

Policy Type		Policy Name
Information Governance		CO16: Safeguarding Adults Policy
Corporate	X	
Standard Operating Procedure		
Human Resources		

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Committee approved by	CCG Executive Committee
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Version	Date	Significant Changes
1	28/02/2013	<ul style="list-style-type: none"> Existing North East CCG Safeguarding Adults Policy
1.2	24/03/2015	<ul style="list-style-type: none"> Review and legislation changes.
1.3	04/05/2016	<ul style="list-style-type: none"> Review and legislation changes

POLICY VALIDITY STATEMENT

This policy is due for review on the latest date shown above. After this date, policy and process documents may become invalid. Policy users should ensure that they are consulting the currently valid version of the documentation.

Approval

Role	Name	Date
Approval (1)	Policy Group	28/02/2013
Approval (1.2)	Executive Committee	24/03/2015
Approval (1.3)	Executive Committee	17/05/2016

Review

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1. Introduction

This policy sets out how as a commissioning organisation Durham Dales, Easington and Sedgefield Clinical Commissioning Group (DDES CCG) will fulfil its statutory duties and responsibilities effectively both within its own organisations and across the local health economy via its commissioning arrangements. The CCG will ensure that it has in place robust structures, systems, standards and an assurance framework for safeguarding which are in accordance with the legal structure, NHS England Safeguarding Vulnerable People in the NHS: Accountability and Assurance Framework (2015) and County Durham Local Safeguarding Adults Board (SAB) inter-agency policy and procedures.

DDES CCG arrangements will ensure that both its own functions and those services provided on its behalf are discharged with regard to the need to safeguard vulnerable adults.

Durham Dales, Easington and Sedgefield Clinical Commissioning Group (DDES CCG) aspires to the highest standards of corporate behaviour and clinical competence, to ensure that safe, fair and equitable procedures are applied to all organisational transactions, including relationships with patients, their carers, public, staff, stakeholders and the use of public resources.

DDES CCG is required to fulfil its legal duties under the Care Act 2014 and all staff working within the CCG's health economy that commission or provide services for vulnerable adults must make safeguarding an integral part of the care they offer to patients and their families.

The CCG, as a member of the local Safeguarding Adults Board and Local Adult Safeguarding Sub Committees has formally adopted the principles of the County Durham Safeguarding Adults Inter-Agency Policy and Procedures.

The CCG safeguarding adults team are employed by North Durham CCG but operate across North Durham, Darlington and Durham Dales, Easington and Sedgefield CCGs via a host arrangement thereby providing services across all three areas.

1.1 Status

This policy is a corporate policy.

1.2 Purpose and Scope

This policy aims to ensure that no act or omission by DDES CCG as a commissioning organisation, or via the services it commissions, puts a vulnerable adult at risk and rigorous systems are in place to proactively safeguard vulnerable adults and to support staff in fulfilling their obligations.

- 1.2.2** This policy describes how DDES CCG will discharge the responsibility for ensuring its own organisation, and the health services it commissions, fulfil their duty to safeguard vulnerable adults. DDES CCG will ensure compliance with the safeguarding requirements of the Care Act 2014, the Mental Capacity Act 2005 and Safeguarding Vulnerable People in the NHS: Accountability and Assurance Framework 2015.
- 1.2.3** This policy applies to all staff employed by DDES CCG, including any agency, volunteers, self-employed or temporary staff.
- 1.2.4** All managers must ensure their staff are made aware of this policy and how to access it and ensure its implementation within their line of responsibility and accountability.
- 1.2.5** All DDES CCG staff have an individual responsibility for the protection and safeguarding of vulnerable adults and must know what to do if concerned that an adult is at risk.

2. Definitions

- 2.1.1** The safeguarding duties outlined within the “Care and Support Statutory Guidance 2014” apply to an adult who:
- has needs 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.
- 2.1.2** An adult with care and support needs may be:
- an older person
 - a person with a physical disability, a learning difficulty or a sensory impairment
 - someone with mental health needs, including dementia or a personality disorder
 - a person with a long-term health condition
 - someone who misuses substances or alcohol to the extent that it affects their ability to manage day to day living.

This is not an exhaustive list. In its definition of who should receive a safeguarding response, the legislation also includes people who are victims of sexual exploitation, domestic abuse and modern slavery. These are all largely criminal matters and safeguarding duties would not be an alternative to police involvement. They would be applicable where a person has care and support needs that mean they are not able to protect themselves.

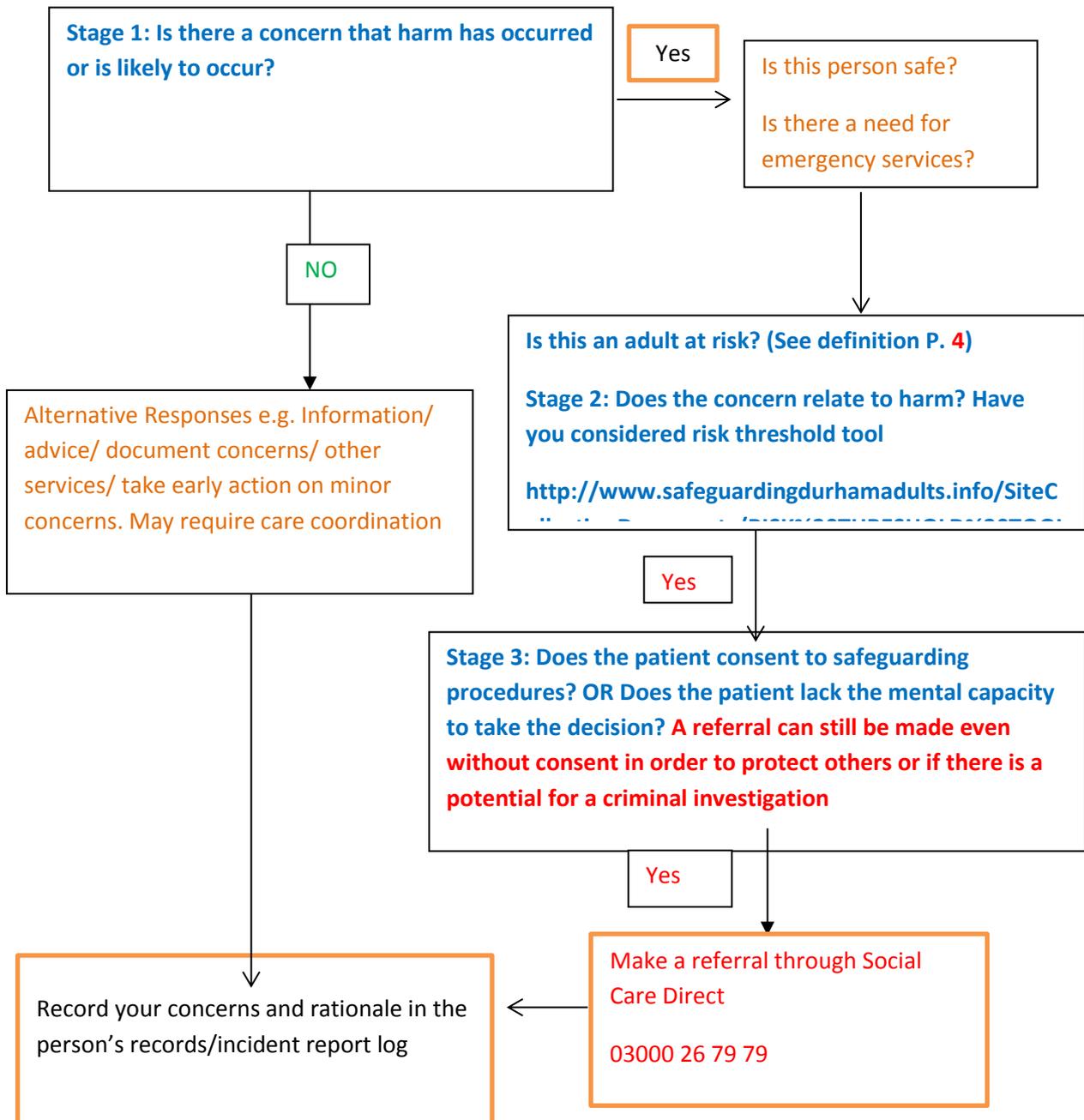
2.1.3 The Care Act defines abuse as;

- **Physical abuse** – including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.
- **Domestic violence** – including psychological, physical, sexual, financial, emotional abuse; so called ‘honor’ based violence.
- **Sexual abuse** – including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.
- **Psychological abuse** – including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.
- **Financial or material abuse** – including theft, fraud, internet scamming, coercion in relation to an adult’s financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.
- **Modern slavery** – encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.
- **Discriminatory abuse** – including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion.¹⁸²
- **Organisational abuse** – including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one’s own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.
- **Neglect and acts of omission** – including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating
- **Self-neglect** – this covers a wide range of behaviour neglecting to care for one’s personal hygiene, health or surroundings and includes behaviour such as hoarding.

All staff should use the information/contacts below when considering making an alert.

Safeguarding Adults Decision Making Flowchart:

The Role of Health Service Practitioners



SAFEGUARDING ADULTS CONTACT DETAILS

Adult Social Care Direct – To make a referral
(Mon – Thurs 9.00am-5.00pm, Friday 9.00am-4.30pm)
Tel: 03000 26 79 79

Emergency Duty Team
Referrals and advice out of hours
Tel: 03000 26 79 79

County Durham Police
Tel: 101 – Ask for local police station or Protecting Vulnerable Persons Unit. (In emergencies please use 999).

County Durham Safeguarding adults Multi-agency policy and procedures
<http://www.safeguardingdurhamadults.info/SiteCollectionDocuments/Safeguarding-Adults-Policies-and-Procedures.pdf>

For concerns in other neighbouring local areas please contact the relevant local authority safeguarding team in the first instance:

Darlington
Adult Social Care MASH – To make a referral
(Mon – Thurs 9.00am-5.00pm, Friday 9.00am-4.30pm)
Tel: 01325 406111

Emergency Duty Team
Referrals and advice out of hours
Tel: 08720 402994

Sunderland
Tel:0191 5205552

Stockton
First Contact : 01642 527764.
Emergency Duty Team : 08702402994

Middlesbrough
Access Team : 01642 726004
Emergency Duty Team: 0870240994

Hartlepool
First Contact : 01429 284284
Emergency Duty Team : 08702402994

Redcar and Cleveland
Health and Wellbeing: 01642 771500
Emergency Duty Team: 08702402994

Clinical Commissioning Group Safeguarding Adults Team NDUCCGadultsafeguarding@nhs.net
01913898607

3. Principles

In developing this policy DDES CCG recognises that safeguarding adults is everyone's responsibility and that there is the need for effective joint working between agencies and professionals who have different roles and expertise if those vulnerable adults in society are to be protected from harm. In order to achieve effective joint working there must be constructive relationships at all levels. The CCG will ensure that the principles identified within "Safeguarding Vulnerable People in the NHS: Accountability and Assurance Framework"(2015) are consistently applied. CCGs are also required to demonstrate that they have appropriate systems in place for discharging their statutory duties in terms of safeguarding. This includes:

- a clear line of accountability for safeguarding, properly reflected in the CCG governance arrangements, i.e. a named executive lead to take overall leadership responsibility for the organisation's safeguarding arrangements;
- clear policies setting out their commitment, and approach, to safeguarding including safe recruitment practices and arrangements for dealing with allegations against people who work with children and adults as appropriate;
- training their staff in recognising and reporting safeguarding issues, appropriate supervision and ensuring that their staff are competent to carry out their responsibilities for safeguarding;
- effective interagency working with local authorities, the police and third sector organisations which includes appropriate arrangements to cooperate with local authorities in the operation of LSCBs, SABs and health and wellbeing boards;
- ensuring effective arrangements for information sharing; employing, or securing, the expertise of designated doctors and nurses for safeguarding children and for looked after children and a designated paediatrician for unexpected deaths in childhood;
- Named GP;
- Designated Professional Safeguarding Adults/Mental Capacity Act lead
- effective systems for responding to abuse and neglect of adults;
- supporting the development of a positive learning culture across partnerships for safeguarding adults to ensure that organisations are not risk averse; and the role of CCGs is about more than just managing contracts and employing expert practitioners. It is about working with others to ensure that critical services are in place to respond to children and adults who are at risk or who have been harmed, and it is about delivering improved outcomes and life chances for the most vulnerable. CCGs need to demonstrate that their designated clinical experts (children and adults), are embedded in the clinical decision making of the organisation, with the authority to work within local health economies to influence local thinking and practice.

3.1 The Care Act 2014 provides a comprehensive framework for the care and protection of adults, stating the following aims:

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

In order to achieve these aims, it is necessary to:

- ensure that everyone, both individuals and organisations, are clear about their roles and responsibilities;
- create strong multi-agency partnerships that provide timely and effective prevention of and responses to abuse or neglect;
- support the development of a positive learning environment across these partnerships and at all levels within them to help break down cultures that are risk-averse and seek to scapegoat or blame practitioners;
- enable access to mainstream community resources such as accessible leisure facilities, safe town centres and community groups that can reduce the social and physical isolation which in itself may increase the risk of abuse or neglect; and
- clarify how responses to safeguarding concerns deriving from the poor quality and inadequacy of service provision, including patient safety in the health sector, should be responded to.

The following six principles apply to all sectors and settings including care and support services, further education colleges, commissioning, regulation and provision of health and care services, social work, healthcare, welfare benefits, housing, wider local authority functions and the criminal justice system. The principles should inform the ways in which professionals and other staff work with adults. The principles can also help SABs and organisations more widely, by using them to examine and improve their local arrangements.

- **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.”*

3.2 DDES CCG has a statutory duty under the Care Act 2014 to make arrangements for ensuring that its own functions, and services provided on its behalf, are fulfilled with regard to the need to safeguard vulnerable adults.

3.3 NHS England, via the sub-regional team and DDES CCG are required to review their arrangements with organisations from which they commission services so as to improve their oversight of safeguarding, and to ensure their GP practices have adequate leadership and training with regard to safeguarding adults.

3.4 This CCG Policy should be used in conjunction with Local Safeguarding Adults Boards Inter-agency policy and procedures.

4 Governance and accountability

4.1 DDES CCG governing body is responsible for making certain all its provider services have arrangements in place to meet their statutory requirements relating to safeguarding adults and that these arrangements are being complied with. The governing body will assure itself that safeguarding adults is a priority across the health economy and will receive regular reports and updates with reference to safeguarding adult matters across its health economy. The reporting arrangements to the CCG are as follows:

- Bi – annual assurance reports
- Annual report

4.2 DDES CCG will ensure effective leadership, commissioning and governance of safeguarding adult's services across the local health community by:

- Ensuring a robust governance structure is in place to support the work of County Durham Local Safeguarding Adults Board and DDES CCG governing body in delivering safeguarding adults responsibilities. The CCG Executive Lead for Safeguarding Adults is the Director of Nursing. She is supported in this role by the Designated Nurse Safeguarding Adults who is also a member of the SAB.
- Ensuring all commissioned services are fully aware of their local and statutory responsibilities regarding safeguarding adults and that DDES CCG commissioning, contracting, contract monitoring and quality assurance processes fully reflects this:
 - Safeguarding adults is a regular standing agenda item on the provider services' Clinical Quality Review Groups (CQRGs)
- Ensuring service specifications, invitations to tender and service contracts fully reflect safeguarding requirements as outlined in this policy with specific reference to the clear standards for service delivery.
- Monitoring safeguarding compliance both within the CCG and across commissioned services, addressing weaknesses as a matter of priority.
- Reviewing Safeguarding Adult Reviews and their subsequent action plans and ensuring that learning from these is reflected in the strengthening of commissioning, quality assurance and practice.
- Ensuring a system is in place for escalating risks.

5. Safeguarding Adults Standards

5.1 Clear service standards for safeguarding vulnerable adults will be included in all commissioning arrangements, as appropriate to the service, in accordance with the key requirements of:

- the Care Act 2014
- standards outlined by the Care Quality Commission
- Safeguarding Vulnerable People in the NHS: Accountability and Assurance Framework (NHS Commissioning Board, 2015)
- Revised Prevent Duty Guidance (HM Government, 2015)

These include:

i. *Leadership and Accountability*

- A lead senior manager who is informed about, and who takes responsibility for the actions of their staff in safeguarding adults.
- A senior lead for safeguarding adults to ensure their needs are at the forefront of local planning and service delivery.
- Safeguarding adults is integral to clinical governance and audit arrangements, and there is a clear line of accountability and responsibility for this.

ii. *Policies / Strategies*

- Each provider must have comprehensive up to date safeguarding adults policy and procedures, which are in line with Government, CQC and SAB guidance and take account of guidance from any relevant professional body. The policy should include an adult's right to protection from abuse regardless of gender, ethnicity, disability, sexuality or beliefs. This policy must be accessible to staff at all levels.
- Clear priorities for safeguarding adults should be explicitly stated in providers' key policy documents and strategies.

iii. *Staff training and Continued Professional Development*

- Staff should be trained and competent to be alert to potential indicators of abuse, exploitation and neglect in adults, know how to act on their concerns and fulfil their responsibilities in line with Adult Safeguarding, Roles and competencies for health care staff intercollegiate document (2016) and their Local Safeguarding Adults Boards requirements.
- A staff training strategy and programme should be in place that includes the levels of safeguarding adults training appropriate to staff's roles and responsibilities
- A training database detailing the uptake of all staff training so employers can be alerted to unmet training needs and training provision can be planned.
- Staff as appropriate should be made aware of any new guidance or legislation and any recommendations from local and national safeguarding adult reviews and internal management reviews with regards to safeguarding adults.

iv. Safe Recruitment and Vetting Procedures

Safe recruitment policies and practices including the necessary Disclosure and Barring (DBS) checks for all staff working with adults must be in place and must make certain no person who is barred by the Independent Safeguarding Authority is recruited.

v. Managing Allegations Against Staff

Procedures for dealing with allegations of abuse against staff and volunteers, including referral to the Local Authority safeguarding process if necessary.

vi. Effective Inter-agency Working

- Staff should work together with other agencies in accordance with their SAB policies and procedures.

vii. Information Sharing

- Providers should have in place or have adopted local policies and procedures for sharing information where there are concerns in relation to safeguarding adults.
- Senior Managers should promote good practice in information sharing according to the published national guidance; *Information Sharing; Guidance for Practitioners and Managers* HM Government 2008.

viii. Supervision

- Supervision policies are in place for the provision of adult safeguarding supervision in line with the requirements set out in the Adult Safeguarding, Roles and competencies for health care staff intercollegiate document (2016) and local SABS policy and procedures.

ix. Response to Incidents and Complaints

- There should be a policy with regard to incidents, errors and complaints relating to any aspect of safeguarding adults and it should include the requirement to inform the Named or Safeguarding lead within the organisation/practice.
- Procedures are in place for reporting Serious Incidents to the CCG via the Incident Reporting and Investigation Policy and Procedure and Policy and Procedure for the Management of Complaints

x. Safeguarding Adult Review (SARs)

- Providers will cooperate with any Local Safeguarding Adult Board conducting a Serious Adult Review and will ensure any lessons coming out of the Review are learnt, fully shared and implemented.

5.2 Recruitment and Personnel Processes

DDES CCG will ensure that safe recruitment processes are adhered to in accordance with the NHS employers' regulations and Vetting and Barring Scheme Regulations identified in the Vulnerable Groups Act 2006.

5.3 Whistle Blowing

The Whistle blowing Policy enables concerns about malpractice to be raised at an early stage and in the right way without fear of reprisals or concern for safety. Safeguarding adult's issues should continue to be referred through SAB procedures.

5.4 Safeguarding Adults Reviews (SARs)

- 5.4.1** All providers and commissioners will notify NECS quality team on behalf of the CCG of serious incidents when an adult could become the subject of a Safeguarding Adult Review. DDES CCG has a statutory duty to work in partnership with the SAB concerned with conducting a Safeguarding Adult Review in accordance with the Care Act 2014, Care and Support Statutory Guidance DH 2014 and local inter-agency policies and procedures.
- 5.4.2** The Designated Nurse Safeguarding Adults must notify NHS England when a Safeguarding Adult Review is commissioned by the SAB. This will be in line with the requirements set out in the NHS England Serious Incident Framework and local guidance.
- 5.4.3** The CCG must work to ensure that the reviews, and all actions following the review, are carried out in accordance with the timescale and terms of reference set by the SAB Safeguarding Adults Review Panel.
- 5.4.4** The CCG will act on the relevant recommendations arising from Safeguarding Adults Reviews, which will be monitored by the relevant Quality, Review Group within each of the CCGs.

6. Duties and Responsibilities

6.1 Clinical Commissioning Group

DDES CCG has delegated responsibility to the Governing Body for setting the strategic context in which organisational process documents are developed, and for establishing a scheme of governance for the formal review and approval of such documents.

6.2 The Accountable Officer (AO)

The Accountable Officer has overall responsibility for the strategic direction and operational management, including ensuring that process documents comply with all legal, statutory and good practice guidance requirements.

The Accountable Officer is accountable for ensuring that the health contribution to safeguarding is discharged effectively across the whole local health economy through CCG commissioning arrangements.

This role is supported by the Director of Nursing who holds delegated responsibility and is the executive lead for Safeguarding Adults and the Designated Nurse Safeguarding Adults and the Named GP

6.3 The Executive Lead for safeguarding adults

DDES CCG Director of Nursing, as executive lead will take responsibility for governance and organisational focus on safeguarding adults and will represent the CCG at Durham Safeguarding Adults Board. The Executive Lead will work closely with, and performance manage, the Designated Nurse Safeguarding Adults and the Named GP.

DDES CCG Director of Nursing, as executive lead for safeguarding adults, will ensure DDES CCG has effective professional appointments, systems, processes and structures in place, ensuring that there is a programme of training and mentoring to support the Designated Nurse Safeguarding Adults and the Named GP for safeguarding adults. The Director of Nursing is the Sponsoring Director for this policy and is responsible for ensuring that:

- This policy is drafted, approved and disseminated in accordance with the Policy for the Development and Approval of Policies (Corporate Policy CO.001, version 5).
- The necessary training required to implement this document is identified and resourced.
- Mechanisms are in place for the regular evaluation of the implementation and effectiveness of this document.
- There is a link to the work of the Safe Durham Partnership board for domestic abuse and domestic homicide, ensuring that lessons are shared across into adult services.

- The Accountable Officer and governing body members are made aware of any concerns relating to a commissioned service which may be presenting a safeguarding risk to a vulnerable person or persons.

6.4 The CCG has in place assurance processes to ensure compliance with adult safeguarding legislation, guidance, policy, procedures, quality standards, and contract monitoring of providers.

6.5 Designated Professionals

The Designated Nurse Safeguarding Adults and the Named GP for safeguarding adults will take a strategic and professional lead on all aspects of the NHS contribution to safeguarding adults across the CCG's area, which includes all commissioned providers. They will:

- Work with the Director of Nursing to ensure robust safeguarding adult assurance arrangements are in place within the CCGs and provider services.
- Provide advice and expertise to the CCG's governing bodies and to the Local Safeguarding Adults Board and to professionals across both the NHS and partner agencies.
- Provide professional leadership, advice and support to lead adult safeguarding professionals across provider trusts/services and independent contractors.
- Represent the CCG on relevant committees, networks and multiagency groups charged with the management of safeguarding vulnerable adults.
- Lead on investigation and provision of appropriate information to inform and support reviews including Safeguarding Adult Reviews and independent Management Reviews in accordance with local NHSE and SAB guidance.
- Lead and support the development of adult safeguarding policy, and procedures in the CCG in accordance with national, regional, local requirements.
- Provide advice and guidance in relation to safeguarding adults training including standards.
- Ensure quality standards for safeguarding adults are developed and included in all provider contracts and compliance is evidenced.
- The Designated Nurse Safeguarding Adults is responsible for ensuring that the Safeguarding Adult Review process links in appropriately with the Serious Incident reporting process and governance arrangements.

- The Designated Nurse Safeguarding Adults will work closely with the Designated Professionals for Safeguarding Children to ensure that where appropriate there is effective information flow across both adults and children's safeguarding teams.

6.6 Managers and Executive Leads

Managers and Executive leads have responsibility for:

- Ensuring they are aware of and carry their responsibilities in relation to safeguarding adults in accordance with local SAB procedures.
- Ensure that the adult safeguarding policy is implemented in their area of practice.
- Ensuring staff are aware of the contact details of the CCG Adult Safeguarding Team and the local authority contact number for safeguarding concerns.
- Identifying the need for any changes to the procedures and guidance as a result of becoming aware of changes in practice and advising the Designated Nurse Safeguarding Adults accordingly.
- Ensuring that all staff undertake mandatory safeguarding adults training commensurate to their role.

6.6 DDES CCG Staff

All staff, including temporary and agency staff are responsible for actively co-operating with managers in the application of this policy to enable the CCG to discharge its legal obligations and in particular:

- Comply with the Safeguarding Adults Policy and the SAB Procedures. **Failure to comply may result in disciplinary action being taken.**
- Ensure they familiarise themselves with their role and responsibility within the safeguarding adult procedures and related guidance and being aware of who to contact if they have concerns about a vulnerable.
- Identify the need for any change to the procedures and guidance as a result of becoming aware of changes in practice and advising their line manager accordingly.
- Identify training needs in respect of these procedures and guidance and informing their line manager
- Complete mandatory safeguarding adult training in accordance with the CCG Safeguarding Adult Training Plan.

7. Implementation

- 7.1 This policy will be available to all Staff within the CCG via the shared intranet and the internet sites.
- 7.2 All Executive leads and Managers are responsible for ensuring that relevant staff within their own directorates and departments have read and understood this document and are competent to carry out their duties.

8. Training Implications

- 8.1 All staff in the CCG will be trained and competent in line with the Adult Safeguarding, Roles and competencies for health care staff intercollegiate document (2016) and to be alert to potential indicators of abuse, exploitation and neglect in adults and act on their concerns and fulfil their responsibilities in line with the local SAB procedures.
- 8.2 A staff training strategy and programme should be in place that includes the levels of safeguarding adults training appropriate to staff's roles and responsibilities
- 8.2 All CCG staff will adhere to the safeguarding adult training programme and complete the level of training commensurate with their role and responsibilities in line with the requirements of the Adult Safeguarding, Roles and competencies for health care staff intercollegiate document (2016)
- 8.3 The CCGs will keep a training database detailing the uptake of all staff training so that Directors can be alerted to unmet training needs.
- 8.4 The Designated Nurse Safeguarding Adults will ensure CCG staff are aware of any new guidance or legislation and any recommendations from Local and National Serious Case Reviews, Safeguarding Adult Reviews and Internal Management Reviews.

8.5 Supervision

- 8.5.1 Designated Professionals should receive one to one supervision as a minimum on a quarterly basis and have access to ad hoc supervision as required.
- 8.5.2 Support and supervision regarding safeguarding adults is available from the Designated professionals to all employees of the CCG. The level of the employees involvement with adults will determine the frequency of the supervision and this will be agreed in discussion with the Designated professionals.

9. Documentation

9.1 Related Policy documents:

- Confidentiality/Disclosure Policy
- Data Protection Policy
- Equality/ Diversity policy, strategy and action plan
- Freedom of Information Act Policy
- Incident Reporting Policy
- Information Classification Policy
- Information Governance Policy
- Information Governance Strategy
- Information Lifecycle (Records Management Strategy)
- 7 steps to patient safety in primary care, NPSA (2009)
- Safeguarding Adults - National framework of standards for good practice, ADSS (2005)
- Safeguarding Vulnerable People in the Reformed NHS: Accountability and Assurance Framework (2015)
- Mental Capacity Act 2005 & Deprivation of Liberty Safeguards Policy
- Managing Allegations Against Staff Policy
- Domestic Violence and the Work Place Policy

9.2 Relevant Legislation

Data Protection Act (1998)

<http://www.legislation.gov.uk/ukpga/1998/29/contents>

Care Standards Act (2000)

<http://www.legislation.gov.uk/ukpga/2000/14/contents>

Mental Capacity Act (2005)

<http://www.legislation.gov.uk/ukpga/2005/9/contents>

<http://www.legislation.gov.uk/ukpga/2007/12/contents>

Care Act (2014)

<http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>

Safeguarding Vulnerable Groups Act (2006)

<http://www.legislation.gov.uk/ukpga/2006/47/contents>

Public Interest Disclosure Act (1998)
<http://www.legislation.gov.uk/ukpga/1998/23/section/1>

Equality Act 2010
Provisions relating to Human Rights and discrimination on grounds of race, religion or belief, sexual orientation amend the Disability Discrimination Act 1995.
<https://www.gov.uk/guidance/equality-act-2010-guidance>

Freedom of Information Act 2000
Trust policies and procedures are subject to disclosure under the Freedom of Information Act.
<http://www.legislation.gov.uk/ukpga/2000/36/contents>

Human Rights Act 1998 London: HMSO.
<http://www.legislation.gov.uk/ukpga/1998/42/contents>

Rights and freedoms protected under the European Convention on Human Rights.

Section 29 Counter Terrorism and Security Act 2015
<http://www.legislation.gov.uk/ukpga/2015/6/contents/enacted>

9.3 Statutory Guidance

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/366104/43380_23902777_Care_Act_Book.pdf

9.4 Best practice guidance

Department of Health (2009) *Responding to Domestic Abuse: A Handbook for Health Professionals*. London: Department of Health.
http://www.domesticviolencelondon.nhs.uk/uploads/downloads/DH_4126619.pdf

Care Quality Commission, 2009 Essential Standards for Quality
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NHS Commissioning Board (2015) *Safeguarding vulnerable people in the NHS Accountability and Assurance Framework*
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https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/417696/Archived-information_sharing_guidance_for_practitioners_and_managers.pdf

NMC The Code 2015: Guidelines for Records and Record Keeping
<https://www.nmc.org.uk/standards/code/record-keeping/>

Royal College of General Practitioners (2012) *Responding to domestic abuse : Guidance for General Practices*
http://www.rcgp.org.uk/clinical-and-research/a-to-z-clinical-resources/~/_media/Files/CIRC/Clinical%20Priorities/Domestic%20Violence/RCGP-Responding%20to%20abuse%20in%20domestic%20violence-January-2013.ashx

Safeguarding Adults Board

Policies, procedures and practice guidance accessible at:
County Durham SAB
<http://www.safeguardingdurhamadults.info/Pages/HomePage.aspx>

9.5 References

Care Quality Commission (2009) *Guidance about compliance: Essential Standards of Quality and Safety* London: CQC

NHS Commissioning Board (2015) *Safeguarding vulnerable people in the NHS Accountability and Assurance Framework*
<https://www.england.nhs.uk/wp-content/uploads/2015/07/safeguarding-accountability-assurance-framework.pdf>

9.6 Useful websites:

Department of Health : www.dh.gov.uk/en/index.htm

Home Office : www.homeoffice.gov.uk/

Durham County Council:

<http://www.safeguardingdurhamadults.info/Pages/HomePage.aspx>

10. Monitoring, Review and Archiving

10.1 Monitoring

The governing body will agree a method for monitoring the dissemination and implementation of this policy. Monitoring information will be recorded in the policy database.

10.2 Review

10.2.1 The governing body will ensure that this policy document is reviewed in accordance with the timescale specified at the time of approval. No policy or procedure will remain operational for a period exceeding three years without a review taking place.

10.2.2 Staff who become aware of any change which may affect a policy should advise the Designated Nurse Safeguarding Adults as soon as possible, who will notify the Director of Nursing. The governing body will then consider the need to review the policy or procedure outside of the agreed timescale for revision.

10.2.3 For ease of reference for reviewers or approval bodies, changes should be noted in the 'document history' table on the front page of this document.

NB: If the review consists of a change to an appendix or procedure document, approval may be given by the sponsor director and a revised document may be issued. Review to the main body of the policy must always follow the original approval process.

11 Equality Analysis Screening

Promoting equality and addressing health inequalities are at the heart of DDES CCG values. Throughout the development of this policy, we have:

- Given due regard to the need to eliminate discrimination, harassment and victimisation, to advance equality of opportunity, and to foster good relations between people who share a relevant protected characteristic (as cited under the Equality Act 2010) and those who do not share it;
- Given regard to the need to reduce inequalities between patients in access to, and outcomes from, healthcare services and in securing that services are provided in an integrated way where this might reduce health inequalities.



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