**HACKNEY SAFEGUARDING ADULT TOOLKIT**

**Guidance Notes for providers**

**Key Legislation and Documents**

* **Care Act 2014** – places adult safeguarding on a statutory footing
* **Care & Support Statutory Guidance 2015**, **DH** – chapter 14 is dedicated to adult safeguarding
* **Mental Capacity Act 2005** – integral to adult safeguarding
* **London Multi-Agency Adult Safeguarding Policy and Procedures 2015, ADASS** <http://londonadass.org.uk/wp-content/uploads/2015/02/LONDON-MULTI-AGENCY-ADULT-SAFEGUARDING-POLICY-AND-PROCEDURES.pdf>
* **Making Safeguarding Personal** • a sector led initiative in response to findings from peer challenges, consultations and engagement, which identified the need to develop an outcomes focus to safeguarding work • Making Safeguarding Personal is about engaging with people about the outcomes they want at the beginning and middle of working with them and the ascertaining the extent to which those outcomes were realised at the end •To do this, a mix of responses is required to enable people to achieve resolution or recovery and access to justice • Making Safeguarding Personal is an approach, a different way of practising safeguarding

**Six Safeguarding Principles (ADASS)** Providers might want to use the principles and say in their policy and procedures how their organisation translates them into practice by using their own I Statements.

Empowerment -“I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens next”

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

Proportionality - “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 - “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 - “ 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 - “I understand the role of everyone involved in my life and so do they”

**Useful websites**

Local Government Association [www.local.gov.uk](http://www.local.gov.uk)

Social Care Institute for Excellence [www.scie.org.uk](http://www.scie.org.uk)

Skills for Care [www.skillsforcare.org.uk](http://www.skillsforcare.org.uk)

**Standard 1 - A safeguarding policy and procedure is available to all staff**

It is important to establish that ‘Safeguarding is Everyone’s Business’ not just support staff and managers. The legislation and documents above provide detail on criteria. Reference needs to be made to these documents and the key messages from them.

It is essential to know:

* who is the safeguarding lead
* who has every day managerial responsibility
* the local authority referral point

The policy and procedures are for adult safeguarding, however there may be some young people in transition who are still receiving support from children’s services. Regardless of whether or not there is support from children’s social care if the young person has reached the age of 18 any safeguarding matter follows the adult safeguarding process.

In some instances, there may be a need to raise concern with both adult and child safeguarding services at the local authority, for example, if the organisation provides a service to adults, but is made aware of any safeguarding concerns about a child or young person they MUST report the matter under ‘child protection.’ Staff need to be mindful of all safeguarding and implement a Think Family approach.

Quality, accurate records must be maintained. All records, electronic or paper files may be used in any legal circumstances. Staff may need examples and training on record keeping.

**Standard 2 - Safeguarding from abuse (and neglect)**

Providers may find it helpful to use the list in the London document on types and indicators of abuse and neglect (page 25) and ensure that staff think about different types of abuse. This list is more extensive than that in the statutory guidance, but may help providers to think about common types of abuse in their service.

Safeguarding overlaps with other processes in particular HR policy and procedures where there may some disciplinary matters. There is no equivalent in adult social care for the Local Authority Designation Officer (LADO) who holds responsibilities for managing concerns about staff within the local authority, but providers must recognise that abuse and neglect can happen in any situation and be carried out by anyone.

Whistleblowing where people using the service and staff are made aware of who to contact if they do not feel confident to raise issues direct with the organisation, or they have and nothing has changed or no action taken.

Providers working with people who have behaviour that challenges may also want to remind staff of the need to implement de-escalation processes and strategies, and that restraint can in some circumstances be a form of abuse.

Deprivation of Liberty Safeguards may not directly be a responsibility of providers, but they may be providing a service to people who are subject to a DoLS. Providers should be aware and their staff know what restrictions are placed on people, and the legal agreement about minimum intervention, and consider any issues in risk management plans.

**Standard 3: Person-centred safeguarding**- Safeguarding that is tailored to the person and meets their needs and preferences, championed by the Making Safeguarding Personal approach.

All the background on Making Safeguarding Personal can be found on the Local Government Association website. Local authorities have been changing their approach to people so that they are empowered and lead on decision making.

MSP puts the adult and their wishes and experiences at the centre. The MSP approach seeks to enable people to resolve their circumstances, recover from abuse or neglect and realise the outcomes that matter to them in their life.

**Standard 4: Dignity and respect** - People are treated with dignity and respect at all times and they are central to safeguarding plans and decisions.

Providers, need to ensure that staff and managers know how to manage conversations, respect the adult’s views even if they are making unwise choices, and balance the rights of the individual with their safety and the safety of others. Providers may include dignity and respect in the values of their organisation.

**Standard 5: Consent** - People (or anybody legally acting on their behalf) must give consent before any decision or action is taken (except in emergency or specific situations).

Providers might find the SCIE website helpful as it breaks down the Mental Capacity Act 2005 into bite size manageable chunks. Also consider Chapter 3 in the London Guidance on Mental Capacity and Consent and Advocacy.

MIND holds the contract for Care Act advocacy and it might be helpful to have their contact details in local procedures.

**Standard 6: Safety** - People must not be given unsafe care or treatment or be put at risk of harm that could be avoided. Services must assess the risks to individual’s health and safety during any care or treatment and make sure their staff have the qualifications, competence, skills and experience to keep people safe. In particular recruitment, supervision and training on adult safeguarding might be stipulated. HR policy and procedures might also be linked to the adult safeguarding policy and procedures.

Safe organisations and workforce development are integral to evidencing that providers take seriously their responsibilities under safeguarding. Skills for Care is a very good website for checking out organisational culture and safety. The legal requirements for environments can be a linked policy and procedure.

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