



# 4LSAB Multi-Agency Guidance on Adult Safeguarding Roles and Responsibilities

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Contents	Page
1. Introduction	4
2. What is the role of Care Quality Commission (CQC)?	4
3. What is the role of the Clinical Commissioning Groups (CCGs)?	4
4. What is the role of the Coroner?	5
5. What is the role of Complaints Officers?	5
6. What is the role of the Court of Protection?	5
7. What is the role of the Crown Prosecution Service (CPS)?	6
8. What are the responsibilities of the Director of Adult Social Services?	6
9. What is the role of the Disclosure and Barring Service?	6
10. What responsibilities do Elected members have?	6
11. What is the role of Environmental Health?	7
12. What is the role of faith communities and voluntary groups?	7
13. What is the role of Fire and Rescue Services?	7
14. What is the role of General Practitioners (GPs)?	7
15. What is the role of the police?	8
16. What is the role health practitioners?	8
17. What is the role of Healthwatch?	9
18. What is the role for Housing organisations within Adult Safeguarding?	9
19. What is the role of Learning and Development?	10
20. What is the role of the Local Authority?	10
21. What is the role of the National Probation Service?	11
22. What is the role of NHS England?	12
23. What responsibilities do NHS funded services have in relation to Adult Safeguarding?	12

24. What are the fundamental actions for NHS managers and Boards?	13
25. What is the role of the Office of the Public Guardian (OPG)?	13
26. What is the role of the Patient Advice and Liaison Service (PALS)?	14
27. What is the role professional bodies?	15
28. What is the role of the Prison Service?	15
29. What is the role of the Public and Community?	16
30. What responsibilities do Safeguarding Adult Boards have in relation to Adult Safeguarding?	16
31. What is the general guidance for all staff and volunteers in relation to Adult Safeguarding?	17
32. What is the role of National Trading Standards?	17
33. What is the role of Victim Support in relation to Adult Safeguarding?	17

## 1. Introduction

The Care Act 2014 states that local authorities must cooperate with each of its relevant partners, as described in section 6 (7) of the Care Act and those partners must also cooperate with the local authority in the exercise of their functions relevant to care and support including those to protect adults.

The statutory guidance to the Care Act (2014) highlights the need for organisations to work together to prevent and reduce abuse and neglect of adults. Collaboration should take place at all the following levels:

- Operational.
- Supervisory line management.
- Practice leadership.
- Strategic leadership within the senior management team.
- Corporate/cross authority.
- Chief officers/chief executives.
- Local authority members and the Police and Crime Commissioner.
- Providers of services.
- Voluntary organisations.

## 2. What is the role of Care Quality Commission (CQC)?

The CQC regulates and inspects health and social care services including domiciliary services and protects the rights of people detained under the Mental Health Act 1983. They have a role in identifying situations that give rise to concern that a person using a regulated service is or has been at risk of harm or may receive an allegation or a complaint about a service that could indicate potential risk of harm to an individual or individuals. CQC Safeguarding Protocol describes their role in safeguarding both children and adults. It covers all the relevant health and social care sectors for which CQC has regulatory responsibility. It provides the principles for how CQC will work to help ensure people are protected. It may also provide helpful guidance for stakeholders, providers of services and members of the public on the role of CQC in local safeguarding procedures.

## 3. What is the role of the Clinical Commissioning Groups (CCGs)?

CCGs are responsible in law for the safeguarding element of services they commission. As commissioners of local health services, CCGs need to assure themselves that organisations from which they commission have effective safeguarding arrangements in place. Within the changing landscape of place-based system leadership and the introduction of Integrated Care Systems (ICSs) and Primary Care networks (PCNs), safeguarding currently remains with CCGs.

There should be a designated professional lead in the CCG, who is a source of advice and support for all relevant agencies and other organisations, but particularly to health commissioners in CCGs, the LA and NHS England, other health professionals in provider organisation, etc. CCGs need to demonstrate that their designate experts are embedded in the clinical decision-making of the organization, with authority to working within local health economies to influence local thinking and practice and that capacity to do so.

Safeguarding forms part of the NHS Standard Contract (Service condition 32) and commissioners have agreement with providers, as to what contract monitoring processes are used to demonstrate compliance with safeguarding duties. CCGs gain assurance from all commissioned services, both NHS and independent healthcare providers throughout the year to ensure continuous improvement.

#### **4. What is the role of the Coroner?**

Coroners are independent judicial officers who are responsible for investigating violent, unnatural deaths or sudden deaths of unknown cause, and deaths in custody, which must be reported to them. The Coroner may have specific questions arising from the death of an adult with care and support needs. These are likely to fall within one of the following categories:

- Where there is an obvious and serious failing by one or more organisations.
- Where there are no obvious failings, but the actions taken by organisations require further exploration/explanation.
- Where a death has occurred and there are concerns for others in the same household or other setting (such as a care home).
- Deaths that have occurred when someone was the subject of a deprivation of liberty.
- Deaths that fall outside the requirement to hold an inquest, but follow-up enquiries/actions are identified by the Coroner or his or her officers.

In the above situations the local Safeguarding Adults Board should give serious consideration to instigating a safeguarding adult review.

#### **5. What is the role of Complaints Officers?**

Local authorities and other bodies including NHS providers have statutory complaints procedures. If a complaint received by a complaints officer indicates safeguarding concerns that meet the conditions stated in this procedure, the officer will consider raising a safeguarding concern to the relevant agency.

If a complaint is made to the local authority that leads to an Adult Safeguarding Enquiry, the local authority can decide not to commence the complaints investigation if this would compromise the Enquiry. The complainant would be informed of this course of action and the reason for it. In other circumstances, the complaint may form all or part of the Adult Safeguarding Enquiry.

#### **6. What is the role of the Court of Protection?**

The Court of Protection deals with decisions and orders affecting people who lack capacity. The court can make major decisions about health and welfare, as well as property and financial affairs. The court has powers to:

- Decide whether a person has capacity to make a particular decision for themselves.
- Make declarations, decisions or orders on financial and welfare matters affecting.
- Individuals who lack capacity to make such decisions.
- Appoint deputies to make decisions for persons lacking capacity to make those decisions.

- Decide whether a lasting power of attorney or an enduring power of attorney is valid Remove deputies or attorneys who fail to carry out their duties.

### **7. What is the role of the Crown Prosecution Service (CPS)?**

The CPS is the principal public prosecuting authority for England and Wales and is headed by the Director of Public Prosecutions. The CPS has produced a policy on prosecuting crimes against older people which is equally applicable to adults at risk, who may also be vulnerable witnesses.

Support is available within the judicial system to support adults at risk to enable them to bring cases to court and to give best evidence. If a person has been the victim of abuse that is also a crime, their support needs can be identified by the police, the CPS and others who have contact with the vulnerable adult. Witness Care Units exist in all judicial areas and are run jointly by the CPS and the police.

The CPS has a key role to play in making sure that special measures are put in place to support vulnerable or intimidated witnesses to give their best evidence. Special measures were introduced by the Youth Justice and Criminal Evidence Act 1999 and are available both in the Crown Court and in the magistrates' courts.

These include the use of trained intermediaries to help with communication, screens and arrangements for evidence and cross-examination to be given by video link.

### **8. What are the responsibilities of the Director of Adult Social Services?**

The Director of Adult Social Services has specific responsibilities under statutory guidance issued by the Department of Health. Within adult social services, the director has a responsibility to:

- Maintain a clear organisational and operational focus on safeguarding adults.
- Make sure relevant statutory requirements and other national standards are met.
- The Director is also responsible for either chairing or ensuring the effective chairing of the local Safeguarding Adults Board. Although it is not a requirement, the local authority should consider appointing an independent chair to the SAB who is not an employee or a member of an agency that is a member of the SAB.
- An independent chair can provide additional reassurance that the Board has some independence from the local authority and other partners.

### **9. What is the role of the Disclosure and Barring Service?**

The primary role of the Disclosure and Barring Service (DBS) is to help employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups including children. The DBS was established under the Protection of Freedoms Act 2012 and merges the functions previously carried out by the Criminal Records Bureau (CRB) and Independent Safeguarding Authority (ISA).

### **10. What responsibilities do Elected members have?**

Elected members have the following responsibilities in relation to safeguarding adults:

- They understand their own organisational responsibilities for safeguarding persons at risk.

- The corporate strategy identifies the council's role in safeguarding persons at risk and what priority this is given
- The council formally considers the annual report of the Safeguarding Adults' Board, and the issues this identifies for the local council area.

### **11. What is the role of Environmental Health?**

They are responsible for health and safety enforcement in businesses, investigating food poisoning outbreaks, pest control, noise pollution and issues related to health and safety. Local authorities are responsible for the enforcement of health and safety legislation in shops, offices, and other parts of the service sector.

### **12. What is the role of faith communities and voluntary groups?**

Churches, other places of worship, faith-based organisations as well as other voluntary groups provide a wide range of activities for persons at risk and have an important role in safeguarding persons at risk and supporting their families.

Religious leaders, staff and volunteers who provide services will have various degrees of contact with persons at risk.

Like other organisations that work with persons at risk, they need to have appropriate arrangements in place for safeguarding and promoting the welfare of persons at risk. In particular these should include:

- Procedures for staff and others to report concerns that they may have about the abuse, neglect or exploitation of a person at risk.
- Appropriate codes of practice for staff, particularly those working directly with persons at risk.
- Safe recruitment procedures, alongside training and supervision of staff (paid or voluntary).

### **13. What is the role of Fire and Rescue Services?**

When adults become vulnerable, they become vulnerable to fire. The overwhelming majority of fire deaths that occur involve people with care and support needs. For this reason, the Fire and Rescue Service have two roles to play in safeguarding adults at risk.

The first is to support other agencies to recognise, assess and manage fire risks for adults at risk. Fire and rescue services will provide awareness raising and training around identifying and managing fire risks in the domestic environment and, through the home safe and well visit programme, they can visit identified adults at risk and provide advice that is specific to the occupant and their home environment.

The second is to have good internal safeguarding procedures. Fire and Rescue personnel respond to emergencies, visit people in their homes when carrying out Safe and Well visits and undertake Fire Safety (Protection) visits in residential/institutional settings. Fire and Rescue service staff should be trained to recognise a concern and report it appropriately. Where Fire and Rescue personnel have a concern that a person at risk may be being abused, neglected or exploited they must follow their internal safeguarding procedure.

### **14. What is the role of General Practitioners (GPs)?**

A key question for doctors is whether the adult at risk can best be safeguarded through ordinary health and social care routes, or whether the risks require dedicated multi-agency

safeguarding processes. The British Medical Association have produced an Adult safeguarding ethics toolkit which is about the doctor's role in safeguarding adults who may be at risk of abuse or neglect. Designed principally for doctors working in England, it is also useful for any professional working in health, across the devolved nations.

The toolkit provides GPs with a stepped approach to their safeguarding responsibilities:

- Step 1: Identifying adults who may have safeguarding needs.
- Step 2: Responding to immediate risks.
- Step 3: Assessing the individual's needs.
- Step 4: Assessing capacity.
- Step 5: Responding to harm or abuse - identifying relevant services.
- Step 6: A consensual approach.
- Step 7: Review.

The toolkit also refers to measures GPs should consider in relation to information sharing, reporting wider patient safety concerns and concerns in relation to regulated services and colleagues as well as other community safety themes.

### **15. What is the role of the police?**

Hampshire Constabulary is a statutory partner of the SAB. They are determined to achieve equality of outcome for victims of crime. It is recognised that the impact of events which lead to the involvement of police services differ according to the needs of the recipient. All police officers and staff in the Constabulary must take into consideration that persons at risk in particular may have difficulty in engaging with the police service due to learning difficulties or other disabilities as well as cultural, language or other communication difficulties. Such support may include those outlined within The Youth Justice and Criminal Evidence Act 1999 which introduced a range of measures that can be used to facilitate the gathering and giving of evidence by vulnerable and intimidated witnesses.

It is the responsibility of the police to lead investigations where criminal offences are suspected by preserving and gathering evidence at the earliest opportunity. Where necessary the police will interview the alleged victim, the alleged person causing harm, and any witnesses. As the investigating agency they will work with the Local Authority and other partner agencies in line with the local Safeguarding Adults Policy Framework to ensure that all relevant information is shared and identified risks are acted on with a risk management or safeguarding support plan being agreed at an early stage.

In cases where criminal proceedings are deemed inappropriate, the police will work with partnership agencies in order to share information and agree courses of action to effectively safeguard adults at risk of harm.

During the course of a criminal investigation the safeguarding enquiry lead (Local authority) will retain the lead role for coordinating the multi-agency approach to ensure that the wellbeing and wishes of the adult will be considered throughout, especially when they do not wish to provide any evidence or support a prosecution.

### **16. What is the role health practitioners?**

Health care staff are often working with patients who, for a range of reasons, may be less able to protect themselves from neglect, harm or abuse. Health care practitioners play a vital role in prevention and reporting, responding and supporting the recovery of adults



who may have experienced or are at risk of abuse.

### **17. What is the role of Healthwatch?**

Healthwatch is an independent consumer champion and a statutory part of the Care Quality Commission (CQC), to champion services users and carers across health and social care.

#### **At local level:**

- Local Healthwatch organisations ensure that the views and feedback from patients and carers are an integral part of local commissioning across health and social care.
- Local Authorities can commission local Healthwatch or Healthwatch England to provide advocacy and support, helping people access and make choices about services, and supporting individuals who want to make a complaint. They will support people who lack the means or capacity to make choices; for example, helping them choose which General Practice to register with.
- Local Healthwatch organisations are funded by and accountable to, Local Authorities and will be involved in Local Authorities' partnership functions. To reinforce local accountability, Local Authorities are responsible for ensuring that local Healthwatch are operating effectively, and for putting in place better arrangements if they are not.
- Local Healthwatch organisations provide a source of intelligence for national Healthwatch and will be able to report concerns about the quality of providers, independently of the Local Authority.

#### **At national level:**

- Healthwatch England provides leadership, advice and support to local Healthwatch, and is able to provide advocacy services on their behalf if the Local Authority wishes.
- Healthwatch England provides advice to NHS Digital on the information which would be of most use to patients to facilitate their choices about their care.
- Healthwatch England provides advice to the Secretary of State for Health and Social Care, NHS England and English local authorities.
- Based on information received from local Healthwatch and other sources, Healthwatch England has powers to propose CQC investigations of poor services.

### **18. What is the role for Housing organisations within Adult Safeguarding?**

Housing sector staff, frontline and managers, not just those in supported or sheltered have a key safeguarding role to play, alongside their colleagues in social care, health and the police, in keeping people safe. They are well placed to identify people with care and support needs, share information and work in partnership to coordinate responses. Housing staff are a vital component of 4LSAB multi-agency safeguarding partnership. Social care staff should promote partnership working with housing staff. Local partnerships should have strategies for promoting the wellbeing of people where safeguarding does not apply, including those without care and support needs, people who refuse support and those who self-neglect. The guide aims to raise awareness about safeguarding in the

housing sector, at management and frontline levels, for all housing staff, not just those in sheltered or supported housing.

Housing staff should be kept informed and involved, as appropriate, with any safeguarding activity concerning tenants.

What are some issues for housing?

- Complex networks cause difficulties – housing providers may have to work with several local authorities in their area and vice versa.
- The local authority may be reluctant to get involved where there are concerns about an individual who is not eligible for social care support.
- Some housing providers have IT systems that are inadequate to store sensitive data and to facilitate 'customer profiling', that can tell them who may be more vulnerable, for effective safeguarding.

Housing have representation at strategic level across public protection forums such as Safeguarding Boards (adults and children), multi-agency risk assessment conferences (MARACs), multi-agency public protection arrangements (MAPPAs), health and wellbeing boards, and community safety partnerships. More information can be found [here](#), [here](#) and [here](#).

### **19. What is the role of Learning and Development?**

It is the responsibility of each organisation and agency to ensure employees and volunteers are appropriately trained. The SABs and partner agencies will promote multi-agency training, will consider any specialist training that may be required and will also consider joint commissioning of appropriate training with other agencies, such as the Community Safety Partnership. The joint Learning and Development sub-group of the SABs works to develop and promote multi-agency training to support implementation and application of these policy and procedures.

### **20. What is the role of the Local Authority?**

The Care Act sets out the local authority's responsibility for protecting adults with care and support needs from abuse or neglect for the first time in primary legislation. Local authorities must make enquiries, or cause another agency to do so, whenever abuse or neglect are suspected in relation to an adult and the local authority thinks it necessary to enable it to decide what (if any) action is needed to help and protect the adult. Cross boundary and inter authority responsibilities are laid out in National guidance clarifies the respective safeguarding roles, responsibilities and actions of 'host' and 'placing' Local Authorities in England where an adult lives in one area, but for whom some responsibility remains for someone funding their care.

Local authority out of hours teams (social services and health) and emergency duty teams operate out of normal working hours, at weekends and over statutory holidays. If a safeguarding concern is made to the out of hours service which indicates an immediate or urgent risk, the officer receiving the concern alert will take any steps necessary to protect the adult including arranging emergency medical treatment, contacting the police and taking any other action to ensure that the adult is safe.

The Care Act 2014 (Section 42) requires that each local authority must make enquiries, or cause others to do so, if it believes an adult with care and support needs is experiencing,

or is at risk of, abuse or neglect and as a result of their care and support needs is unable to protect themselves. An enquiry should establish whether any action needs to be taken to prevent or stop abuse or neglect, and if so, by whom.

The Care Act 2014 (Section 9) requires a local authority to carry out an assessment, which is referred to as a “needs assessment”, where it appears that an adult may have needs for care and support needs.

The Care Act 2014 (Section 11) says that adults can decline to have their care and support needs assessed except when they lack the mental capacity to make that decision and the local authority believes the assessment is in their best interests; or where there is a concern that the person is experiencing or is at risk of abuse or neglect. This means that where there is a requirement for there to be an adult safeguarding enquiry, there is likely to be a requirement for the local authority to assess the person’s care and support needs.

The Local Authority cannot delegate its duty to conduct a Section 42 Enquiry, but it can cause others to make enquiries. The specific circumstances will determine who is the right person to begin an enquiry. In many cases a professional who already knows the adult will be the best person. They may be a social worker, a housing support worker, a health worker such as a community nurse or the provider.

The Local Authority may still make enquiries when it considers it necessary and proportionate to have a safeguarding enquiry in circumstances where an adult does not meet all the criteria outlined in S42 of the Care Act. Such enquires are often referred to as non-statutory enquiry or a discretionary enquiry.

While the Local Authority has overall responsibility and the duty to conduct enquiries, this does not absolve other agencies of safeguarding responsibilities.

Relevant partner agencies involved in providing services to adults who may have care and support needs have a legal duty to cooperate in adult safeguarding enquiries, unless doing so is incompatible with their own duties or would have an adverse effect on their own functions.

This includes sharing information to enable the enquiry to be made thoroughly, participating in the enquiry planning processes, and undertaking enquiries when they have been ‘caused’ by the Local Authority to do so.

Principal social workers in the local authority are responsible for providing professional leadership for social work practice in their organisation and organisations undertaking statutory responsibilities on behalf of the local authority. Practice leaders/principal social workers should ensure that practice is in line with this guidance.

## **21. What is the role of the National Probation Service?**

The National Probation Service is a statutory criminal justice service that supervises high-risk offenders released into the community. Its priority is to protect the public by the effective rehabilitation of high-risk offenders, by tackling the causes of offending and enabling offenders to turn their lives around.

The Probation Service consists of two services: Community Rehabilitation Companies and the National Probation Service. These services protect the public by working with

offenders to reduce re-offending and harm. It works jointly with other public and voluntary services to identify, assess and manage the risk in the community of offenders who have the potential to do harm.

They are responsible for:

- Preparing pre-sentence reports for courts, to help them select the most appropriate sentence.
- Managing approved premises for offenders with a residence requirement on their sentence.
- Assessing offenders in prison to prepare them for release on licence to the community, when they will come under our supervision.
- Helping all offenders serving sentences in the community to meet the requirements ordered by the courts.
- Communicating with and prioritising the wellbeing of victims of serious sexual and violent offences, when the offender has received a prison sentence of 12 months or more or is detained as a mental health patient.

The services use the Offender Assessment System (OASys) to assess risk and identify factors that have contributed to offending. The Probation Service also has a remit to be involved with victims of serious sexual and other violent crimes.

Probation services share information and work in partnership with other agencies including Local Authorities and health services and contribute to local Multi Agency Public Protection Arrangements to help reduce the re-offending behaviour of sexual and violent offenders in order to protect the public and previous victims from serious harm. Although the focus of the probation services is on those who cause harm, they are also in a position to identify offenders who themselves are at risk from abuse and to take steps to reduce the risk to those offenders in line with the principles of this Policy Framework

## **22. What is the role of NHS England?**

From 1 April 2019, NHS England and NHS Improvement became a single organisation responsible for gaining assurance and oversight of safeguarding across the health system.

## **23. What responsibilities do NHS funded services have in relation to Adult Safeguarding?**

The NHS is accountable to patients for their safety and well-being through delivering high quality care.

Some patients may be unable to uphold their rights and protect themselves from harm or abuse. They may have the greatest dependency and yet be unable to hold the service to account for the quality of care they receive. The NHS has particular responsibilities to ensure that those patients receive high quality care and that their rights are upheld, including their right to be safe.

All providers of healthcare should ensure that staff have the necessary competences and that training is in place to ensure that their staff are able to deliver the service in relation to the safeguarding of individuals. This is strengthened by the development of the safeguarding adults: roles and competences for health care staff - intercollegiate document, which details the levels of training and competencies required for the different groups of staff in the organisations.

Managers of health services, their commissioners and regulators will also need assurance that where harm or abuse occurs, responses are in line with local Multi- agency Safeguarding Adults Procedures and national frameworks. Health services must produce clear guidance to managers and staff about what constitutes a safeguarding adults concern and what action is required. Safeguarding in the NHS encompasses:

- A patient centred approach to how services are commissioned and assured.
- Leading an organisational culture that safeguards patients.
- Using systems and processes that support safeguarding and connect aligned areas.
- Developing partnerships with patients, public and multi-agency partners.
- Using robust assurance to understand and improve safeguarding adult's arrangements.
- Commissioners working with providers, regulators and multi-agency partners to address concerns in services.
- Duty of Candour - every healthcare professional must be open and honest with patients when something that goes wrong with their treatment or care causes, or has the potential to cause, harm or distress.

#### **24. What are the fundamental actions for NHS managers and Boards?**

Managers and Boards have responsibility for implementing six fundamental actions to safeguard adults:

- Use the safeguarding principles to shape strategic and operational safeguarding arrangements.
- Set safeguarding adults within the strategic objectives of the service.
- Use integrated governance systems and processes to prevent abuse occurring and respond effectively where harm does occur.
- Work with the Local Safeguarding Adults Board, patients and community partners to create safeguards for patients.
- Provide leadership to safeguard adults.
- Ensure accountability and use learning within the service and the partnership to bring about improvement.

#### **25. What is the role of the Office of the Public Guardian (OPG)?**

The OPG has a statutory duty to safeguard:

- Any person who has a deputy appointed by the Court of Protection.
- The donor of any registered enduring power of attorney (EPA) or lasting power of attorney (LPA).
- Anyone for whom the Court of Protection has authorised someone else to carry out a transaction on their behalf, under s16 (2) of the Mental Capacity Act 2005 (single orders).

Most of OPG's clients are adults. Allegations of abuse of vulnerable children (or young people aged up to 21 in some circumstances) will usually be dealt with by local authority children's services. Where allegations of abuse relate to a child or young person, OPG will raise the issue with the police and/or the local authority children's services department.

The OPG's Safeguarding Policy states the ways that they will work to prevent abuse include:

- Making people aware of legal safeguards such as lasting powers of attorney and the services of OPG and the Court of Protection. They promote safeguarding through talks, training, presentations, publicity and work with key stakeholders and partners.
- Supervising deputies appointed by the Court of Protection to make decisions on behalf of someone who lacks mental capacity.
- Developing and reviewing strategies and policies about protecting their clients, both within the Ministry of Justice and in partnership with other government departments and external partners.
- Making sure systems are in place to prevent or reduce the possibility of a member of OPG staff abusing an adult at risk.
- Working with other agencies, including adult social services and the police.

The OPG also undertakes to notify Local Authorities, the police and other appropriate agencies when an abuse situation is identified. The OPG may be involved in safeguarding persons at risk in a number of ways, including:

- Promoting and raising awareness of legal safeguards and remedies, for example, lasting powers of attorney and the services of the OPG and the Court of Protection.
- Receiving reports of abuse relating to persons at risk ('whistleblowing')
- Responding to requests to search the register of deputies and attorneys (provided free of charge to Local Authorities and registered health bodies).
- Investigating reported concerns, on behalf of the Public Guardian, about the actions of a deputy or registered attorney, or someone acting under a single order from the court.
- Working in partnership with other agencies, including adult social care services and the Police.

The ways the OPG investigates reports of abuse include:

- Receiving reports that an adult at risk is being abused (they refer to this as 'whistleblowing').
- Answering requests to search the register of deputies and attorneys (free of charge).
- Investigating concerns about the actions of a deputy or registered attorney, or someone acting under a single order from the Court of Protection.
- Working in partnership with other agencies, including adult social services and the police, including taking part in meetings and case conferences.
- Taking part in joint investigations of suspected abuse.

## **26. What is the role of the Patient Advice and Liaison Service (PALS)?**

The Patient Advice and Liaison Service (PALS) offers confidential advice, support and information on health-related matters. They provide a point of contact for patients, their families and their carers.

PALS provides help in many ways. For example, it can:

- Help patients with health-related questions.
- Help resolve concerns or problems when using the NHS.
- Inform people how to get more involved in their own healthcare.

PALS can provide information about:

- The NHS.
- The NHS complaints procedure, including how to get independent help for people who want to make a complaint.
- Support groups outside the NHS.

As a focal point for feedback from patients PALS can inform service developments and as such can act as an early warning system about concerns including quality of care for NHS trusts and Commissioning Care Groups.

PALS staff are in a position to recognise that a concern which is raised with them either by a patient or a carer or friend could indicate that the person is at risk of abuse or neglect. They should raise that concern within their own Trust via the established Trust safeguarding pathways.

### **27. What is the role professional bodies?**

A professional body is an organisation with individual members practicing a profession or occupation in which the professional body maintains oversight of knowledge, skills conduct and practice. The professional body concerned would depend on the specific role. Each professional body must ensure that adults are protected from abuse and neglect and will have their own professional standards and codes of conduct to govern practice.

### **28. What is the role of the Prison Service?**

The Prison Service promotes the welfare of all prisoners, particularly persons at risk, and protects them from all kinds of harm and neglect. Prisoners, particularly adults at risk, are provided with a safe and secure environment which protects them from harm and neglect. They receive safe and effective care and support. Prisons work to the following benchmark standards:

- The risks to prisoners are recognised and there is guidance and procedures to help reduce and prevent harm or abuse from occurring.
- When abuse is alleged or suspected to have occurred, prompt and appropriate action is taken to protect the prisoner.
- An individual care plan is in place to address a prisoner's assessed needs.
- Care plans are thorough and reviewed regularly, involving all relevant staff.
- Up-to-date Government and local guidance about safeguarding adults is accessible and safeguarding procedures are known and used by all staff, including how to raise a safeguarding concern.
- The safeguarding policy and any prison codes of conduct are informed by the underlying five principles of the Mental Capacity Act 2005.
- Where possible, access to advocates and/or appropriate adults is in place to aid prisoners' capacity to understand and consent.
- The prison has a code of conduct informing staff of their duty to raise legitimate concerns about the conduct of an individual in relation to the treatment and management of prisoners.

- Staff feel confident and safe to raise concerns.
- Staff are aware of their personal and professional responsibility to protect persons at risk and undergo appropriate training.
- Staff are subject to recruitment and vetting procedures which comply with necessary legislation.

### **29. What is the role of the Public and Community?**

The public and our communities has a vital role in adult safeguarding through the recognition and prevention of abuse and neglect. It is the responsibility of all agencies and organisations to ensure that there is a good level of public awareness of adult abuse and how concerns should be reported.

### **30. What responsibilities do Safeguarding Adult Boards have in relation to Adult Safeguarding?**

S43 of the Care Act 2014 requires each local authority to set up a Safeguarding Adults Board (SAB). The main objective of a SAB is to assure itself that local safeguarding arrangements and partners act to help and protect adults in its area who have a need for care and support (whether or not the local authority is meeting any of those needs) and is experiencing, or at risk of, abuse or 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.

The SAB has a strategic role to oversee and lead adult safeguarding across the locality and will be interested in a range of matters that contribute to the prevention of abuse and neglect. The SAB can be an important source of advice and assistance, for example in helping others improve their safeguarding mechanisms. It is important that the SAB has effective links with other key partnerships in the locality.

The legal duties of Safeguarding Adults Boards set out in the Care Act 2014, which are as follows:

- (1) Each local authority must establish a Safeguarding Adults Board (a “SAB”) for its area.
- (2) The objective of a SAB is to help and protect adults in its area in cases of the kind described in section 42(1).
- (3) The way in which a SAB must seek to achieve its objective is by co-ordinating and ensuring the effectiveness of what each of its members does.
- (4) A SAB may do anything which appears to it to be necessary or desirable for the purpose of achieving its objective.
- (5) Schedule 2 (which includes provision about the membership, funding and other resources, strategy and annual report of a SAB) has effect.
- (6) Where two or more local authorities exercise their respective duties under subsection (1) by establishing a SAB for their combined area—
  - (a) a reference in this section, section 44 or Schedule 2 to the authority establishing the SAB is to be read as a reference to the authorities establishing it, and
  - (b) a reference in this section, that section or that Schedule to the SAB’s area is to be read as a reference to the combined area.

The Social Care Institute for Excellence Safeguarding Adults Boards Checklist and Resources provides a comprehensive narrative and account of the roles and



responsibilities of the SAB.

### 31. What is the general guidance for all staff and volunteers in relation to Adult Safeguarding?

All staff and volunteers from any service or setting should have in place adult safeguarding policy and procedures. Staff and volunteers from any service or setting who have contact with persons at risk have a responsibility to be aware of issues of abuse, neglect or exploitation. This includes personal assistants paid for from direct payments or personal budgets. All staff and volunteers have a duty to act in a timely manner on any concern or suspicion that an adult who is vulnerable is being, or is at risk of being, abused, neglected or exploited and to ensure that the situation is assessed and investigated.

### 32. What is the role of National Trading Standards?

Their vision is to protect consumers and safeguarding businesses through cross boundary intelligence led enforcement in England and Wales. They support the work of specialist teams:

- Scams
- eCrime
- Estate Agency
- Intelligence
- Safety at Ports and Borders
- Regional Investigations.

### 33. What is the role of Victim Support in relation to Adult Safeguarding?

Victim support is a free service for anyone who has been a victim of any crime or have been affected by a crime committed against someone they know, and can help people to find the strength to deal with what they have been through. It is available whether or not the crime has been reported and regardless of when it happened. Victim support can provide emotional support, practical help and information.

Adult safeguarding enquiries are undertaken in accordance with statutory duties and often involve agencies and organisations, with specific roles and responsibilities within the enquiry.

Type of safeguarding enquiry	Type of safeguarding activity	Lead Agency
Criminal	Victims Code refer to victim support, Criminal Investigation, witness support, access to special measures.	Police
Suspicious death	A coroner is an independent judicial office holder, appointed by a local council. Coroners usually have a legal background but will also be familiar with medical terminology. Coroners investigate deaths that have been reported to them if it appears that: <ul style="list-style-type: none"> <li>• the death was violent or unnatural</li> <li>• the cause of death is unknown, or</li> <li>• the person died in prison, police custody, or another type of state detention.</li> </ul> In these cases, coroners must investigate	Coroner/Police

	to find out, for the benefit of bereaved people and for official records, who has died and how, when, and where they died. Coroners' officers work under the direction of coroners and liaise with bereaved people as well as with the police, doctors, witnesses, mortuary staff, hospital bereavement staff and funeral directors.	
Irregular/suspicious activity relating to a bank account	Investigate accounts. Fraud investigation with referral to the police.	Bank
Breach of Health and Social Care Act 2008	Setting national standards of quality and safety that people can expect whenever they receive care. Registering care services that meet national standards. Monitoring, inspecting and regulating care services to make sure they continue to meet the standards. CQC can: <ul style="list-style-type: none"> <li>• Issue a warning notice, asking for improvements within a short period of time.</li> <li>• Restrict the services that the care provider can offer.</li> <li>• Restrict admissions to the service.</li> <li>• Issue a fixed penalty notice.</li> <li>• Suspend the care provider's registration.</li> <li>• Cancel the care provider's registration.</li> <li>• Prosecute the care provider.</li> </ul>	Care Quality Commission
Unresolved complaint in a health care setting	They investigate complaints where individuals have been treated unfairly or have received poor service from government departments and other public organisations and the NHS in England.	Health Service Ombudsman
Breach of rights of a person detained under the Mental Health Act	Monitor the use of the Mental Health Act and protect the interests of people whose rights are restricted under that Act.	Care Quality Commission
Staff misconduct	Investigating staff misconduct, use of disciplinary procedures. Referral to DBS.	Employer
Breach of professional code of conduct	Safeguard the public, set standards, ensure that the registered person keep their skills and knowledge up to date and uphold the standards of their professional code, follows systems and processes to investigate allegations made against a professional who may not have followed the code.	Professional Body

Staff poor practice	Training, Monitoring, Supervision, Competency framework and capability processes.	Employer
Breach of health and safety legislation in a regulated setting	Regulation, Investigation and enforcement action.	Care Quality Commission
Complaint re: failure of service provision	Instigating complaints procedures, explaining the process, establishing facts, investigating, provide a response.	Service Provider
Breach of contract to provide care	Investigating, award damages, cancel contracts.	Contracts/ Commissioners/ Trading Standards
Bogus callers or rogue traders	Investigation and enforcement action.	Trading Standards
Concerns about persons acting under an appointeeship	DWP investigation, change appointee or adult services set up to act as appointee.	Department of Works and Pension
Forced marriage	Criminal Investigation, Application for a Forced Marriage Protection Order.	Police
Carer stress leading to unintentional harmful behaviour towards the adult	Carer assessment, family network meeting, risk assessment, support plan, referral to specialist service.	Adult Services
Modern slavery or trafficking	Referral to the National Referral Mechanism.	Police
Concerns about a person acting as an Attorney or Court Appointed Deputy	Taking action where there are concerns about an attorney or deputy registering lasting and enduring powers of attorney, so that people can choose who they want to make decisions for them maintaining the public register of deputies and people who have been given lasting and enduring powers of attorney, supervising deputies appointed by the Court of Protection, and making sure they carry out their work in line with Mental Capacity Act, looking into reports of abuse against registered attorneys or deputies.	Office of the Public Guardian
Ill treatment or neglect of a person in receipt of care	Criminal investigation, public protection.	Police
Failure to meet standards in NHS and social care services	Regulatory and enforcement action, cancellation of registration.	Care Quality Commission
A member of staff having a sexual relationship with a service user with a mental disorder	Criminal investigation, gather evidence, interview.	Police

Anti-Social Behaviour	Community Trigger, Community Remedy, Mediation, Apology, Damages, ABC, Restorative justice, Cautions, Parenting Contracts, Civil Injunction, Dispersal Power, Community Protection Notice, Criminal Behaviour Order, Public Spaces Protection Orders, Closure Power.	Police/Local Authority
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