CHESHIRE EAST SAFEGUARDING ADULTS BOARD

Multi-agency Safeguarding Adults Policy and Procedure

This multi-agency policy and procedure has been produced by Cheshire East Safeguarding Adults Board, in accordance with the statutory requirements of the Care Act 2014 and accompanying Statutory Guidance.

April 2015
Cheshire East Safeguarding Adults Board

All members and partner agencies accept responsibility for protecting vulnerable adults from abuse, endorse this policy and associated procedures and are committed to the values and principles that underpin them.

Purpose and scope of this policy

This multi-agency policy and procedure has been produced by Cheshire East Safeguarding Adults Board, in accordance with the statutory requirements of the Care Act 2014 and accompanying Statutory Guidance.

This policy is to apply to all adults who may be experiencing, or at risk of, abuse or neglect. The Care Act 2014 provides that a local authority must make enquiries or ensure others do so, if it believes an adult is at risk of abuse or neglect.

This duty applies to anyone aged over 18 who has needs for care and support (whether or not the local authority is meeting any of those needs) and as a result of those needs is unable to protect him / herself against abuse, neglect or the risk of it.

The aim of this policy is to improve practice among employees of all partner agencies in regard to the recognition, reporting and investigation of abuse of adults at risk.

Values and Principles

The work of the Board is based on the following vision:

People in Cheshire East have the right to live a life free from harm, where communities:

• have a culture that does not tolerate abuse

• work together to prevent abuse

• know what to do when abuse happens
The values of the policy are based on understanding and promoting peoples’ right to make decisions, the importance of maintaining dignity and respect and the and celebration of diversity.

Cheshire East Safeguarding Adults Board believes that:

- People have the right to live their lives free from neglect and abuse
- Safeguarding adults is a shared responsibility of all organisations and agencies commit to holding each other to account
- The individual, family and community should be at the heart of safeguarding practice
- High quality multi-agency working is essential to good safeguarding
- We respect that adults have a right to take risks and that this will sometimes restrict our ability to act
- There must be a commitment to continuous improvement and learning across the partnership

Principles

All safeguarding work is underpinned by the following principles:

- **Empowerment** – Personalisation and the presumption of person-led decisions and informed consent.
  
  **In practice this means:**
  
  Safeguarding adults is central to ensuring people receive a positive experience of the services offered by the organisation.
  
  There are clear and accessible systems for individuals, users and carers voices/views to be heard and influence change
  
  The organisation gives individuals relevant information and support around recognising and reporting abuse and the choices available to them to ensure their own safety
• The organisation ensures that the public are clear about the roles, responsibilities and ways to contact those who work in safeguarding vulnerable adults

• **People should be able to say:**

  “*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.

Although agencies must work together to respond to potential abuse and provide protection to individuals, it is important to emphasise that prevention must always be the primary objective.

**In practice this means:**

• Organisations raise public awareness about safeguarding adults and how to avoid, identify and report it

• Robust procedures are followed to ensure that all staff and volunteers are safely recruited so that unsuitable people are prevented from working with adults at risk

• There is a system of leadership and accountability that monitors safeguarding systems.

• All staff are clear about roles and responsibilities in respect of job requirements in relation to safeguarding adults at risk.

• All staff have access to an appropriate “Whistle Blowing Policy” that enables concerns to be raised without fear of retribution.

• Lead responsibility for safeguarding adults is delegated to an appropriate member of staff.

• Safeguarding Adults is integrated into all the organisation’s contractual processes with clear expectations and reporting requirements to prevent harm, neglect and abuse of adults at risk

• The organisation has performance management systems that record and indicate the effectiveness and potential for interventions to prevent harm, neglect and abuse
• The organisation has safeguarding adults procedures in place that staff understand and implement

People should be able to say:

“I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help.”

Proportionality – Proportionate and least intrusive response appropriate to the risk presented.

In practice this means:

• The adult at risk is at the centre of all responses to allegations or disclosures of harm and all activity is based on their preferred outcomes or best interests

• The organisation has an approach of positive risk taking and defensible decision making in which the adult at risk is fully involved

People should be able to say:

“I am sure that the professionals will work for my best interests, as I see them and they will only get involved as much as needed.”

• Protection – Support and representation for those in greatest need.

In practice this means:

• The organisation has effective processes to enable it to identify and respond to concerns or emerging risks relating to adults at risk
• The organisation has processes for quality assuring decisions relating to concerns, alerts and referrals
The organisation can demonstrate that consideration of mental capacity is part of the safeguarding adults process and where people lack capacity decisions are always made in their best interests.

Safeguarding Awareness training delivered to all staff and volunteers and opportunities are available to develop enhanced skills for those with specific role/responsibilities.

People should be able to say

“I get help and support to report abuse. I get help to take part in the safeguarding process to the extent to which I want and to which I am able.”

Partnership – Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.

In practice this means:

- Information is shared between organisations in a way that reflects its personal and sensitive nature. There are local information sharing agreements in place and staff understand and use them.

- The organisation works with others in a ‘one team’ approach that that places the welfare of adults at risk above organisational boundaries.

- The organisation’s representatives on SAB are senior level, strategic officers and are accountable for Safeguarding activity and for updating and sharing policy, procedures and information throughout the organisation.

People should be able to say:
“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 to get the best result for me.”

**Accountability** – Accountability and transparency in delivering safeguarding.

**In practice this means:**

- The roles, responsibilities and lines of accountability of the organisation are clear so that staff understand what is expected of them and others
- The organisation recognises and acts upon its responsibilities to the Board and partner agencies for safeguarding arrangements

**People should be able to say:**

“I understand the role of everyone involved in my life.”

**Policy into Practice**

Cheshire East Safeguarding Adults Board recognises that the demands and governance of each partner organisation are different, and that organisations may achieve common outcomes in different ways.

The Board will seek assurance that all partner organisations are fully committed to working together effectively to prevent abuse and neglect and to protect and provide support to adults who are at risk.

The Board will do this by requiring that:
• Each partner organisation will have safeguarding adults procedures that are in line with this policy and the role and responsibilities of the organisation.

• Safeguarding Adults procedures for each partner organisation must be endorsed by the Board on development and following review.

For this policy to work in practice, every partner organisation must accept individual and collective responsibility to ensure that they:

1. Promote good practice to prevent abuse and commit themselves to the underlying values and principles on which this document is based.
2. Encourage and permit staff to attend relevant safeguarding adult training and provide appropriate resources for staff to meet the requirements within this document.
3. Raise awareness of adult abuse issues within their own agency and the wider community.
4. Take timely and appropriate action to protect when suspected abuse is identified.

Types of abuse

*The Board recognises that abuse may take many forms and its impact on the person concerned is what matters. Abuse may include:*

• 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 ‘honour’ 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.

• 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.

• Radicalisation – this is the process by which a person comes to support terrorism and forms of extremism that lead to terrorism. Adults at risk can be exploited by people who seek to involve them in terrorism or activity in support of terrorism
Roles and responsibilities

All Health and Social Care Agencies who commission or provide services (whether in the public, voluntary or private sector) have a duty of care for adults at risk of abuse. All of these agencies, therefore, have a responsibility to take appropriate action to promote the quality of care provided to people, minimise risk and take speedy action within these procedures where abuse is suspected.

Cheshire East Safeguarding Adults Board

The board is a multi-agency forum for agreeing how the different services and professional groups will co-operate to safeguard adults at risk of abuse or neglect across the borough. To improve the outcome of safeguarding, the board will monitor safeguarding processes and ensure suitable mechanisms are in place to identify abuse or inadequate care, to support vulnerable people at risk and to facilitate the planning and implementation of joint preventative strategies. The Adult Safeguarding Board will help and support individual agencies in meeting their responsibilities by:

- Producing a Business Plan to provide a framework for all multi-agency activities within safeguarding.
- Producing a comprehensive range of publicity information in accordance with the Marketing Strategy.
- Producing a multi agency Training Strategy.
- Producing an Annual Report.

Adult Social Care and Independent Living Directorate, Cheshire East Council

The Council has lead responsibility for the enquiry of suspected abuse of vulnerable adults. At all times the department will work in partnership with Police and other agencies as necessary and appropriate.

The Directorate also has lead responsibility for the coordination of actions taken within multi agency procedures to cause enquiry to be made and protect people from abuse and neglect. In this capacity they arrange, service and chair Adult Safeguarding Strategy Meetings, Case Conferences and Reviews.
Health and Care Staff

Clinical Commissioning Groups
When concern is raised in relation to a commissioned health service, that identifies a service is not safe, the relevant Clinical Commissioning Group will ensure the commissioned service is reviewed in relation to breach of contract. The Clinical Commissioning Group will hold provider services to account if they are not supportive of Local Authority led safeguarding investigations.

Provider Health Organisations
Healthcare staff from across the area come into contact with adults at risk of abuse or neglect in a variety of settings. Health staff will be in a position to observe patient’s welfare and report any suspicions or suspected abuse; all organisations have a responsibility to alert concerns to the Local Authority. There is an expectation from all provider health organisation’s to participate in an equal and timely manner with the Local Authority. It is expected that local organisational policy will reflect the guidance within this policy document.

Residential Care Homes / Nursing Homes / Domiciliary Care Agencies
All providers have a duty of care for the people for whom services are provided. The duty includes having relevant policies and practices to prevent abuse occurring. If abuse does occur staff must record information and a referral must be made to the Adult Social Care and Independent Living Directorate of Cheshire East Council. The owner of an establishment must be informed as must the Care Quality Commission in accordance with internal procedures. There is an expectation that all residential care homes / nursing homes and domiciliary care agencies participate in a co-operative and timely manner with the Local Authority.

The Care Quality Commission
The Care Quality Commission is the independent regulator of health and social care in England. Their aim is to make sure better care is provided for everyone, whether that’s in hospital, in care homes, in people’s own homes, or elsewhere.
The Care Quality Commission regulates health and adult social care services, whether provided by the NHS, local authorities, private companies or voluntary organisations. They also protect the rights of people detained under the Mental Health Act.

The Commission make sure that essential quality standards are being met where care is provided and work towards the improvement of services. It promotes the rights and interests of people who use care services and has a wide range of enforcement powers to take action on their behalf if services are unacceptably poor.

For further information about The Care Quality Commission visit:

Police

Consultation with the Police at the earliest possible point is essential when alleged abuse or neglect may be a criminal offence. It is important for the Police and the Council to formulate a collaborative approach identifying what each are to do. If the police establish a criminal act has been committed, the police investigation will take priority over all other on-going investigations. This process may not always result in criminal proceedings.

Early involvement of the Police will help ensure that forensic evidence is not lost or contaminated, and may prevent the alleged abused adult being interviewed unnecessarily on subsequent occasions. Any police investigation will be planned alongside managing and dealing with the health and social care issues.

Statutory Framework:

Care Act 2014

The Care Act 2014 sets out the legal framework for how all agencies should protect adults at risk of abuse or neglect. There is a legal requirement for local authorities to set up a Safeguarding Adults Board (SAB) in their area.

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 needs for care and support (whether or not the local authority is meeting any of those needs) and;
• are experiencing, or at risk of, abuse or neglect; and
• as a result of those care and support needs are unable to protect themselves from either the risk of, or the experience of abuse or neglect.

**Mental Capacity Act 2005**

The Mental Capacity Act 2005 sets out a legal framework for how all organisations are required to respond to people who lack the capacity to make some decisions.

The Act also protects the liberty of people who lack capacity and are in hospital, residential care and some types of supported housing.
Safeguarding Board General Procedures

There are some procedures that apply in the same way to all organisations. These have been developed and agreed by the Board and organisations will need to ensure that their own organisational procedures are not in conflict with any of the Board’s General Procedures. These are attached as appendices:

- Safeguarding Adults Review
- Person in Position of Trust
- Large Scale Enquiry
- Self Neglect

The safeguarding procedures of all partner organisations will reflect the requirements of the organisation but should include at least:

Roles and responsibilities

Raising concerns

Responding to concerns

Decision making process

How to conduct/participate in a safeguarding enquiry

Who is involved in safeguarding enquiries

Establishing the outcomes wanted by the adult at risk

Involving the adult at risk and their family

Advocacy

Responding to historical abuse allegations

Allegations against members of staff

Recording
Glossary and abbreviations

**A&E (accident & emergency)** a common name in the UK and Ireland for the emergency department of a hospital.

**Abuse** includes physical, sexual, emotional, psychological, financial, material, neglect, acts of omission, discriminatory abuse, modern slavery and institutional abuse.

**ACPO (Association of Chief Police Officers)** an organisation that leads the development of police policy in England, Wales and Northern Ireland.

**ADASS (Association of Directors of Adult Social Services)** the national leadership association for directors of local authority adult social care services.

**Adult at risk** a person aged 18 years or over anyone aged over 18 who has needs for care and support (whether or not the local authority is meeting any of those needs) and as a result of those needs is unable to protect him / herself against abuse, neglect or the risk of it. The term replaces ‘vulnerable adult’.

**Advocacy** taking action to help people say what they want, secure their rights, represent their interests and obtain the services they need.

**CAADA (Co-ordinated Action Against Domestic Abuse)** a national charity supporting a strong multi-agency response to domestic violence. The CAADA-DASH (Domestic Abuse, Stalking and Harassment and Honour-based violence) risk identification checklist (RIC) was developed by CAADA and the Association of Chief Police Officers (ACPO).

**Capacity** the ability to make a decision about a particular matter at the time the decision needs to be made.

**Care management** the process of assessment of need, planning and co-ordinating care for people with physical and/or mental impairments to meet their long-term care needs, improve their quality of life and maintain their independence for as long as possible.

**Care setting/services** includes health care, nursing care, social care, domiciliary care, social activities, support setting, emotional support, housing support, emergency housing, befriending and advice services and services provided in someone’s own home by an organisation or paid employee for a person by means of a personal budget (PB), direct payment or funded by the person themselves.

**Carer** refers to unpaid carers for example, relatives or friends of the adult at risk. Paid workers, including personal assistants, whose job title may be ‘carer’, are called ‘staff’.
Case conference is a meeting with the adult at risk/advocate/family and multi-agency staff held to discuss the outcome of the enquiry/assessment and to offer a protection or safety plan.

Clinical governance the framework through which the National Health Service (NHS) improves the quality of its services and ensures high standards of care.

Concern a report that an adult at risk is or may be a victim of abuse or neglect. A concern may be a result of a disclosure, an incident, or other signs or indicators.

Consent the voluntary and continuing permission of the adult at risk to the intervention based on an adequate knowledge of the purpose, nature, likely effects and risks of that intervention, including the likelihood of its success and any alternatives to it.

CPA (Care Programme Approach) introduced in England by the DH (Department of Health) in 1990 the CPA requires health authorities, in collaboration with social services departments, to put in place specified arrangements for the care and treatment of people with mental ill health in the community.

CPS (Crown Prosecution Service) the government department responsible for prosecuting criminal cases investigated by the police in England and Wales.

CQC (Care Quality Commission) responsible for the registration and regulation of health and social care in England.

CSA (Care Standards Act) is an Act of the Parliament of the United Kingdom which provides for the administration of a variety of care institutions, including children’s homes, independent hospitals, nursing homes and residential care homes.

DSAM (Designated Safeguarding Adults Manager) a member of staff in each of the Board member organisations who is responsible for the management and oversight of individual complex cases and coordination where allegations are made or concerns raised about a person, whether an employee, volunteer or student, paid or unpaid.

DH (Department of Health) the government strategic leadership for public health, the NHS and social care in England.

DHR (domestic homicide review) a review of the circumstances in which the death of a person aged 16 or over has, or appears to have, resulted from violence, abuse or neglect by (a) a person to whom she or he was related or with whom she or he was or had been in an intimate personal relationship, or (b) a member of the same household as herself or himself. A DHR is held with a view to identifying the lessons to be learned from the death.
DoLS (Deprivation of Liberty Safeguards) measures to protect people who lack the mental capacity to make specific decisions at specific times. The Safeguards came into effect in April 2009 using the principles of the Mental Capacity Act (MCA) 2005, and apply to people in care homes or hospitals where they may be deprived of their liberty.

DPA (Data Protection Act 1998) an Act to make provision for the regulation of the processing of information relating to individuals, including the obtaining, holding, use or disclosure of such information.

DVA (domestic violence and abuse) the definition of DVA is any violent or abusive behaviour, whether physical, sexual, psychological, emotional, financial or verbal, which is used by one person to control and dominate another with whom they have had an intimate or family-type relationship.

DVCVA (Domestic Violence, Crime and Victims Act 2004) is an Act of the Parliament of the United Kingdom. It is concerned with criminal justice and concentrates upon legal protection and assistance to victims of crime, particularly domestic violence. It also expands the provision for trials without a jury, brings in new rules for trials for causing the death of a child or vulnerable adult, and permits bailiffs to use force to enter homes.

DVCV(A)A (Domestic Violence, Crime and Victims (Amendment) Act 2012) Act to amend section 5 of the Domestic Violence, Crime and Victims Act 2004 to include serious harm to a child or vulnerable adult: to make consequential amendments to the act; and for connected purposes.

DWP (Department for Work and Pensions) government department responsible for welfare and employment issues.

Emergency duty officer the social worker on duty in the emergency duty team (EDT) or out of hours service.

Emergency duty team a social services team that responds to out-of-hours referrals where intervention from the council is required to protect a vulnerable child or adult at risk, and where it would not be safe, appropriate or lawful to delay that intervention to the next working day.

Enquiry is a process under Sec 42 of the Care Act 2014 to gather evidence to determine whether abuse has taken place and/or whether there is ongoing risk of harm to the adult at risk. An enquiry may result from following up a ‘concern’. This term replaces ‘investigation’

Enquiry officer the member of staff of any organisation who leads an enquiry into an allegation of abuse.
FGM (female genital mutilation) is defined by the World Health Organisation (WHO) as ‘all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons.’

FGMA (Female Genital Mutilation Act 2003) An Act to restate and amend the law relating to female genital mutilation.

GP (general practitioner) A general practitioner is a doctor who is responsible for diagnosing and treating a variety of injuries and diseases that fall under the general practice category. General practitioners (GPs) are usually commissioned clinical commissioning groups to deliver services.

HMIPs (Her Majesty's Inspectorate of Prisons) An independent inspectorate which reports on conditions for and treatment of those in prison, young offender institutions and immigration detention facilities.

HR (human resources) The division of an organisation that is focused on activities relating to employees. These activities normally include recruiting and hiring of new employees, orientation and training of current employees, employee benefits, and retention. Formerly called personnel.

HRA (Human Rights Act 2000) legislation introduced into domestic law for the whole of the UK in October 2000, in order to comply with the obligations set out in European Convention of Human Rights.

HSCA (Health and Social Care Act 2012) provides legislative changes to the health and care system including giving GPs and other clinicians the primary responsibility for commissioning health care.

HSE (Health and Safety Executive) a national independent regulator that aims to reduce work-related death and serious injury across workplaces in the UK.

Ill treatment Section 44 of the Mental Capacity Act (MCA) 2005 introduced a new offence of ill treatment of a person who lacks capacity by someone who is caring for them or acting as a deputy or attorney for them. That person can be guilty of ill treatment if they have deliberately ill treated a person who lacks capacity, or been reckless as to whether they were ill treating the person or not. It does not matter whether the behaviour was likely to cause, or actually caused, harm or damage to the victim’s health.

IDVA (independent domestic violence adviser) a trained support worker who provides assistance and advice to victims of domestic violence.

IMCA (independent mental capacity advocate) established by the Mental Capacity Act (MCA) 2005 IMCAs are mainly instructed to represent people where there is no one independent of services, such as family or friend, who is able to represent them. IMCAs are a legal safeguard for people who lack the capacity to
make specific important decisions about where they live, serious medical treatment options, care reviews or adult safeguarding concerns.

**IPCC (The Independent Police Complaints Commission)** oversees the police complaints system in England and Wales. It is independent, making its decisions entirely independently of the police, government and complainants.

**Intermediary** someone appointed by the courts to help a vulnerable witness give their evidence either in a police interview or in court.

**ISA (Independent Safeguarding Authority)** a public body set up to help prevent unsuitable people from working with children and vulnerable adults.

**MAPPA (multi-agency public protection arrangements)** statutory arrangements for managing sexual and violent offenders.

**MARAC (multi-agency risk assessment conference)** the multi-agency forum of organisations that manage high-risk cases of domestic abuse, stalking and ‘honour’-based violence.

**Mental capacity** refers to whether someone has the mental capacity to make a decision or not.

**MCA (Mental Capacity Act 2005)** The Mental Capacity Act 2005 provides a statutory framework to empower and protect people aged 16 and over who lack, or may lack, capacity to make certain decisions for themselves because of illness, a learning disability, or mental health problems. The act was fully implemented in October 2007 and applies in England and Wales.

**MHA (Mental Health Act 2007)** amends the Mental Health Act 1983 (the 1983 Act), the Mental Capacity Act 2005 (MCA) and the Domestic Violence, Crime and Victims Act 2004. This includes changing the way the 1983 Act defines mental disorder, so that a single definition applies throughout the Act, and abolishes references to categories of disorder.

**Mental health team** a team of professionals and support staff who provide specialist mental health services to people within their community.

**National Health Service (NHS)** the publicly funded health care system in the UK.

**OASys (Offender Assessment System)** a standardised process for the assessment of offenders, developed jointly by the Probation and the Prison Services.

**OPG (Office of the Public Guardian)** established in October 2007, the OPG supports the Public Guardian in registering enduring powers of attorney, lasting powers of attorney and in supervising Court of Protection appointed deputies.
PACE (Police and Criminal Evidence Act 1984) and the PACE codes of practice provide the core framework of police powers and safeguards around stop and search, arrest, detention, investigation, identification and interviewing detainees.

PALS (Patient Advice and Liaison Service) a body created to provide advice and support to National Health Service (NHS) patients and their relatives and carers.

Person causing harm the term used to describe the person or adult who is alleged to have caused abuse or harm.

Personal budget (PB) is money allocated for social care services, allocated based on the needs of the individual following an assessment. They could be managed by councils or another organisation (such as a Clinical Commissioning Group) on behalf of individuals. They could also be paid as a direct payment, or a mixture of both.

PIDA (Public Interest Disclosure Act 1998) An Act to protect individuals who make certain disclosures of information in the public interest; to allow such individuals to bring action in respect of victimisation; and for connected purposes.

PIPOT (person in a position of trust) someone in a position of trust who works with or cares for adults at risk in a paid or voluntary capacity. This includes ‘shared lives’ carers (previously known as adult foster carers).

Police the generic term used in this document covering the following forces: West Midlands, Warwickshire and West Mercia.

PPO (Police, Prison and Probation Ombudsman) The Prisons and Probation Ombudsman is appointed by the Home Secretary, and is an independent point of appeal for prisoners and those supervised by the Probation Service. It will take appeals from offenders and ex-offenders who are not satisfied with the handling of a complaint by the Prison Service, a prison or the National Probation Service.

PPUs (Public Protection Units) the units within the police forces across the West Midlands area that deal with Safeguarding Adults and Children in the areas of high-risk domestic violence, sexual violence, child abuse, vulnerable adult abuse and registered sex offender management.

Prioritising Need a system for deciding how much support people with social care needs can expect to help them cope and keep them fit and well. Its aim is to help social care workers make fair and consistent decisions about the level of support needed, and whether the local council should pay for this.

Protection plan a risk management plan aimed at removing or minimising risk to the person and others who may be affected if it is not possible to remove the risk altogether. It will need to be monitored, reviewed and amended/revised as circumstances arise and develop.
Public interest a decision about what is in the public interest needs to be made by balancing the rights of the individual to privacy with the rights of others or society as a whole to protection.

QIPP (quality, innovation, productivity and prevention) is a Department of Health (DH) initiative to help National Health Service (NHS) organisations to deliver sustainable services in better, more cost-efficient ways.

RCP (Royal College of Psychiatrists) is an independent professional membership organisation and registered charity, representing over 27,000 physicians in the UK and internationally.

Review the process of re-examining a protection plan and its effectiveness.

SAB (Safeguarding Adults Board) the SAB represents various organisations in a local authority who are involved in Safeguarding Adults.

Safeguarding Adults the term used to describe all work to help adults at risk stay safe from abuse and neglect. It replaces ‘adult protection’.

Safeguarding Adults contact point the place where safeguarding alerts are raised within the local area. This could be a local authority single point of access, the relevant social work or mental health team or a ‘safeguarding hub’.

Safeguarding Adults head/co-ordinator/lead these titles or similar are used to describe an individual who has safeguarding lead responsibilities across an authority. For example, supporting the work of the Safeguarding Adults Board (SAB) and/or advising on Safeguarding Adults cases in the local authority. The role varies from council to council, and carries different titles.

SAR (safeguarding adults review) is commissioned by the Safeguarding Adults Board (SAB) to review the practice of agencies involved in a safeguarding matter where an adult at risk has died or been seriously injured. The aim is for agencies and individuals to learn lessons to improve the way they work.

SOCA (Serious Organised Crime Agency) a non-departmental public body of the government with a remit to tackle serious organised crime.

Staff paid workers, including personal assistants, whose job title may be ‘carer’, are called ‘staff’. Volunteers are also classed as staff. See also carer.

Strategy discussion/meeting a multi-agency discussion or meeting between the adult at risk, their advocate/family and relevant individuals to share information and agree how to proceed with the enquiry/assessment, considering all known facts. It can be face to face or by telephone and should start to bring together the intelligence, held in different agencies, about the adult at risk, the person causing harm and approaches that each organisation can take to instigate protective actions.
SVGA (Safeguarding Vulnerable Groups Act) to make provision in connection with the protection of children and vulnerable adults. The Act provides the legislative framework for Vetting and Barring Scheme, put into place by the Independent Safeguarding Authority.

ULO (user-led organisation) an organisation that is run and controlled by people who use support services including disabled people, mental health service users, people with learning difficulties, older people, and their families and carers.

Vital interest a term used in the Data Protection Act (DPA) 1998 to permit sharing of information where it is critical to prevent serious harm or distress, or in life-threatening situations.

Volunteer a person who works unpaid in a care setting/service.

Wilful neglect an intentional or deliberate omission or failure to carry out an act of care by someone who has care of a person who lacks capacity to care for themselves. Section 44 of the Mental Capacity Act (MCA) makes it a specific criminal offence to wilfully ill treat or neglect a person who lacks capacity.

YJCEA (Youth Justice and Criminal Evidence Act) an Act to provide for the referral of offenders under 18 to youth offender panels; to make provision in connection with the giving of evidence or information for the purposes of criminal proceedings; to amend section 51 of the Criminal Justice and Public Order Act 1994; to make pre-consolidation amendments relating to youth justice; and for connected purposes. This includes special measures directions in case of vulnerable and intimidated witnesses.