TITLE | Safeguarding Adults Policy
---|---
SERVICE AREA | Adult Social Care
TARGET AUDIENCE | All staff involved in the delivery of Safeguarding services in Luton
VERSION NO. | Final V1
DATE ISSUED | June 2015
REVIEW DATE | January 2017
WRITTEN BY/OWNER | Brickchand Ramruttun
APPROVED BY | Safeguarding Adults Board
REVIEW DATE | Jan 2018

**BRIEF DESCRIPTION OF POLICY:**

From 1 April 2015 the Care Act 2014 establishes a new statutory framework for safeguarding adults at risk of abuse. The Council has specific duties to:

- Establish a Safeguarding Adults Board (SAB) to co-ordinate the delivery of adult safeguarding across agencies
- Make enquiries if it is believed an adult is at risk of abuse or neglect and establish whether actions need to be taken to stop or prevent abuse or neglect
- Co-operate with partners to protect adults from experiencing or being at risk of abuse or neglect
- Arrange, where appropriate, for an independent advocate to support an adult who is subject to a safeguarding enquiry.
- Support the SAB in instigating and completing a Safeguarding Adults Review (SAR)

This policy sets out how Luton Council will fulfil its duties and work effectively with partners to ensure that adults at risk of abuse or harm in Luton are safeguarded and supported. The main purpose of this policy is to ensure that all staff work within the lawful requirements for safeguarding adults in line with the revised Statutory Care Act (2014) Guidance and associated Schedules and Regulations (March 2016): [https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance](https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance)
The policies and procedure database holds the most recent and approved version of this policy or guidance. Staff must ensure they are using the most recent guidance.

**RELATED REFERENCE DOCUMENTATION:**

Luton’s Safeguarding Adults Board’s Vision and Strategic Plan

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<td>Brickchand Ramruttun</td>
<td>January 2017</td>
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<td>Consultation With</td>
<td>ASC Managers</td>
<td>11 Jan 2017</td>
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<td>Safeguarding Adults Board</td>
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**Change Record**

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Summary of changes made to last approved version:
## Equality and Diversity

The *Equality Act 2010* seeks equal opportunities in the workplace and in wider society; and prohibits discrimination on the grounds of any of the following protected characteristics in relation to goods, services and employee protection:

- Age
- Disability
- Gender Reassignment
- Race
- Pregnancy/maternity
- Marriage/civil partnership
- Religion and Belief
- Sexual orientation
- Gender

The Equality Act aims, and in particular its general duties, applies across the Council and to any organisation delivering services on a contractual, commissioned or voluntary basis on behalf of the Council. Although our legal duties relate to equality, our approach in Luton extends to the promotion of community cohesion and social inclusion. Our commitment to social justice goes beyond anti-discrimination to include fairness of treatment, dignity and respect.

**Feedback:**

Our customers expect first class service and we aim to provide it. We therefore welcome feedback about our policies and procedures. If you have any comments about this document please e-mail: [RPRComplaints@luton.gov.uk](mailto:RPRComplaints@luton.gov.uk) for author or other as agreed.
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1. Introduction & Context

1.1 No one should have to tolerate or be exposed to abuse, neglect or exploitation. Since 2000 the No Secrets guidance (Department of Health) has provided a framework for safeguarding of vulnerable adults. From April 2015, the Care Act 2014 replaces that and establishes a new statutory framework for care and support, including Safeguarding.

1.2 Luton Borough Council has a duty to provide leadership across organisations in Luton to keep people safe from harm while promoting wellbeing. This includes ensuring that the services the Council provides or commissions, safeguard people’s rights and dignity. The Council’s specific duties set out in the Care Act 2014 are to:
   - Establish a Safeguarding Adults Board (SAB) to co-ordinate the delivery of adult safeguarding across agencies
   - Make enquiries, or cause others do so, if it is believed an adult is at risk of abuse or neglect and establish whether action needs to be taken to stop or prevent abuse or neglect
   - Co-operate with partners to protect adults from experiencing or being at risk of abuse or neglect
   - Arrange, where appropriate, for an independent advocate to support an adult who is subject to a safeguarding Enquiry
   - Support the SAB instigating and completing a Safeguarding Adults Review (SAR)

1.3 Everyone in Luton has a duty to recognise abuse and neglect and take action to protect adults at risk of abuse or neglect. Luton Council has demonstrated our commitment to personalisation and community based support by signing up to “Making it Real”, committing to the principles of “Making Safeguarding Personal” and making “Safe Supported and Health” one of the strategic objectives set out in our Corporate Plan. Our goal is that people with eligible needs for care and support have access to:
   - Information and advice that is easily accessible, understandable and can support choice
   - Active supportive communities that provide a range of support and activities
   - Flexible integrated care and support that is responsive to individual needs
   - A well trained responsive workforce
   - Personal budgets and self funders can determine the support they need and where they receive it

2 Vision & Guiding Principles

2.1 Luton’s vision for adult safeguarding is for the town of Luton to be a place where no-one should have to tolerate or be exposed to abuse, neglect or exploitation.

2.2 This means that the Safeguarding Adults Board needs to work with local communities to:
   - Prevent abuse from happening
   - Identify and report abuse
- End any abuse that is occurring
- Support people who have suffered abuse to recover and to regain trust in those around them

2.3 The Care Act has established six fundamental principles that underpin all adults safeguarding work, as follows:

(i) **Empowerment**: Working to support people to manage risk in their own lives, with professionals supporting their decision making at each stage of the safeguarding adults procedures.

(ii) **Prevention**: Working to gain reassurance of all partner organisations that prevention is a core element in the delivery, commissioning and development of services.

(iii) **Proportionality**: Working to ensure the safeguarding adults procedures are used in appropriate circumstances and as a proportional response to concerns being raised.

(iv) **Protection**: Working to ensure safeguarding adults procedures serve to end abuse and that decisions are made in line with the Mental Capacity Act.

(v) **Partnership**: Working to develop joint working practices between organisations that promote coordinated, timely and effective responses for the adult at risk and other parties, and make the best use of skills and resources.

(vi) **Accountability**: Organisations take corporate accountability for their contribution to adult safeguarding

3 Making Safeguarding Personal

3.1 Luton Safeguarding Adults Board is committed to the principles of Making Safeguarding Personal. The Board has been guided by the MSP developments led by Association of Directors of Adult Social Services (ADASS), which aims to ensure that safeguarding work is entirely person-centred and focused on the outcomes that the person wants to achieve. [https://www.adass.org.uk/media/5461/making-safeguarding-personal-temperature-check-2016.pdf](https://www.adass.org.uk/media/5461/making-safeguarding-personal-temperature-check-2016.pdf)

3.2 Making Safeguarding Personal means that as professionals, we must engage in conversations with the person at risk of abuse, to find out how they want to respond to their safeguarding situation. This response should enhance their involvement, choice and control as well as improving quality of life, wellbeing and safety.

3.3 In order to ensure that we work in such a way, professionals should:

- Work with adults and their advocates or representatives if they lack capacity, at the beginning of the safeguarding process to identify the outcomes they want to achieve;
- Review with the adult at the end of the safeguarding activity to what extent their desired outcomes have been achieved;
- Record and monitor the results in a way that can be used to inform practice; and
- Develop a range of robust and appropriate responses that focus on supporting adults to meet their desired outcomes and reduce the risk, or recurrence, of abuse.
4 Scope & Definitions of Adult Safeguarding Policy

4.1 The purpose of adult safeguarding is to, wherever possible, prevent harm and reduce the risk of abuse or neglect to adults with care and support needs. The statutory framework introduced under the Care Act applies to any person aged 18 or above who:

(i) Has needs for care and support (regardless of the level of need and whether or not the Council is meeting any of those needs);
(ii) Is experiencing, or is at risk of abuse or neglect; and
(iii) As a result of those needs, is unable to protect themselves against the abuse or neglect or the risk of it.

4.2 Where someone over 18 is still receiving children’s services, for example in an education setting until the age of 25, and a safeguarding issue is raised, the matter should be dealt with through adult safeguarding arrangements. Children’s safeguarding and other relevant partners should be involved as appropriate. The level of need is not relevant and the young adult does not need to have eligible needs for care and support under the Care Act.

4.3 Abuse and neglect can take many forms. It may be an isolated incident, a series of incidents or a long term pattern of behaviour and could affect one person or more, whether in someone’s home, in public or in an institutional setting. It may be deliberate or the result of negligence or ignorance. The Care Act 2014 broadly outlines 10 categories of abuse types as follows:

(i) **Physical abuse** – including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.

(ii) **Domestic violence** – including psychological, physical, sexual, financial, emotional abuse; and so called ‘honour’ based violence.

(iii) **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. This also includes adult sexual exploitation.

(iv) **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.

(v) **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.

(vi) **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.

(vii) **Discriminatory abuse** – including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion

(viii) **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.

(ix) **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

(x) **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.

5 Improving outcomes for individuals

5.1 Luton Council and the Safeguarding Adult Board are committed to improving the outcomes for adults who are at risk of harm or abuse and are in receipt of safeguarding services. Making Safeguarding Personal as a practical policy initiative goes a long way to ensuring that our services put people at the centre of any safeguarding operation. People are supported to make choices and retain control in how they choose to live their lives.

5.2 Achieving a good outcome for the person requires a focus on improving their safety and wellbeing and supporting them to reach a resolution that is right for them. This means engaging with the person and their families throughout the process in order to ensure that they:

- feel safer
- maintain a key relationship
- get new friends
- have help to recover
- have access to justice, or an apology, or to know that disciplinary or other action has been taken
- know that this won’t happen to anyone else
- maintain control over the situation
• are involved in making decisions
• have exercised choice
• are able to protect themselves in the future
• know where to get help.

5.3 Capacity Consent and Decision Making

• It must be assumed that people have the capacity to make decisions and be given all practical help before anyone treats them as not being able to make their own decisions, in line with the Mental Capacity Act 2005.

5.4 The Mental Capacity Act 2005 (MCA) applies to anyone over 16 who is unable to make all or some decisions for themselves. Adults (over 18) can appoint people to make decisions on their behalf in the event that they become unable to make their own decisions. This is done by way of a Lasting Power of Attorney. Alternatively, if the person does not have capacity to do this, the Court of Protection may appoint a Deputy to make decisions on their behalf. If an adult is believed to lack the capacity to engage in decisions about how their needs will be met, the Mental Capacity Act Code of Practice Guidance must be followed.


5.5 There are some decisions which can never be made on behalf of someone who lacks capacity to make the decision themselves:

(i) Decisions concerning family relationships:
   ▪ Consent to marriage / civil partnership;
   ▪ Consent to sexual relations;
   ▪ Consent to a child being placed for adoption or the making of an adoption order;
   ▪ Discharging parental responsibility in a matter not relating to the child’s property;

(ii) Treatment for mental disorder under the Mental Health Act.

5.6 Authorisation in accordance with the Mental Capacity Act or Mental Health Act requirements must be sought if arrangements for the care and treatment of someone who lacks capacity amounts to a deprivation of liberty, in line with the MCA Deprivation of Liberty Safeguarding Amendment (2009).

5.7 Advocacy

• The Council must arrange for an independent advocate to represent and support an adult who is the subject of a safeguarding enquiry or Safeguarding Adult Review, where the adult has “substantial difficulty” in being involved in the process and where there is no other suitable person to assist. A person who is engaged to provide care or treatment for the adult in question in a professional capacity cannot be an advocate.
5.8 It is important that a valid consent is obtained from a person in order to be represented and supported. If the adult lacks capacity the Council must follow the Mental Capacity Act Guidelines when determining that it is in the adult’s best interest to be represented by an advocate.

5.9 The Council has a separate duty to provide an Independent Mental Capacity Advocate (IMCA) in safeguarding enquiries if someone lacks capacity to fully participate and does not have a friend or representative. The IMCA can support and represent an adult at risk of abuse and neglect where necessary and appropriate. The Council does not have to provide two separate advocates and it is not likely to be in the adult’s best interests to do so.

5.10 The role of the advocate is:

- To provide support to the adult to assist them in understanding the safeguarding process; and
- To represent the adult, particularly through ensuring that the individual’s voice is heard and the safeguarding process takes account of their views wherever appropriate.

5.11 If an enquiry needs to start urgently, it can begin before an advocate is appointed. The advocate must be appointed as soon as possible.

5.12 The Care Act specifies four areas where the Council should make an independent advocate available:

- The individual has difficulty understanding relevant information. They can be supported to understand the information if it is presented appropriately and time is taken to explain it.
- The individual has difficulty retaining information long enough to weigh up options within decision making.
- The adult has substantial difficulty using or weighing information, for example to weigh up the advantages and disadvantages of different options and come to a decision.
- The adult has difficulty communicating their views, wishes and feelings.

5.13 If more than one individual is subject to a safeguarding enquiry or Safeguarding Adults Review, they can choose to be represented by the same advocate, provided they all agree; it is in all their best interests and there is no conflict of interest. If the individuals have had similar experiences but want different outcomes or resolution, this may give rise to a conflict of interest and the Council will consider whether it will be better to provide separate advocates.
5.14 Appropriate person

The Council is required to consider whether there is an appropriate person who can facilitate the adult’s involvement in the safeguarding process. In relation to an adult with capacity, this cannot be a relative if the person does not choose or person working in a professional capacity. If the adult does not have capacity to consent to being supported by a particular person, the Council must be satisfied that it is in the adult’s best interest.

6 Preventing neglect and abuse

6.1 It is better to take action to prevent harm and abuse before harm occurs. However, as most abuse take place in secret, it is vital that both professionals and people in the wider community are alert to the signs or abuse and neglect and understand what to do and where to go to get help and advice.

6.2 Isolation from communities and families can make a person more vulnerable to abuse and neglect. We will work to minimise the circumstances in which people may be vulnerable to abuse and supporting people to maintain and develop positive relationships.

6.3 In order to achieve we will undertake the following:

<table>
<thead>
<tr>
<th>Empowering individuals</th>
<th>Ensure that people receive clear and simple information about what abuse is, how to recognise the signs and what they can do to seek help.</th>
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<tbody>
<tr>
<td></td>
<td>Prevention is not about being over-protective or risk averse towards individuals. Section 4 of this policy sets out our approach towards supporting individuals to make informed choices and supporting them to identify and manage risks. Services should prioritise both safety and independence.</td>
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<td>People should be informed of their rights to be free from abuse and supported to exercise those rights. Options to support individuals to be free from abuse should be tailored to people’s individual needs and target the outcome or resolution they want to achieve.</td>
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<th>Workforce development</th>
<th>A common finding in serious case reviews is that if professionals or other staff had acted upon concerns or sought more information, death or serious harm might have been prevented.</th>
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<td>The Council’s policy is that all staff should have a basic awareness of safeguarding and know how to report concerns. Specialists are expected to have and develop the knowledge and skills to work with people in complex situations. This includes understanding and using powers under social care legislation, the Mental Capacity Act, Mental Health Act and other legislation to safeguard people’s rights.</td>
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| Multi-agency | Luton Safeguarding Adults Board works in partnership to provide a common |
| approach | approach to safeguarding across the borough. The LSAB Safeguarding Adults Policy and Procedure sets out the system and process all organisations should use to raise safeguarding concerns. There is an LSAB Information Sharing Protocol in place to promote effective communication across agencies. Early sharing of information is key to providing effective help where there are emerging concerns. |
| Commissioning and contract management | The Council is committed to ensuring that services provided are up to standard and that people receiving services are treated with dignity and respect. All staff and contractors should have a basic awareness of safeguarding issues, capacity and dignity and know what to do if they have concerns. While more specialist services and staff should have the knowledge, skills and support to work with people in complex situations. In commissioning services, safeguarding should be the overarching standard, underpinned by all other care standards, such as privacy, dignity, clinical governance, practice standards and service quality. |
| Community safety | The LSAB must work with health partners and the police to raise awareness within the community to encourage people to recognise harm when they see it and know how to report concerns or get help. Awareness raising will include specific issues such as domestic violence, hate crime, elder abuse, fraud and financial abuse. The Council will also promote the development of good universal services, including community safety services. |
| Strategic leadership | Under the Care Act, the Safeguarding Adults Board will have a duty to publish a strategic plan each year that is developed with the community as a whole. This will take account referral trends, findings from investigations and Safeguarding Adults Reviews, emerging issues and local circumstances to identify priorities and propose action to reduce risks across the community as a whole. The Board will also monitor the effectiveness of safeguarding activity and ensure the right systems and support is in place across the county for safeguarding to be effective. |

### 6.4 Prevent: Extremism and Terrorism


The aim of the Prevent strategy is to reduce the threat to the UK from terrorism by stopping people becoming terrorists or supporting terrorism.

The 2011 Prevent strategy has three specific strategic objectives:
• Respond to the ideological challenge of terrorism and the threat we face from those who promote it;
• Prevent people from being drawn into terrorism and ensure that they are given appropriate advice and support; and
• Work with sectors and institutions where there are risks of radicalisation that we need to address.

Anyone who has concerns about someone who may be susceptible to being radicalised should contact the local Prevent Team at Bedfordshire police, who will provide assistance and support, on 01582 473048/3040 or by email: Preventengagement@bedfordshire.pnn.police.uk

7. Enquiry into Suspected Abuse under Section 42 of Care Act 2014

7.1 Luton Council must make enquiries, or cause others to do so, if they reasonably suspect that an adult is at risk of harm or abuse and who:

• Has need for care and support (whether or not the local authority is meeting any of those needs) and;
• Is experiencing, or is 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.

7.2 The scope and nature of that enquiry and who leads it will depend on the circumstances. This could range from a discussion with the individual who is the subject of the concern, and or their representative through to a more formal, multi-agency investigation.

7.3 An enquiry will usually start with asking the adult their view and wishes which will often determine the next steps. Everyone involved in an enquiry must focus on improving the adult’s safety and wellbeing and work together to that shared aim.

7.4 The purpose of the enquiry is to decide whether or not the Council, or another person or organisation, should do something to protect the person from actual or potential abuse or neglect. The objectives are to:
• Establish the facts;
• Ascertain the individual’s views and wishes and seek consent;
• Assess the needs of the adult for protection, support and redress;
• Safeguard from the abuse and neglect, in accordance with the wishes of the adult;
• Make decisions as to what follow-up action should be taken with regard to the person or organisation responsible for the abuse or neglect;
- Enable the adult to achieve resolution and recovery; and
- If the Council decides that someone else should undertake the enquiry (for example, a partner organisation), the Council must specify the timescales for this and be informed about the outcomes of the enquiry.
- Review any initial safeguarding plan that has been instigated to ensure that the safety of the individual has been restored as quickly as possible and the this meets the expectation of the person.

7.5 **Risk Assessment**: Central to the notion of safeguarding is the concept of continuous risk assessment and management. At the earliest stage of an enquiry, a risk assessment must be completed to ascertain the likelihood and potential impact of the risk that the person faces. The result of this should form the basis on any strategy discussion to protect the individual.

7.6 **Record Keeping**: All staff must keep accurate records, clearly stating what the facts are, the views of the adult and the known opinions of professionals and others. The enquiry must culminate into succinct report outlining the findings and the actions instigated to protect the individual.

7.7 The adult should always be involved from the beginning of the enquiry unless there are exceptional circumstances that would increase the risk of abuse. If the adult has substantial difficulty in being involved and there is no one appropriate to support them, the Council must arrange for an independent advocate to represent him/her.

7.8 As a matter of principle, the Council and partner organisations must ensure that it does no further harm through its intervention. Any involvement must be proportionate and reasonable, however the first priority must always be to ensure the safety and wellbeing of the adult at risk. Other less restrictive options should be explored as soon as it is safe and appropriate to do so.

7.9 If a crime is suspected the police should be informed and they will then be under a duty to investigate. A safeguarding element may also be required to support the individual during a criminal investigation. A criminal investigation will take priority over all other enquiries.

*Information sharing*

7.10 Early sharing of information is key to providing effective help where there are emerging concerns. The wellbeing of adults at risk of abuse is likely to be more important than concerns about sharing information.
7.11 A multi-agency Information Sharing Protocol has been established across all partner organisations. No-one should assume that someone else will pass on information which they think may be critical to the safety and wellbeing of an adult at risk of abuse or neglect. If a professional has concerns about an adult’s welfare and believes he or she is suffering abuse or neglect, they should share their concerns with the Council.

Confidentiality and consent

7.12 Practitioners must always seek the consent of the person who is the subject of the safeguarding enquiry before taking action or sharing information. However there may be circumstances when consent cannot be obtained because the adult lacks the capacity to give it, but actions may be required in the best interests of the individual or others at risk of harm. In these cases Mental Capacity Act guidance should be followed.

7.13 In some cases, where a person refuses consent, information can still lawfully be shared if it is in the public interest to do so. This may include protecting someone from serious harm or preventing crime and disorder. The key factors in deciding whether or not to share confidential information are:

- necessity – sharing is likely to make an effective contribution to preventing the risk; and
- proportionality – the public interest in sharing outweighs the interest in maintaining confidentiality;

7.14 If there is any doubt about whether to share information, advice should be obtained from the Council’s Legal service.

Safeguarding plans

7.15 In considering how to respond the following factors need to be considered:
- The adult’s needs for care and support;
- The adult’s risk of abuse or neglect;
- The adult’s ability to protect themselves or the ability of their networks to increase the support they offer;
- The impact on the adult and his/her wishes;
- The possible impact on important relationships;
- The potential of action increasing risk to the adult;
- The risk of repeated or increasingly serious acts involving children or another adult at risk of abuse or neglect;
7.16 The Council **must** determine what further action is necessary. Where the Council determines that further action should be taken (eg a protection plan), then the Council is under a duty to do so.

7.17 Once enquiries are completed, the Council should decide with the adult who has been the subject of concern, what, if any, further action is necessary and acceptable. One outcome might be the development of an agreed plan of action for the adult which should be recorded on their care plan. This should set out:
- What steps are to be taken to assure their safety in future;
- The provisio...any support, treatment or therapy including advocacy;
- Any modifications needed in the way services are provided;
- How best to support the adult through any action they take to seek justice or redress;
- Any on-going risk management strategy; and
- Any action to be taken in relation to the person or organisation that has caused the concern.

8. **The service or person responsible for alleged abuse or neglect**

8.1 Providers of care and support services are required to meet fundamental standards of care as a condition of registration with the Care Quality Commission. Monitoring and inspection of services by providers, commissioners and regulators provides additional assurance that people using services are safe.

8.2 If allegations are made against a service or provider, and there is evidence that the service is failing to meet fundamental standards, the Council has a duty to report the service to the Care Quality Commission. In cases where there are serious concerns, the Council may elect to suspend admissions or referrals to that service until those concerns have been addressed. In general the Council’s policy is to work with services and providers to address concerns and raise standards.

8.3 It is important that information about individual safeguarding concerns is collated and linked with other sources of information to identify and recurring patterns that might indicate a potentially poor service that requires further investigation or intervention.

8.4 If the person alleged to be responsible for abuse is a care worker, the initial obligation to take action rests with the employer. Where appropriate, employers should report workers to the statutory and other bodies for professional regulation. If someone is removed from their role providing regulated activity following a
safeguarding incident, the provider (or the agency) has a legal duty to refer to the Disclosure and Barring Service. This duty also applies where the person leaves their role to avoid a disciplinary hearing following a safeguarding incident and the employer feels they would have dismissed the person based on the information they hold.

8.5 If the person alleged to be responsible for abuse or neglect is someone who has care and support needs in their own right, the Council must consider their need for support. If they lack capacity they may be entitled to support from an Appropriate Adult and / or an Independent Mental Capacity Advocate during the safeguarding enquiry.

9. Disclosure and Barring Service

9.1 The Disclosure and Barring Service exists to help employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable adults or children. The service is responsible for:

- Processing requests for criminal records checks;
- Deciding whether a person should be barred from working with vulnerable groups, including children; and
- Maintaining lists of people who have been barred from working with vulnerable groups.

9.2 Employers are under a duty to make a referral to the Disclosure and Barring Service if they have dismissed or removed an employee from working in regulated activity, following harm to a child or adult or where there is a risk of harm.

9.3 Regulated activity includes healthcare, personal care, social work, assistance with general household matters, assistance in the conduct of a person’s affairs (eg under a power of attorney or deputyship) or transporting or escorting a vulnerable person. The term includes day to day management of regulated activity and covers any frequency of activity including one-off occurrences.

9.4 The Council is considered to be a provider of regulated activity, and thus under a duty to make a referral to the Disclosure and Barring Service, if:

- It is responsible for management or control of the activity;
- It is carried out for the purposes of the Council; and
- It makes or authorise arrangements for another person to engage in the activity.

9.5 The Council also has a power to make a referral to the Disclosure and Barring Service if it considers that a person has harmed a child or vulnerable adult ( or
there is a risk of harm) and that the person may engage in regulated activity in future.

10. Fundamental Standards and the Duty of Candour

10.1 From April 2015 all health and social care providers will be required to meet fundamental standards of care as a condition of their registration with the Care Quality Commission. There will be criminal penalties for failing to meet some of the standards.

10.2 The fundamental standards describe the basic requirements that providers should always meet and set the standard of care that service users should always expect to receive.

10.3 As part of the fundamental standard requirements, all health and social care providers will be subject to a statutory duty of candour, which means that they must be open and transparent with service users about their care and treatment, including when it goes wrong. The duty will be triggered where any harm to a service user from their care or treatment exceeds a certain harm threshold.

11. Luton Safeguarding Adult Board (SAB)

11.1 Luton Council has a legal duty under Section 6(7) of the Care Act 2014 to establish and maintain Safeguarding Adults Board (SAB) comprising senior representatives of all public organisations. The legal duty to co-operate applies equally to all members of the board. The main objective of a SAB is to assure itself that local safeguarding arrangement and partners act to help and protect adults in its area who meet the criteria. The Board leads adult safeguarding in Luton and will be oversees a range of matters that contribute to the prevention of abuse and neglect.

11.2 Luton SAB has three core duties:

- It must publish a strategic plan setting out how it will meet its main objective and what the members will do to achieve these objectives.
- It must publish an annual report detailing what the Board has done during the year to achieve its main objective and implement its strategic plan and what each member has done to implement the strategy. The report must also detail the findings of any Safeguarding Adults Reviews.
- It must conduct any Safeguarding Adults Review in accordance with Section 44 of the Act.
11.3 Vision of Luton SAB
- The vision of the Luton Safeguarding Adults Board is for the town of Luton to be a place where: All the citizens of Luton, irrespective of age, race, gender, culture, religion, disability or sexual orientation live with their rights protected, in safety, free from abuse and the fear of abuse.

11.4 Luton SAB relationship and network
- Luton SAB will ensure that effective working relationships of the Board have been sustained and developed, ensuring appropriate representation, membership and links to wider networks/Boards are embedded.
- Strategic links and key shared workstreams have been identified and included as relevant into the LSAB Business plan. For example, shared agendas relating to:
  - Luton Safeguarding Children Board
  - Luton Community Safety Partnership
  - PREVENT: Extremism and radicalisation
  - Homelessness and adults at risk
  - Substance misuse and adults at risk
- Strategic links with Bedfordshire are maintained through the Pan Beds group and opportunities explored to develop more efficient ways of working for county-wide partners.
- Making Safeguarding Personal is embedded in all aspects of safeguarding adults work, and adopted by all partner agencies.

11.5 Luton SAB key Responsibilities
- To ensure that Multi-Agency Safeguarding Hub (MASH) type model models of operational practice have been explored and considered.
- To analyse data on safeguarding notifications to increase their understanding of prevalence of abuse and neglect in Luton over time
- To develop and agree local policies, strategies and procedures for inter-agency work to protect adults at risk of abuse or neglect
- To develop preventative strategies that aim to reduce instances of abuse and neglect in Luton
- To hold partners to account and audit and evaluate how well local services work together to protect adults at risk of abuse or neglect
- To put in place mechanisms for monitoring and reviewing the implementation and effectiveness of adult safeguarding
- To encourage and develop effective working relationships between different services and professional groups
- To ensure agreement across agencies about operational definitions and thresholds for intervention.

- To improve the quality of adult safeguarding work through multi-agency training and development.

- To raise awareness within the wider community for the need to safeguard adults at risk of abuse or neglect and explain how the community can contribute to this objective.

12 Safeguarding Adults Reviews (found [here](#))

12.1 The Safeguarding Adults Board must arrange a Safeguarding Adults Review when an adult in its area dies as a result of abuse or neglect, whether known or suspected, and there is concern that partner agencies could have worked more effectively to protect the adult.

12.2 The Board must also arrange a Safeguarding Adults Review where an adult is still alive but has experienced serious neglect or abuse, and there is concern that partner agencies could have worked more effectively to protect them. Safeguarding Adults Boards are free to arrange for a Safeguarding Adults Review in other situations where it feels there is a value in doing so, for example to prevent or reduce abuse or neglect or explore practice.

12.3 The purpose of the SAR is to determine what the relevant agencies and individuals involved in the case might have done differently that could have prevented harm or death. The main aim of the SAR is to ensure that lessons can be learnt and applied to future cases to prevent similar harm occurring in future.

12.4 The Safeguarding Adults Board should include the findings from any Safeguarding Adults Reviews in its Annual Report and report what actions it has taken / intends to take in relation to those findings. Where the Board decides not to implement an action from the SAR findings it must state the reason for that decision in the Annual Report.

13 Key Roles and responsibilities of Luton SAB members and Networks

Roles and responsibilities within the Council

<table>
<thead>
<tr>
<th>Social workers / Occupational therapists Nurses</th>
<th>Operational staff are responsible for identifying and responding to allegations of abuse as part substandard practice. Front line staff need an understanding of what kinds of behaviour might amount to abuse or neglect and need to know how to respond.</th>
</tr>
</thead>
</table>

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<table>
<thead>
<tr>
<th>Role</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Line managers</td>
<td>Managers are responsible for ensuring high standards of practice and that practitioners are properly equipped and supported. Managers are also responsible for fostering good working relationships with their counterparts in other agencies to improve local cooperation and address any difficulties that arise between front line staff. Managers should have access to legal advice if proposed interventions may require applications to the Court of Protection.</td>
</tr>
<tr>
<td>Commissioners</td>
<td>Commissioners are responsible for ensuring that commissioned services and providers have appropriate systems and processes in place to safeguard adults at risk of abuse or neglect. They also set and monitor standards for quality of service and ensure services treat people with dignity and respect. They should intervene (in partnership with the regulator) where services fall below fundamental standards or abuse is taking place.</td>
</tr>
<tr>
<td>Safeguarding Team</td>
<td>The Luton Central Safeguarding Adults Team is the single point of referral for all safeguarding concerns and Deprivation of Liberty Safeguard applications. The team has responsibility for risk assessing concerns and ensuring that appropriate responses are made to manage risk posed to adults. It will also ensure that enquiries are carried out and will have responsibility for carrying out enquiries also. It acts as a point of expertise for other professionals and members of the public.</td>
</tr>
<tr>
<td>Senior Managers</td>
<td>The Director responsible for Adult Safeguarding leads on safeguarding for the Council and in inter-agency arrangements, including the Safeguarding Adults Board.</td>
</tr>
<tr>
<td>Chief officers</td>
<td>The Director of Adult Social Services has responsibility and authority for ensuring that the Council maintains a clear organisational and operational focus on safeguarding adults at risk of abuse or neglect.</td>
</tr>
<tr>
<td>Elected Members</td>
<td>Council members need a good understanding of the range of abuse and neglect issues that can affect adults in vulnerable situations and of the importance of safeguarding and empowerment. Members need to understand proportionate interventions, the dangers of risk averse practice and the importance of upholding human rights. The Scrutiny Health &amp; Social Care Review Group has responsibility for holding the LSAB to account.</td>
</tr>
</tbody>
</table>

**Roles and responsibilities of Luton SAB other members and networks**

- Build safeguarding into commissioning strategies and service contracts.
| Clinical Commissioning Group | Review and monitor services regularly. Intervene (in partnership with the regulator) where services fall below fundamental standards or abuse is taking place. Ensure there is appropriate health service involvement in investigations where there are concerns about health care provision. Support safeguarding enquiries where concerns relate to someone whose care is funded by the health service or where there is a health related concern. |
| Social care and Health providers | Ensure there are appropriate systems and processes to safeguard adults at risk of abuse or neglect. Meet required service quality standards and ensure service users are treated with dignity and respect. Train staff in safeguarding procedures and ensure they are effectively implemented. Investigate and respond effectively to incidents, complaints and whistleblowers. Support safeguarding enquiries where it is involved in the provision of care. Take disciplinary action against staff that have abused or neglected people in their care. |
| Mental Health Partnership Trust | Ensure there are appropriate systems and processes to safeguard adults at risk of abuse or neglect. Meet required service quality standards and ensure service users are treated with dignity and respect. Train staff in safeguarding procedures and ensure they are effectively implemented. Carry out safeguarding enquiries on behalf of the LSAB in certain circumstances for adults with serious and enduring mental health problems including dementia. Investigate and respond effectively to incidents, complaints and whistleblowers. Take disciplinary action against staff that have abused or neglected people in their care. |
| Police and other law enforcement agencies | Investigate alleged or suspected criminal offences against adults at risk of abuse or neglect. Conduct joint investigations with partners. Gather best evidence to maximise the prospects for prosecuting offenders. |
Achieve, with partners, the best protection and support for the person suffering abuse or neglect.

Enable adults who have experienced abuse or neglect to access victim support or other care and support services.

Support safeguarding enquiries where a criminal offence is suspected.

**Advocacy services**

Support people and their families in their interactions and discussions with organisations to achieve the outcomes and resolution they desire.

Help adults to engage in the safeguarding process, communicate their wishes and make informed choices.

### National bodies

**Care Quality Commission**

Regulates health and social care providers in accordance with statutory requirements, ensuring compliance with minimal standards.

Monitors providers against care standards and takes enforcement action if care falls below minimum standards. Refers concerns to local Councils as appropriate.

Investigates areas of concern and intervenes on breaches of fundamental standards of care.

Publishes findings including performance ratings.

**Health and Care Professions Council**

Regulates health, psychological and social work professionals. Maintains a register of health and care professionals who meet standards for their training, professional skills, behaviour and health.

Takes action where professionals have abused or neglected people in their care.

It is a criminal offence for someone to claim to be registered with the Council if they are not; or to use a protected title that they are not entitled to use. The HCPC will prosecute people who commit these offences.

**Disclosure and Barring Service**

Considers information from providers, Councils and other sources regarding the suitability of people to work with vulnerable adults or children. Maintains the list of individuals who have been barred from working with vulnerable adults or children and discloses this information via the criminal records checking process.

**Office of the public**

Oversees the creation and operation of Lasting Powers of Attorney and
| guardian | Deputyships. Investigates allegations of inappropriate use of LPA or Deputyship powers. |