12. Safeguarding Enquiries: Responding to a Concern

12.1 Statutory Safeguarding Enquiries – Section 42

Councils are required by law to carry out safeguarding enquiries for those individuals who meet the criteria outlined in section 42 of the Care Act 2014:

- Be experiencing, or at risk of, abuse or neglect; AND
- Have needs for care AND support (whether or not the local authority is meeting any of those needs); 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.

12.2 Non statutory safeguarding enquiries

Councils are NOT required by law to carry out enquiries for those individuals who do not fit the criteria; however they may do so at their own discretion.

These enquiries would relate to an adult who is believed to be experiencing, or is at risk of, abuse or neglect but does not have care AND support needs. These enquiries might be about a carer for example, or someone with support needs but no obvious care needs.

12.3 Introduction

The responsibility for responding to a safeguarding concern lies with the receiving team.

The Team Manager of the relevant Team is the Safeguarding Lead within these Procedures and has overall responsibility for the management of the Adult and their care and support needs. The term Safeguarding Adults Manager can also apply to the Advanced Practitioner who takes operational responsibility in the team.

The professional who initially responds to a safeguarding concern is referred to in this chapter as the ‘worker’.

The Safeguarding Adults Manager is responsible for decision making and ensuring that safeguarding enquiries are proportionate, and deciding on the most appropriate individual and from which organisation, to undertake the enquiry. The person chosen - is the designated “Enquiry Practitioner” within these procedures.
Detailed guidance of the purpose and responsibilities at each stage of the Safeguarding Enquiry process (from reported Concern to Closure Summary) is outlined later in this section.

12.4 Outcomes

Adults will be supported to define the outcomes they desire from their personal circumstances of abuse and neglect. The process is personalised and flexible and can conclude at any stage as appropriate.

In general terms the kinds of outcomes Adults seek from Safeguarding are:
- To have access to justice or an apology or to know that disciplinary or other action has been taken.
- To be involved in making decisions.
- To feel supported throughout the process.
- To have clarity around what happened and to know how the outcome was reached.
- To be made aware of possible risks and to know how to maintain a key relationship.

Enquiries will focus on the outcome defined by the Adult and will be proportionate and timely and will take account of
- The context and implications for other Adults
- Carers needs and their circumstances
- The mental capacity of the Adult and of the person believed to have caused the abuse or neglect

However, it is recognised that in some circumstances the outcome defined by the Adult may not be achieved and also desired outcomes may change over time.

12.5 What is an Enquiry?

The safeguarding enquiry begins as soon as the worker believes that an Adult is experiencing, or at risk of, abuse or neglect. The exact nature of the Enquiry in response to a Safeguarding Concern and who is best to lead will be in part determined by the circumstances and views of the Adult.

The objectives of an enquiry into abuse or neglect are to:
- establish facts;
- ascertain the Adult’s views and wishes;
- assess the needs of the Adult for protection, support and redress and how they might be met;
- protect 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; and
- enable the Adult to achieve resolution and recovery.
Enquiries do not follow a prescribed process but are made up of a number of different elements as appropriate and this includes one or more of the following (not exhaustive):

Telephone calls
- To the Adult, family members / other representative.
- To the person who reported the Concern.
- To the managers of services and other professionals.

Visits/Meetings
- With the Adult, family members / other representative.
- With representatives of relevant services and agencies.

Checking Written Records
- Care Plans, incident reports, medication records, staff rotas, risk assessments, bank statements, as appropriate to the area of Concern.

Specialist Advice Sought
- Care Quality Commission, Ofsted, General Medical Council, the Police, Health Professionals, Coroner, Trading Standards, Community Safety, NHS England, NHS Clinical Commissioning Group and other commissioning bodies as appropriate to the area of Concern.

Formal Enquiry Routes include;
- Criminal Investigation, led by the Police.
- Serious Untoward Incident Review, led by NHS.
- Safeguarding Enquiry, led by the Local Authority.
- Disciplinary Procedure, led by the Employer.

An enquiry could simply be a telephone call to the Adult about whom the Concern was reported. The Enquiry could end at this point.

In contrast where a crime has potentially been committed, enquiries by the Police may take place with support provided by the Local Authority. More extensive enquiries may require a Multi-Agency Strategy Meeting.

12.6 Screening of Safeguarding Concern

The decision to proceed with a safeguarding concern to a section 42 Enquiry/ non-statutory enquiry is made in consultation with the Safeguarding Adults Manager (SAM), and all relevant organisations. It is also made in line with the Rochdale Borough Safeguarding Adults Board (RBSAB) “Professional Decision Making Tool in Response to a Concern” document which can be found on www.rbsab.org and should be used to ensure a proportionate response to explore the concern.
If the concerns raised are not about abuse or neglect, then appropriate signposting should take place to address the concerns raised. If the concerns relate to poor practice by a practitioner, the relevant Commissioning team need to be informed. If safeguarding concerns are indicated, the formal enquiry begins with an initial strategy discussion.

12.7 **Initial Strategy discussion**

On receipt of a safeguarding concern, if the worker believes an Adult is experiencing or is at risk of abuse or neglect, then the safeguarding enquiry begins.

An Initial Strategy Discussion must be conducted between the Safeguarding Adults Manager and the Worker.

12.7.1 **Purpose**

To decide what action needs to be taken through consideration of the following:

- Ensure that the Adult is safe, that medical attention has been sought if required and that emergency services are involved if necessary.

- To check if there have been previous Safeguarding Concerns for the individual and if so, to compare the context, location, time period and other details to the current Concern to inform the risk assessment. Previous Concerns must be considered and taken into account in relation to the on-going Safeguarding activity.

- To discuss the need for immediate Police involvement.

- To identify which organisation funds the care and inform and involve them in this strategy phase.

- To consider the involvement of other Partners at this stage and the need to consult relevant professional advisors.

- To discuss the need for immediate Safeguarding actions to protect the Adult from further abuse.

- To discuss if further clarification is required from the person who reported the Concern, to understand what is being said. This is particularly important for a self-referral and when family/friends report the Concern.

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**Timescale:** This decision must be made on the same working day or within 24 hours (preferably the same working day).

**Recording:** The decision and rationale must be recorded.
• To consider the Mental Capacity of the Adult and the person who may be causing harm and implications this may have.

• To consider the specific needs and circumstances of the Adult and the person who may be causing harm and implications this may have.

• To decide who is best placed to carry out the enquiry and allocate an Enquiry Practitioner as appropriate.

• To consider if an appropriate individual or independent advocate is required.

• To risk assess the broader context and consider potential risks to others.

• To identify potential risks to the health and safety of the Adult and staff members pertaining to the Initial Enquiry Visit and agree actions as appropriate.

• To discuss any known/or potential risks to children and, where necessary, make a Child Protection referral.

• To ascertain if the abuse or neglect has occurred within a provider service. If this is the case:
  o To discuss the need for immediate action under Disciplinary Procedures or other management action, and to engage the employer/employer’s HR representative and/or the Safeguarding Lead in this discussion as appropriate.
  o To check if there are current concerns about the service being provided to acceptable quality standards.
  o If necessary inform other agencies, such as the Commissioning teams (Adult Care or CCG), CQC, the Office of the Public Guardian and/or the Department of Work and Pensions of the safeguarding concern and any immediate action being taken.
  o The person/s alleged to be causing the harm is:
    • A member of staff
    • a volunteer
    • someone who only has contact with the adult at risk because they both use the service

**In the above situations, action should be taken against any employee or organisation under the Safeguarding Adults procedures, even if the adult at risk does not want any action taken. They should be informed of the decision, the reason for the decision and reassured that no actions will be taken which affect them personally without their involvement.**
12.7.2 Supporting an adult who makes repeated allegations
1. An adult who makes repeated allegations that have been investigated and are unfounded should be treated without prejudice.
2. Each allegation must be responded to under these procedures.
3. A risk assessment must be undertaken and measures taken to protect staff and others and a case conference convened, where appropriate.
4. Each incident must be recorded.

Organisations should have procedures for responding to such allegations that respect the rights of the individual, while protecting staff from the risk of unfounded allegations.

12.7.3 Responding to family members, friends and neighbours who make repeated allegations
Allegations of abuse made by family members, friends and neighbours should be investigated without prejudice. However, where repeated allegations are made and there is no foundation to the allegations and further enquiry is not in the best interests of the adult, then local procedures apply for dealing with multiple, unfounded complaints.

12.7.4 Concerns Relating to a Person Living or Receiving Services in another Local Authority Area
The authority area where the alleged abuse occurs or suspicion arose must notify the other authority concerned but will usually have overall responsibility for coordinating safeguarding arrangements. This should be the subject to agreement between the two local authorities involved.

**Timescale:** The initial enquiry discussion must be conducted as soon as practicable following the receipt of the safeguarding concern, but it must not exceed 48 hours.

**Recording:** The content of any initial Strategy discussion must be recorded. If it is appropriate for the Safeguarding Enquiry to end at this point the Safeguarding Coordinator must ensure the Closure Summary Form is completed.
12.8 **Who should carry out the enquiry?**

The scope of the enquiry, who leads it and its nature, and how long it takes, will depend on the particular circumstances. It will usually start with asking the Adult their view and wishes which will often determine what next steps to take. Everyone involved in an enquiry must focus on improving the Adult’s well-being and work together to that shared aim. At this stage, the Safeguarding Adult Manager leading the enquiry has a duty to consider whether the adult requires support to be involved in the enquiry.

The Safeguarding Adult Manager (SAM) should make a decision as to who should undertake the enquiry. The specific circumstances will often determine who the right person to begin an enquiry is. In many cases a professional who already knows the will be the best person. They may be a social worker, a housing support worker or a health professional, EG a community nurse.

At the strategy meeting, it is therefore imperative to determine the most appropriate person to lead the Safeguarding Adult enquiry and the most appropriate person (Enquiry Practitioner) to conduct enquiries.

12.9 **Outcomes of the Initial Strategy Discussion**

Take into account relevant previous concerns which may be closed or on-going.

The Safeguarding Adults Manager has responsibility for ensuring any agreed actions are implemented following the Strategy Discussion(s). This includes actions assigned to other persons or agencies.

The Worker is responsible for ensuring the Safeguarding Adults Concern and any other relevant information is made available to the Police, Commissioning teams, Health organisations and other persons or agencies, where appropriate.

The Safeguarding Adults Manager and the Enquiry Practitioner are responsible for gathering basic information, where appropriate. This may involve contacting other agencies, though care must be taken not to alert the person alleged to have caused harm.

The Worker or allocated Enquiry Practitioner is responsible for contacting the Adult or their representative to inform them of the concerns raised and to arrange to undertake an initial enquiry visit.

Following the Initial Strategy Discussion, where appropriate the Safeguarding Adults Manager must arrange for the person who reported the Concern and other interested parties, e.g., families, to be contacted and inform them as far as is possible without compromising confidentiality and the safety of the Adult, of the progress of the Safeguarding Enquiry, and what further enquiry or action will be taken.
12.9.1 Escalation
Significant disagreement arising from the Initial Strategy Discussion about potential actions to be taken must be referred to relevant Safeguarding Leads for guidance, and be recorded.

12.9.2 Balancing choice and risk
It is not possible to eliminate risk. Empowerment in safeguarding involves risk management that is based on understanding the adult at risk and how they view the risks they face as there may be risks that person welcomes because it enhances their quality of life; risks the person is prepared to tolerate and risks they want to eliminate.

The identification of risk should usually be undertaken with the person who has been, or appears to have been, harmed, unless doing so is likely to increase the risk of harm or puts other people at risk.

An Adult's right to make choices about their own safety has to be balanced with the rights of others to be safe.

12.10 Decision not to proceed with a section 42 enquiry
It may be decided not to proceed with a formal enquiry when there is enough information to decide that:

- The situation does not involve abuse, neglect or exploitation; in which case another service may be appropriate and the person concerned may be signposted as appropriate.
- The Adult at risk is not an adult who is covered by these procedures. They can then be signposted to other services or resources.
- The Adult at risk has the mental capacity to make an informed choice about their own safety, there is no public interest or vital interest considerations and they choose to live in a situation in which there is risk or potential risk.

If a decision is made not to proceed with an enquiry:

- A record must be made stating any reasons.
- The referrer must also be informed of the decision in a timely way, the reasons for it and information given about any alternative services which have been offered, if this does not breach the Adult's confidentiality. This should preferably be in writing.
- The Safeguarding Adults Manager will designate the most appropriate person to feed back to the Adult at risk.
- Where the Adult does not have mental capacity, they must still be included in the process.
- A decision not to proceed does not preclude information sharing where appropriate.
Feedback will also be given to the person acting in the Adult’s best interests, for example, family member, IMCA (Independent Mental Capacity Advocate), carer or court appointed deputy and the person raising the concern.

12.11 **Initial Enquiry Visit**

It is good practice to undertake a visit. However there may be exceptional circumstances when contact needs to be made over the phone. The reason for conducting the enquiry over the phone should be recorded.

### 12.11.1 Purpose

An Initial Enquiry Visit must be undertaken within timescales in order to:

- Assess the Adult’s capacity to engage in the process and consider advocacy.
- Understand the desired outcome as defined by the Adult and/or their representative.
- Analyse risk(s) and evaluate the potential harm that may be caused.
- Observe the setting in which the concern has been raised to gain insight into the context, physical environment and relationships.
- The views of the Adult and/or their representative, where appropriate, must always be considered and respected and full consideration be given to any identified issues/needs.
- To evaluate relevant records and documents.

There may, however, be circumstances when the Adult’s wishes might be overruled. These include:

- If the Adult’s mental capacity is such that they are unable, or may be unable, to make an informed decision about their own safety and wellbeing.
- Other people are at risk.
- The Police have decided to pursue a Criminal Investigation.

In other high risk situations, for example, domestic abuse a multi-agency strategy discussion or meeting may be held even if the Adult at risk does not want any action taken. This would enable discussions around providing the Adult with support and signposting to relevant organisations e.g. victim support, counselling services, etc.

Only in exceptional circumstances, for example if the Adult is in hospital, should the Initial Visit be delayed. The rationale for this must be clearly recorded.

### 12.11.2 Who has Responsibility?

The Safeguarding Adults Manager must make the Initial Enquiry Discussion information available in advance to the Enquiry Practitioner who will conduct the Initial Visit.

- Consideration must be given as to whether a second appropriately trained member of staff should accompany the Enquiry Practitioner on the Initial Visit.
- Consideration must be given as to whether the person(s) conducting the visit should be known to the Adult.
- The Enquiry Practitioner must hold a relevant professional qualification and must take lead responsibility for engaging with the Adult.
The Enquiry Practitioner must provide the Safeguarding Adults Manager with feedback of findings from the Initial Visit.

**Timescale:** The Initial Enquiry Visit must be conducted as soon as practicable following the Enquiry Discussion, but must not exceed two normal working days, unless the Adult or their representative requires a reasonable extension of this timescale.

**Recording:** A record of the visit should be provided to the Adult and/or their representative as soon as possible, outlining key points, stated outcomes and agreed/declined actions.
- The Enquiry Practitioner has the responsibility for recording the desired outcomes defined by the Adult on the organisation’s information systems.

### 12.12 Additional Enquiry Discussions

Additional Enquiry Discussions must take place between the Safeguarding Adults Manager and Enquiry Practitioner, following the Initial Enquiry Visit. Other Partners/Agencies will be invited to contribute as necessary.

#### 12.12.1 Purpose
- To reaffirm the Adult's wishes and desired outcomes, following the Initial Enquiry Visit.
- To share and evaluate additional information and risks identified from the Initial Visit.
- To agree next actions.
- To agree Closure, if appropriate.

#### 12.12.2 Who has Responsibility?
- Additional Strategy Discussions can be instigated by the Safeguarding Adults Manager, Enquiry Practitioner, Police or other Partners.

#### 12.12.3 Escalation
- Where it appears that the case may be becoming very complex or is raising significant quality concerns, the Safeguarding Adults Manager must inform the relevant Head of Service or escalate to a more senior level as required.

**Timescale:** Additional Enquiry Discussions can be instigated at any stage of the Safeguarding Adults Procedures. They must be conducted as soon as practicable following the emergence of information that indicates further Enquiry Discussion is required.
12.13 Multi-Agency Strategy Meetings

A strategy meeting will not be necessary in all cases, where a discussion will suffice. However in more complex cases a meeting will be useful.

12.13.1 Purpose

To share, discuss and consider the known evidence and agree Protection actions and Formal Investigation actions as appropriate.

This may include one or more of the following considerations:

- Creation or revision of a Support Plan to address needs and risks
- Potential Criminal element
- Potential Disciplinary action
- Serious Incidents Requiring Investigation - NHS Trusts only

12.13.2 When a Strategy Meeting may be called:

- Where the health and safety of the Adult is or may be compromised and Protection and Enquiry Actions may be required.
- Where the person who is alleged to have caused harm is an employee of a service provided to the Adult and the circumstances indicate potential Disciplinary Action.
- Where the allegations indicate a potential Criminal Investigation may be required.
- Where there are Previous Safeguarding Concerns that indicate that the risk may be higher than originally thought.

12.13.3 The Strategy Meeting will cover:

- Issues associated to the mental capacity of the Adult and those involved and potential requirement for a Best Interests Meeting.
- The health, social care, communication, cultural needs or other specific needs of the Adult.
- The likelihood, severity and potential impact of risks to the health, safety and wellbeing of the Adult.
- Any potential risks to children and agreement on who will arrange a Child Protection referral, where necessary.
- Who the “interested parties” are, which means those persons or agencies with whom it is reasonable and appropriate to share information about the process and outcome.

**Recording:** Additional Enquiry Discussion(s) must be recorded by the Safeguarding Adults Manager or Enquiry Practitioner as appropriate. If it is agreed that no further action is necessary, this must be recorded. A Closure Summary must also be completed by the Enquiry Practitioner if the safeguarding enquiry has ended.
• Consideration and where necessary arrangements for appropriate notifications/referral to Partner or Statutory Agencies, e.g. Care Quality Commission, Health Professionals.
• Where issues affect residents of other Local Authorities, to arrange for proper notification to those Authorities.
• Timescales for actions and outcomes.
• Responsibility and accountability for all safeguarding protection actions.
• To set a date for further Safeguarding Meetings, where this is practicable and appropriate.

12.13.4 Who has Responsibility?
• The Safeguarding Adults Manager has responsibility for deciding whom to invite to a Strategy Meeting. The RBC Commissioning team are to be invited to all strategy meetings for incidents that occur in Care Quality Commission (CQC) regulated services.
• The Enquiry Practitioner has responsibility for organising the Strategy Meeting, including the venue and inviting all relevant persons and agencies involved in the care, support and protection of the Adult.
• The Safeguarding Adults Manager has responsibility for chairing Strategy Meetings.
• Persons and agencies have a responsibility to share any information they have that may be relevant to the Enquiry.
• All persons and agencies invited to attend the Strategy Meeting have a responsibility to attend. Where the individual cannot attend, they must inform the Safeguarding Adults Manager and agree who can attend as a suitable alternative representative from that agency.
• Where representatives of any of the key persons or agencies are absent from the Strategy Meeting, the Safeguarding Adults Manager has the responsibility for requesting in advance provision of information so that it can be taken into account at the meeting; informing them of outcomes of the meeting. They must ensure that key persons or agencies are informed of and understand agreed action(s) and timescales allocated to them.
• The Enquiry Practitioner has responsibility for informing the Adult and/or other interested parties of the outcomes of the Strategy Meeting if they are not in attendance.

12.13.5 Escalation
• In exceptionally complex and sensitive cases, more Senior Officers within the relevant areas may be required to participate.
• When there are concerns about the adequacy or implementation of the Protection Actions.
• When there are concerns about the rate of progress or quality of the Disciplinary Investigation.

12.13.6 Suggested Strategy Meeting agenda
1. Apologies, absences, introductions.
2. Confidentiality and Information Sharing Protocol
3. Safeguarding Concern details
4. Background  
5. Details of information gathered  
6. Consideration of the Adult’s Mental Capacity  
7. Views of Adult/advocate and what they wish to happen  
8. Information sharing/ open discussion  
9. Risk assessment  
10. Protection actions  
11. Next steps

### Timescale:
The Strategy Meeting must be convened as soon as practicable, following the Strategy Discussion where it was identified as necessary, but no more than 5 normal working days later. If this is unachievable the reasons must be recorded.

### Recording:
The Minutes of the Strategy Meeting must be recorded. The Safeguarding Adults Manager (Chair) has responsibility for ensuring timely recording, electronically storing and distributing the minutes to relevant persons and agencies involved in the care and support of the Adult.

### 12.14 Protection Actions

These will apply where there are concerns that the Adult may experience, or be experiencing, further abuse and will consist of risk reduction and support strategies, and will be monitored and revised as necessary.

#### 12.14.1 Purpose
- Protection Actions will involve identifying and agreeing specific safety measures to ensure immediate and ongoing protection from abuse, specific to the Adult’s needs and desired outcomes.
- Relevant persons and agencies involved in the provision of care and support must be clear about how the specific actions or safety measures are designed to safeguard the Adult from further risks of abuse.
- The aim is to remove both immediate and/or potentially ongoing risks to the Adult. Where risks cannot be removed or avoided because the risk conflicts with the views/wishes of the Adult, protective measures to reduce the risk will be maximised. Decision making rationale must be recorded clearly.
12.14.2 Protection Actions must:
- Record the measures that have already been put in place, and will remain in place, to manage risks and protect the Adult.
- Record all the actions that have been identified to safeguard the Adult from further abuse, and which person(s) and agencies are responsible for implementing the action.
- Have a deadline for the implementation of each action. However, it is recognised that certain actions may need to be given an ongoing timescale.
- Remain in operation until a decision has been reached at Safeguarding Closure Meeting that it is no longer required OR following closure of the Safeguarding Enquiry, the Protection Actions may continue to be in place as part of the support plan and will be reviewed by the Care Management Review process.
- Be shared and agreed, where appropriate, with the Adult/advocate.

12.14.3 Multi-Agency Risk Management protocol (MRM)
Consideration may be given to using the Multi-Agency Risk Management Protocol (MRM).
- MRM provides professionals with a framework to facilitate effective multi-agency working with adults who are deemed to have mental capacity and who are at risk of serious harm or death through self-neglect, risk taking behaviour or refusal of services.
- It aims to provide professionals from all Rochdale Borough Safeguarding Adults Board (RBSAB) partner agencies with a framework for the management of complex cases where, despite ongoing work, serious risks are still present.
- MRM is a multi-agency process to discuss, identify and document serious current risks for high risk cases, and formulate an action plan identifying appropriate agencies responsibility for actions. It also provides a mechanism for review and re-evaluation of the action plan.

12.15 Formal Investigation Actions
Actions to establish facts, as far as is reasonable and proportionate to the circumstances, will be taken.

It may not be necessary to pursue information further where the Protection Actions are in place and the Adult and/or their representative is satisfied with the Outcome. Formal Investigation routes may apply in circumstances of very serious Safeguarding Concerns.

The three most commonly used Formal Investigation routes are as follows;
  a) Criminal
  b) Disciplinary
  c) Serious Untoward Incidents (SUIs)
12.15.1 Criminal Investigation
These may apply where the alleged abusive act is in breach of legislation.

**Purpose**
- To discuss the wishes of the Adult in respect of a potential Criminal Investigation.
- To gather collaborative evidence and scheduling rapport sessions, video interviews, Appropriate Adults, post-interview support, medicals and special measures.
- Whilst Criminal Procedures are the responsibility of the Police, where the victim is an Adult with care and support needs additional consideration must be given to information sharing between agencies, communication with the Adult and recording.

**Who has Responsibility?**
- The Enquiry Practitioner is responsible for maintaining contact with the Adult and keeping them updated throughout.
- The Safeguarding Adults Manager is responsible for ensuring liaison with the Police and recording progress.
- On notification of a Concern, the Police must act promptly to secure evidence or advice accordingly.
- Police must consider requirement for medical examination, photographs and other forensic evidence.
- Police must commence Criminal Investigation evidence-gathering and preparation of papers for consideration by Crown Prosecution Service, as appropriate.
- Police must update the Adult as per the Victim’s Charter, either personally or in conjunction with the Enquiry Practitioner.

**Timescales:** Timescales will be determined by the Criminal Investigation Process.

**Recording:** For the purpose of recording consistently a Criminal Investigation will be said to commence at the point where formal witness statements are taken by the Police. Information gathering prior to this are Police Enquiries.

The Safeguarding Enquiry may be “closed” once the Crown Prosecution Service has agreed to progress the case depending on circumstances. Where the Adult and/or their representatives needs further support in relation to the process the Enquiry will remain “open”.

The Enquiry Practitioner will record the final outcome on the Closure Summary.
12.15.2 Disciplinary Investigation
This may apply where the person who is alleged to have caused harm is a professional, employee or volunteer within an organisation providing care and support services to Adults.

Purpose
- To establish the facts of the circumstances under which the Safeguarding Concern was made.
- To determine the severity and impact of any breach of procedure or expectations of conduct that may have occurred.
- To determine appropriate sanctions or remedial actions.
- A Disciplinary Investigation will identify a suitable named Lead Manager/Senior Officer of the employer’s organisation and outline the scope of the Disciplinary Investigation.
- Allegations of abuse and neglect by professionals/employees are dealt with through the Disciplinary Procedures of the employing organisation/agency.
- A Disciplinary Investigation cannot usually commence until it is confirmed that there will not be a Criminal Investigation or until the Criminal Investigation is completed.
- Disciplinary Rules are necessary to set the standards of conduct to which employers can reasonably expect employees to conform.
- Expectations about the way staff conduct themselves within services that support Adults are informed by general principles of social care and professional codes of practice.
- Understanding and following the rules and requirements and being aware of the consequences of contravening rules and requirements is an important measure which protects Adults from abuse and neglect.
- Disciplinary Procedures generally distinguish between ‘misconduct’ and ‘gross misconduct’.
- Abuse of an Adult may be so serious that a single incident could result in dismissal.
- Repeated incidents of less serious abuse could also result in dismissal, following adequate warnings. This generally includes a series of oral and written warnings.
- Where the Safeguarding Enquiry involves an allegation against a Professional and/or member of staff or volunteer who has access to children and young people consideration must be given as to whether it is appropriate to inform the Local Authority Designated Officer (LADO).
- If further allegations of abuse emerge during the Disciplinary Investigation, a new Safeguarding Concern must be raised.

Suspension
Suspension of the employee who has allegedly abused or neglected an Adult may be necessary to:
- Protect the Adult and other Adults with care and support needs.
- Prevent any actions or activities that may prejudice the Criminal or Disciplinary Investigation.
- Protect the employee from potential further allegations.
Suspension is a neutral act whilst an investigation takes place. It is the responsibility of the employing organisation to consider the welfare of the suspended individual, arranging support as necessary and keeping the individual informed of the progress of the investigation.

**Who has Responsibility?**

- The Enquiry Practitioner is responsible for maintaining contact with the Adult and keeping them updated throughout.
- Implementing a robust and timely Disciplinary Investigation is the responsibility of the employer.
- The Enquiry Practitioner must maintain regular contact with the designated lead for the Disciplinary Investigation.
- It is the responsibility of the Enquiry Practitioner to maintain an overview of the progression of the Disciplinary Investigation and, where necessary, feedback information to any interested parties, including the Safeguarding Adults Manager.
- Following the completion of the Disciplinary Investigation, the designated Disciplinary Investigating Officer must inform the Enquiry Practitioner of the final outcomes.
- Where a referral to the Disclosure and Barring System and/or Regulatory Bodies, e.g. Health and Care Professional Council, General Medical Council, Nursing and Midwifery Council is required it is the employer’s responsibility to do so promptly.

**Timescales:** Disciplinary Procedures must commence as soon as practicable after the Strategy Discussion or Strategy Meeting has determined this course of action is applicable.

**Recording:** The Enquiry Practitioner is responsible for liaising with the Manager leading the Disciplinary Investigation and recording progress on case notes.

The Enquiry Practitioner will record on-going contact with the Adult/others on case notes.

The Manager leading the Disciplinary Investigation must record the findings and recommendations in accordance with the requirements of their own agency.

The Enquiry Practitioner will record the final outcome of the Disciplinary Investigation on the Closure Summary.
12.15.3 Serious Untoward Incidents/Serious Incidents

Review processes for Serious Untoward Incidents (SUIs) and Serious Incidents (SIs) will apply within all NHS Trusts where an Incident meets the relevant criteria and involves abuse or neglect of an Adult.

**Purpose**
- To undertake a timely Root Cause Analysis so that the incident or circumstances can be fully understood and lessons learnt.

**Who has responsibility?**
- The NHS provider Adult Safeguarding Lead is responsible for ensuring that any SUI / SI review that involve the abuse of an Adult with care and support needs are also reported to Rochdale Adult Care Services as a Safeguarding Adults Concern.
- The NHS provider Adult Safeguarding Lead is responsible for liaison with the Adult and their family as per the SUI / SI Policy to be assured that the response has been sufficient to deal with the safeguarding issue.
- The Local Authority Safeguarding Adults Manager must maintain regular contact with the designated NHS provider Adult Safeguarding Lead so that information can inform the closure of a Safeguarding Enquiry.

**Timescales:** A SUI / SI review Root Cause Analysis report will be completed in accordance with NHS guidance; there are varying timescales appropriate to the level of the incident. The timescale must be confirmed by HMR Clinical Commissioning Group on a case by case basis.

**Recording:**
Confirmation that a SUI / SI has been agreed must be recorded by the Safeguarding Adults Manager.

The Safeguarding Adults Manager is responsible for liaising with the NHS Provider Adult Safeguarding Lead and recording progress.

The NHS provider Adult Safeguarding Lead must ensure that internal records are made as per the SUI / SI Policy.

The Enquiry Practitioner must record the final SUI / SI outcome on the Closure Summary.
12.16 Case Conference

Where a Safeguarding Enquiry has been complex a Case Conference can be held to scrutinise the Enquiry process and outcomes, consider if any legal or statutory action or redress is indicated and make recommendations where any wider actions or learning are identified.

Purpose

- Provide scrutiny of the Enquiry process and its outcomes
- To ensure that the views, wishes and Best Interests of the Adult have been central to this.
- To ensure effective risk management and monitoring arrangements are in place.
- To ensure allegations have been put to individuals alleged to have caused harm and they have been given an opportunity to respond.
- To determine whether an investigated allegation is substantiated, not substantiated or is inconclusive on the balance of probabilities.
- To consider what legal or statutory actions or redress may be needed including referrals to the Disclosure and Barring Service (DBS) or a professional registration body – Health and Care Professional Council (HCPC) or the Nursing and Midwifery Council (NMC).
- To consider any recommendations where wider actions or learning are identified.
- To identify any further actions and timescales.
- To consider the need for a Safeguarding Adults Review.
- If appropriate, close the Enquiry.

Who has responsibility?

- The Safeguarding Adults Manager has responsibility for deciding if a Case Conference is required.
- The Safeguarding Adults Manager has the responsibility for identifying an Independent Chair for the Conference and ensuring that administrative arrangements for the meeting are in place.
- The Safeguarding Adults Manager is responsible for inviting relevant individuals and discussing these with the Independent Chair.
- The minute taker is responsible for sending invites, booking a venue/room, requesting copies of reports for circulation, attendance recording, monitoring apologies and minuting the meeting.
- The Independent Chair has overall responsibility for decision making at the Case Conference.
- The Independent Chair is responsible for the accuracy of the minutes and their secure dissemination.

Further guidance on Case Conferences, including roles and responsibilities, is available in “Safeguarding Adult Case Conference Procedure and Practice Guidance”.
**12.17 Re-Opening an Enquiry**

Very occasionally after an Enquiry has concluded and a decision has been made at a case conference that abuse has been substantiated or otherwise, new information comes forward that would have had a bearing on the conclusion reached. As an example, care staff appearing at a coroner’s inquest after the Enquiry had long-concluded could change their account of an incident under oath. Where this occurs the safeguarding Chair previously involved will need to review the case as in some cases it may be appropriate to re-convene the case conference. In certain circumstances the police might want to re-interview a witness. Each case will be different and the merits of re-opening an investigation will need to be carefully weighed up. The adult safeguarding unit can be called upon for further advice.

**12.18 Feedback and outcomes**

Feedback to the Adult and/or their representative and others as appropriate, must be given at all stages so that the process is understood and expectations are clear. It is the responsibility of the Enquiry Practitioner to provide feedback throughout, unless specifically agreed otherwise.

**Purpose**

- To understand the Adult's experience and that the outcomes of the Enquiry as defined by the Adult and/or their representative have been achieved.
- Inform other agencies processes as appropriate, such as Provider Services, Complaints or Contracting/Commissioning functions, so that lessons can be learned.
- Demonstrate that the Safeguarding Concern is taken seriously and that enquiries were proportionate and appropriate.
**Who has responsibility?**

- The Enquiry Practitioner must make sure the Adult and/or their representative understand what is being or has been done in response to the Safeguarding Concern and any ongoing action.
- The Enquiry Practitioner must seek the Adult and/or their representative’s views on the extent to which the Enquiry has involved the Adult and achieved the outcomes they wanted. This discussion may take place,
  - Prior to a Closure Meeting or
  - When agreed actions are in place and a Closure Meeting is not considered necessary.
- The discussion may be in person or by telephone and will usually be confirmed by letter.
- The Safeguarding Adults Manager is responsible for identifying the most appropriate person appropriate to give feedback, e.g. Managers/owners of Provider Services, CQC and other professional bodies.

**Timescales:** Timely feedback to the Adult and/or their representative and others as appropriate.

**Recording:** Verbal feedback to the Adult and/or their representative should be recorded by the Enquiry Practitioner on the organisation’s information system.

A Feedback Letter must be written sensitively by the Enquiry Practitioner to provide feedback to the Adult and/or their representative and others, as appropriate.

The letter must be signed, dated and scanned onto the organisation’s information system.

**12.19 Closure Meeting**

An Adult Safeguarding Enquiry must be formally closed. It is not a requirement to hold a formal meeting to agree Closure, though it will be good practice in the more complex cases.

**Purpose**

- To determine the extent to which the Enquiry achieved the outcomes desired by the Adult and/or their representative.
- To understand the issues that may have prevented the Adult and/or their representative’s desired outcome/s being realised.
- To affirm that the agreed actions have been implemented and ensure that no further action is necessary in respect of the Safeguarding Concern.
- To reach a collective decision as to whether the Enquiry can be closed.
- If there is disagreement in respect of closure, the matter must be referred to the relevant Safeguarding Lead.
• To identify cases which have potential for a Safeguarding Adult Review (SAR).

Who has Responsibility?
• In more straightforward cases, where a formal meeting is not required, the decision to close the case is made by the Safeguarding Adults Manager in conjunction with the Enquiry Practitioner.
• The Safeguarding Adults Manager has the responsibility for convening invitations to the Closure Meeting where this is appropriate.
• The Closure Meeting must be chaired by the Safeguarding Adults Manager.
• Where the Concern originated as a complaint or contractual concern, consideration must be given to informing the relevant Complaints/Contracting Officers of the outcomes.
• All those involved in the Enquiry (e.g. professionals in other agencies, family and carers) must also be informed that the Enquiry has been concluded.

**Timescales:** A date and time for the Closure Meeting must be scheduled during the previous Safeguarding Meetings.

If any persons/agencies do not agree to closure, the matter must be referred to the relevant Safeguarding Lead within **2 normal working days.**

**Recording:** The minutes of the Closure Meeting must be recorded by the Safeguarding Adults Manager.

The Safeguarding Adults Manager (Chair) has responsibility for recording, electronically storing and distributing the minutes to relevant persons and agencies involved in the care and support of the Adult.

12.20 **Enquiry Closure Summary**

A summary of key information is required to provide a readily accessible overview of the Safeguarding Enquiry and is also the point from which reportable data is gathered.

**Purpose**
• To ensure that the Adult is satisfied with the outcome.
• To evidence that all Investigation and Protection Actions have been robustly and appropriately completed.
• To check that referrals to regulatory bodies have been made where this has been identified.
• To ensure that all relevant recording has been completed.
• To ensure management oversight of the Safeguarding process and of the Closure decision.
• To ensure the Adult and others involved have received feedback of the Enquiry outcomes.
• To record if the risk has been removed, reduced or remains.
• To record if abuse has been substantiated, not substantiated or is inconclusive.

Who has responsibility?
• The Enquiry Practitioner will present the Closure Summary to the Safeguarding Adults Manager for approval or closure.
• The Safeguarding Adults Manager will audit check to ensure that actions are completed as appropriate.
• All outstanding actions should be addressed prior to closure. Any outstanding issues will, be returned to the Enquiry Practitioner to action within agreed timescales.

Timescales
Where possible, the number of days from the date of the Safeguarding Concern to Closure Summary date should not exceed 30 calendar days in cases that DO NOT require a Strategy Meeting.

Where possible, the number of days from the date of Safeguarding Concern to Closure Summary date should not exceed 90 calendar days in cases that DO require a Strategy Meeting.

Recording: The Enquiry Practitioner must complete the Closure Summary following all Safeguarding Enquiries unless advised otherwise.

The Safeguarding Adults Manager must approve the Closure Summary and in doing so undertake a Case File Audit.
Contact received and screened. Non-safeguarding concerns signposted for alternative action.

Safeguarding concern received Section 42 Enquiry

Initial Enquiry Discussion
Decide actions and who will lead

Initial Enquiry Visit to
establish outcomes

Additional Enquiry Discussion

Strategy Meeting to identify and agree:
Protection Actions
Formal Investigation Actions

Case Conference to monitor and review:
Protection Actions
Formal Investigation Actions

Final evaluation of Feedback & Outcomes

Closure meeting / Closure Summary

Report criminal activity to the police

Agreement on additional actions and feedback to those involved can happen at any stage