
<u>Service Managers Training (Multi-agency training)</u>	2 days	This multi-agency course is appropriate for those individuals that require a working knowledge of safeguarding and multi-agency procedures.
<u>Team based training</u>	Various	Training may also be organised for specific teams of CCG staff according to need via the Head of Safeguarding (Adults) and Safeguarding Manager (Adults)
<u>PREVENT WRAP</u>	1 hour 30 minutes	This training is suitable for: <ul style="list-style-type: none"> • Clinicians and staff who have regular contact with patients or carers • Case managers • Those involved in the development and delivery of health services • Complaints and PALS managers • Staff in professional leadership roles • Staff responsible for conducting investigations or disciplinary procedures

APPENDIX I – Safeguarding (adults and children) structure

