

MK Together Safeguarding Adults – Interagency Policy & Procedure V4

Purpose: To set the policy for Safeguarding Adults in Milton Keynes including managing Concerns around People in Positions of Trust (PiPoT)

Approved by:

Milton Keynes Council Adult Social Care Leadership Team Meeting 11th November 2020

MK Together Assurance Board 17th November 2020

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For use by: Members of the public and all staff and volunteers who work with adults who have care and support needs

Document Management and Distribution:

- This policy will be made generally available via the MK Together Website and linked to the Milton Keynes Council website Safeguarding pages
- MK Together Management Board Members are responsible for ensuring that information regarding this update is circulated within their agency.
- This policy will also be added to the Adult Social Care Policy database and be linked to the Council's Intranet site for access and use by Council staff. *N.B. Printed copies of this document may not be the current approved version - please refer to the intranet for current policy versions*

Change History / Cancellations

1) Documents withdrawn and replaced by this version:

- Milton Keynes Multi Agency Safeguarding Adults Policy and Procedures. June 2016 and all prior versions.
- Milton Keynes Multi Agency Safeguarding Adults Practice Guidelines. June 2016 and all prior versions
- Safeguarding Adults Review Sub-Group. Safeguarding Adults Reviews Policy April 2016 – withdrawn
- Milton Keynes Safeguarding Adults_Guidance on contacting the Police V1 Dec 2017
- Milton Keynes Council Procedure For Modern Slavery – Adults and Children's Social Care November 2017

2) Changes/additions of particular note in this version –

- This version introduces guidance on Managing Concerns around People in Positions of Trust (PiPoT).
- The Safeguarding Tool (STT) - as approved by MK Together Assurance Board on 14th December 2020 - replaces the Decision Making Framework (DMF)

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N.B. Within this policy links to other documents are shown in blue bold typeface.

Direct quotations from Law or guidance are indicated by italic text

Part A. Policy and Context

Section 1. Introduction and Aim.

1.1 In Milton Keynes the MK Together Management Board brings together senior leaders from key agencies and incorporates multi-agency safeguarding arrangements as set out in [Working Together to Safeguard Children](#) and the [Care Act 2014](#). It does this by:

- “a) Agreeing strategic priorities for the safeguarding of children and adults and reporting on progress annually.*
- b) Developing shared policies, processes and response to identified issues, making best use of the total resources available.*
- c) Co-ordinating the work of the affiliated boards, delegating effectively and providing active support and sponsorship.*
- d) Commissioning any reviews including Child Safeguarding Practice Reviews, Safeguarding Adult Reviews and Domestic Homicide Reviews.” Ref MK Together Management Board – Terms of Reference as set out in the MK Together Partnership Handbook 2020/21. Ref mktogether.co.uk*

Core membership of the board will be made up of chief officer or senior level representation from key agencies and include lead representatives for local safeguarding partners.

1.2 Milton Keynes Council has a duty, under The Care Act 2014, for ensuring enquiries are made if it believes an adult is subject to, or at risk of, abuse or neglect. The enquiry should establish whether any action needs to be taken to stop or prevent abuse or neglect, and if so, by whom

1.3 This document sets the interagency policy and procedural principles for Safeguarding Adults in Milton Keynes including Managing Concerns around People in Positions of Trust (PiPoT).

Section 2. Policy Statement

2.1 All Safeguarding interventions in Milton Keynes will follow the requirements of the Care Act 2014 Sections 42 – 46 and the Care Act Statutory Guidance Section 14.

2.2 Actions must be based on the six key principles of Adult Safeguarding: [Ref Care Act Guidance S14.13](#)

- **“Empowerment** – *People being supported and encouraged to make their own decisions and informed consent.*
- **Prevention** – *it is better to take action before harm occurs*
- **Proportionality** – *the least intrusive response appropriate to the risk presented.*
- **Protection** – *support and representation for those in greatest need*
- **Partnership** – *Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse*
- **Accountability** – *Accountability and transparency in delivering safeguarding”*

2.3 Additionally, Safeguarding interventions are expected to “Make Safeguarding Personal” and must involve the adult experiencing, or at risk of, abuse or neglect in decision making about “*how best to respond to their safeguarding situation in a way that enhances involvement, choice and control as well as improving quality of life, wellbeing and safety*” [Ref Care Act Guidance S14.15](#).

2.3.1 Interventions must comply with the Mental Capacity Act (MCA) and the Deprivation of Liberty Safeguards (DoLS). They must consider if the adult at risk has the mental capacity to make informed choices, and give informed consent, regarding their own safety and how they live their lives.

- Organisations must ensure that their workers who carry out MCA assessments are suitably trained. This should include an understanding of when a situation is more complex than they can determine alone and/or is not within the scope of their role.
- There should be access to specialist MCA advice and assessment when required.

2.3.2 The Care Act (S14.43) requires the local authority to arrange for an independent advocate to represent and support an adult who is the subject of a safeguarding enquiry or Safeguarding Adult Review if the adult has ‘substantial difficulty’ in being involved in the process and when there is no other suitable person to represent and support them.

2.3.2 If, after discussion with an adult at risk who has mental capacity, they refuse any intervention, their wishes will be respected unless:

- there is an aspect of public interest (e.g. not acting will put other adults or children at risk)
- there is a duty of care on a particular agency to intervene N.B. An individual can refuse a S9 Care Act Assessment but cannot prevent a safeguarding concern being raised

2.4 In addition to this interagency policy, organisations in Milton Keynes who work with adults who have care and support needs MUST have their own internal Safeguarding Adults Procedures managed by an identified Adult Safeguarding Lead (ASL) within that organisation. These MUST be consistent with this document and Statutory Guidance [Ref Care Act Guidance S14.52](#). They should include statements on:

- roles and responsibility, authority and accountability to ensure that all staff and volunteers understand their role and limitations
- procedures for dealing with allegations of abuse, including those for dealing with emergencies by ensuring immediate safety, the processes for initially assessing abuse and neglect and deciding when intervention is appropriate, and the arrangements for reporting to the police, urgently when necessary
- how to access support and advice at all times, whether in normal working hours or outside them,
- how to record allegations of abuse and neglect, any enquiry and all subsequent action
- performance and quality assurance measures for internal reports and other purposes such as requests from the Adult Safeguarding Board.

2.5 Safeguarding is distinct from concerns and complaints about the quality of care or practice or a complaint about services received. Organisations should have internal policies and processes for responding to and managing these. They should also have a whistleblowing policy for situations where a worker:

- Is concerned that their manager(s) or proprietor(s) may be implicated
- Thinks their concerns will not be taken seriously
- Fears intimidation
- Has an immediate concern for their own or a service user's safety

2.6 Regulated services such as care homes and domiciliary care services also have a legal duty under the Health and Social Care Act 2008 to report *"changes, events and incidents that affect their service or the people who use it"* to their regulatory body the Care Quality Commission (CQC). This includes [Allegations of Abuse](#).

2.7 Milton Keynes Council Safeguarding Adults Team is responsible, on behalf of Milton Keynes Council, for making an enquiry when a safeguarding concern or a concern regarding a Person in Positions of Trust (PiPoT) concern is raised.

Section 3. Relevant Legislation, Guidance and Documents.

3.1 Law. [Care Act 2014](#)

3.2 Local Authority Circulars/Government Guidance. [Care Act 2014 Statutory Guidance](#)

N.B. This local policy and procedure does not replace statute, regulations and guidance, including more specific law and guidance on aspects of safeguarding and related laws and service specific guidance. All staff involved in managing or carrying out Safeguarding processes must therefore have access to and be familiar with these documents as appropriate.

Section 4. Definitions used in this policy

4.1 The definitions used in this policy will follow the definitions with the Care Act 2014 and associated Guidance. Definitions of more common terms can be found on Think Local Act Personal [Care and Support Jargon Buster](#).

- **Abuse** - Harm that is caused by anyone who has power over another person, which may include family members, friends, unpaid carers and health or social care workers. It can take various forms, including physical harm or neglect, and verbal, emotional or sexual abuse. Adults at risk can also be the victim of financial abuse from people they trust. Abuse may be carried out by individuals or by the organisation that employs them
- **Adult at Risk** - An adult who is in need of extra support because of their age, disability, or physical or mental ill-health, and who may be unable to protect themselves from harm, neglect or exploitation.
- **Enquiry** – *"action taken or instigated by the local authority in response to a concern that abuse or neglect may be taking place. An enquiry could range from a conversation with the adult, or if they lack capacity, or have substantial difficulty in understanding the enquiry their representative or advocate, prior to initiating a formal enquiry under section 42, right through to a much more formal multi-agency plan or course of action. Ref Statutory Guidance S14.77"*
- **Milton Keynes Safeguarding Tool (STT)** - A reference document and tool to help workers determine when they should raise a safeguarding concern.
- **Referrer**- the person who raises a concern that abuse or neglect may be taking place.
- **Safeguarding** - The process of ensuring that adults at risk are not being abused, neglected or exploited, and ensuring that people who are deemed 'unsuitable' do not work with them.
- **Source(s) of Risk** - This is the default terminology to describe the perpetrator(s).
- **Worker** – includes people working in a paid capacity or who volunteer and are not paid.

Part B. Process for Raising a Safeguarding Concern

Section 5. When does the Safeguarding Duty Apply?

5.1 Under the Care Act (Section 42) the duty to make an enquiry into abuse or neglect applies if an adult:

- *“has needs for care and support (whether or not the local authority is meeting any of those needs)*
- *is experiencing, or at risk of, abuse or neglect*
- *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”*

5.2 If a safeguarding concern does not meet the Section 42 criteria the council can still decide to carry out enquiries using powers rather than responding to a statutory duty. [Ref Care Act Guidance 14.44.](#)

Section 6. Abuse or neglect is suspected, observed or disclosed.

6.1 Any member of the public, friend, carer, relative or paid worker may become worried about an adult by:

- **Suspected Abuse:** there are indications of abuse, but it has not been witnessed or disclosed.
- **Observed Abuse:** the abuse has been directly witnessed.
- **Disclosed Abuse:** an adult says they are being or have been abused

6.2 If there is an immediate risk of harm to an individual or they need immediate medical treatment the first action to be taken **MUST** be to contact the police and/or the ambulance service on 999.

6.2.1 This can be done by anyone and should be done as soon as they are aware of the situation. They should not hope or assume someone else will do this or wait for permission.

6.2.2 This **MUST** be done **IN ADDITION TO** Raising a Safeguarding Adult Concern ([ref S7 of this Policy](#))

6.2.3 If a related criminal act is suspected or alleged the police **MUST** also be informed.

6.3 If a situation is worrying but it is not clear if abuse is happening or has happened it can be discussed with:

- The safeguarding lead within their organisation (in the case of an employee or volunteers)
- The safeguarding lead for the service/accommodation the adult receives or where they are living
- Milton Keynes Council Adult Social Care, Access Team (ACCESS) Tel: 01908 253772 or out of hours Emergency Social Work Team Tel: 01908 725005
- The Regulatory Authority - The Care Quality Commission. Tel: 03000 616161.
- Thames Valley Police Protecting Vulnerable People Unit (PVP Unit) Tel - 01296 39650

6.4 Professional workers should use the Milton Keynes Safeguarding Tool (STT) when deciding if it is appropriate to raise a safeguarding concern. Other workers and members of the public are encouraged to use this tool but if they have any doubt about raising a concern, they should seek advice as in Section 6.3 above.

Section 7. Raising a Safeguarding Adult Concern

7.1 **Members of the public** may raise concerns

- by telephone - Adult Social Care, Access Team (ACCESS) Tel: 01908 253772 or out of hours Emergency Social Work Team Tel: 01908 725005
- via an www.milton-keynes.gov.uk/safeguardingadults online form N.B. When the form is submitted it generates a reference number and, if an email address is provided, an email acknowledgement.
- in writing to: ACCESS, Civic, Saxon Gate East, Central Milton Keynes, MK 9 3 EJ

7.2 Health and social care workers **MUST** raise a concern via www.milton-keynes.gov.uk/safeguardingadults.

This should be done as soon as possible and **within 24 hours** of becoming aware of the abuse or potential abuse.

7.3 Thames Valley Police (TVP) must raise a concern using the Protecting Vulnerable People (PVP) process.

7.4 South Central Ambulance Service (SCAS) must raise a concern using the SCAS report process.

Section 8. Responding to a Safeguarding Concern

8.1 When a concern is raised with Milton Keynes Council these are then directed to the Adult Safeguarding Team which is responsible for making appropriate enquiries.

8.2 The principles and process for this are set out in this Policy and Procedure [Ref Part D.](#)

8.3 Referrers will, with due regard to confidentiality and Data Sharing Law and Regulations, be advised of the outcome of the concern that they have reported.

Part C. Process for Raising a Concern about a Person in a Position of Trust (PiPoT)

Section 9. When Does PiPoT Apply?

9.1 PiPoT relates to instances where a relevant agency is alerted to information (current or historical) that may affect the suitability of a professional, or volunteer to work with an adult(s) at risk.

- The information comes from **activity outside their professional or volunteer role and place of work**.
- The alleged victim, in such circumstances, does not have to be an adult at risk, it could be their partner or a child.
- The allegation does not directly involve an adult at risk but may have risk implications in relation to the employment or volunteer work of a person in a position of trust (PiPoT).

Section 10. Identifying a PiPoT concern

10.1 Concerns about a PiPoT's behaviour may be identified in various ways including:

- Police intervention or investigation
- Complaints or Whistleblowing disclosure
- Safeguarding Adult Enquiries or Safeguarding children investigations
- From providers, commissioners or regulators
- By the current employer, members of the public or the relevant individual (PiPoT) his/herself.

10.2 Examples of concerns include when that person has:

- *"Behaved in a way that has harmed or may have harmed an adult or child*
- *Possibly committed a criminal offence against or related to an adult or child*
- *Behaved towards an adult or child in a way that indicates they may pose a risk of harm to adults with care and support needs". [Ref Care Act Guidance S14.123](#)*

10.3 If unsure about a situation, members of the public and workers should seek advice as in Sections 6.3 – 6.4.

Section 11. Raising a PiPoT Concern

11.1 In order that concerns of this type are not dealt with in isolation, and an oversight is maintained by the Local Authority, they should be raised in the same way as a safeguarding concern as in Sections 7.1 – 7.2

11.2 If the concern is related to a colleague or employee, raising a concern and identifying the PiPoT will have implications which compromise their right to privacy within the referring organisation or Local Authority.

11.2.1 In such instances before raising the concern the referrer should contact the Adult Safeguarding Team to agree how manage confidentiality and anonymity.

Section 12. Responding to a PiPoT Concern

12.1 When a concern is raised with Milton Keynes Council these are then directed to the Adult Safeguarding Team which is responsible for making appropriate enquiries.

12.2 The principles and process for this are set out in this Policy and Procedure [Ref Part D](#).

12.3 Referrers will, with due regard to confidentiality and Data Sharing Law and Regulations, be advised of the outcome of the concern that they have reported.

Part D. The Process for Safeguarding and PiPoT Enquiries (Procedure)

Section 13. Safeguarding Screening

13.1 When the concern is received by the Safeguarding Adults Team it will be registered on the Adult Social Care Records System **within 24 hours** or immediately if urgent.

13.1.1. This will initiate a process to record, evidence and audit the actions taken regarding the concern.

13.2 Concerns will be allocated to a Safeguarding Screener for further information gathering and risk assessment.

This screening must commence **within 24 hours** or immediately if urgent.

13.2.1 If this indicates a need to manage immediate risks to the safety of the adult a Safeguarding Protection Plan should be agreed and implemented without delay. If there is an existing Safeguarding Protection Plan for that adult it must be reviewed, updated and implemented.

13.2.2 The discussions to agree a plan should involve the adult at risk and all others involved in their care.

13.2.3 The Adult Safeguarding Team is responsible for ensuring a plan is in place and monitored unless this responsibility is formally 'handed over' to another Adult Social Care Team or external organisation.

13.2.4 The screener should consider if other household members are at risk and require intervention.

13.3 **Criminal Acts** - If information indicates that a criminal act is suspected a police referral should be made, if it has not already been done.

13.4 **Peer on Peer abuse** - Where the source of risk is also an adult at risk of harm, their needs should also be considered as part of the enquiry.

13.5 **Provider/institutional abuse or poor quality of care** - If there are concerns about a provider and multiple service users may be at risk, a referral will need to be completed for each person. There should also be a decision if placements to that provider should be suspended during the enquiry.

13.6 **People Placed In Milton Keynes by another Local Authority** - Where the concern is about an adult placed In Milton Keynes by another Local Authority the response should take account of the [ADASS Safeguarding Adults Policy Network Guidance June 2016 Out-of-Area Safeguarding Adults Arrangements](#) or any subsequent version.

13.7 **Serious Incidents** - If a Serious Incident has occurred in relation to NHS-funded services and care it may be agreed that a combined enquiry is carried out cover both processes with one agency taking the lead.

13.8 **Modern slavery** - If information indicates that an adult could be a victim of modern slavery under the 2015 Modern Slavery Act Milton Keynes Council is a specified public authority "first responder agency" and is required to notify any potential victim of modern slavery to the Home Office via the [National Referral Mechanism \(NRM\)](#).

13.9 **PREVENT** - If information indicates that an adult could be at risk of radicalisation a referral should be made to the Channel Panel via the **local Thames Valley Prevent team or the Thames valley Police Prevent Gateway Team**

13.10 **Vulnerable Adult Risk Management (VARM)** - Where an adult at risk does not fall within the multi-agency processes, or if it is felt that a VARM meeting will help to reduce the risk of serious harm or death the VARM policy should be followed.

13.11 **Repeat Allegations** - Where an individual has raised repeated safeguarding alerts which have each been found to be unsubstantiated, there should be an agreement about how this is managed.

- If an alert is raised which repeats previous alerts this should be dealt with as agreed.
- If an alert differs from that specified in the plan it should be treated as a new alert.

13.12 When information gathering, and risk assessment is complete the screener will decide if the alert:

- does not need any further action
- should be dealt with via another response. The Safeguarding Screener must make appropriate arrangements to ensure that these are actioned.
- should become a formal Section 42 Enquiry.

Section 14. Section 42 Enquiry Processes.

14.1 If a formal Section 42 Enquiry is necessary, Milton Keynes Council Adult Safeguarding Team will always be the lead agency but may designate other teams or agencies to carry out aspects of the enquiry which may therefore be carried out by:

- Adult Safeguarding Officer or Adult Social Care Social Worker
- An agency or provider

14.2 In all cases the person designated to coordinate the process must have completed Level 3 training as set out in the MK Joint Children's and Adults Competency Framework.

14.3 In all cases the person designated to coordinate the process must do so in accordance with this procedure:

- An initial Safeguarding Discussion should take place within **5 working days** of receipt of the alert or earlier depending on the level of risk to the adult concerned
- **Enquiries should be completed within 28 working days.** If there is a delay in completing the enquiry within this timescale any extension(s) must be approved by the Safeguarding Manager.

Section 15. Enquiries into Allegations Against People Who Work in Care Services (including PiPoT enquiries)

15.1 Where there are allegations against people who work in care services the safeguarding enquiry will need to coordinate with the employers Human Resources (HR) responsibilities and/or with a police enquiry.

- 15.1.1 The person designated to coordinate the process must ensure that their intervention facilitates any HR actions including any support and advice provided by the employer for the worker. The employer should be made aware that a criminal enquiry takes precedence over a HR enquiry and they should liaise with the investigating police officer for advice and guidance.

15.2 In the event of a PiPoT concern and the relevant person is currently working with adults with care and support needs or children:

- The person designated to coordinate the process must assess any potential risk to adults with care and support needs who use the service(s), and, if necessary, take action to safeguard those adults.
- If the current employer is not aware of an allegation the worker conducting the enquiry must consider whether the current employer should be informed of the allegation

15.3 If a person subject to a PiPoT enquiry resigns their employment to avoid the enquiry or disciplinary process, and it is decided, based on the enquiry, that they would have been dismissed because they pose a risk of harm to adults, a referral to the Disclosure and Barring Service (DBS), must be made. As appropriate, employers should report workers to statutory and other bodies responsible for professional regulation.

15.4 When a person's conduct towards an adult may impact on their suitability to work with or continue to work with children, the person designated to coordinate the process will refer the concern to the Milton Keynes Council Local Authority Designated Officer (LADO) via the Multi Agency Safeguarding Hub (MASH).

Section 16. Safeguarding Discussions (Strategy Discussions)

16.1 Safeguarding discussions do not need to be face-to-face but can take place electronically and virtually to facilitate involvement and a speedy response.

16.2 As appropriate the discussion may be 'professionals only' or may include a range of agencies and individuals including the adult at risk.

16.3 The purposes of strategy discussions include:

- Ensuring that screening or a Section 42 enquiry is coordinated, and the response proportionate to the assessed risk.
- Bringing together all relevant parties to share relevant information about the adult at risk and his/her situation, to agree how to proceed and the legal context for any planned intervention.
- Agreeing necessary actions, roles, responsibilities and timescales.
- Agreeing any ongoing care planning or protection planning for the adult at risk.

Section 17. Concluding a Safeguarding Enquiry and Safeguarding Protection Plans

17.1 The Adult Safeguarding Team is responsible for deciding when an enquiry is completed.

17.2 When an enquiry is complete the Adult Safeguarding Team is responsible for ensuring that any further agreed necessary action(s) are put in place. They may do this directly or designate to another Adult Social Care Team, council service or external agency.

17.3 A Safeguarding discussion should take place within 10 working days of the enquiry being completed when:

- An adult(s) remains at risk and a multi-agency response is required to ensure their safety
- If the findings demonstrate evidence of a theme or pattern in concerns
- There are points of learning for organisations

17.4 Where ongoing risks have been identified the discussion must include the development of a **Safeguarding Protection Plan** or review of any existing Safeguarding Protection Plan. This should be based on the adult at risk's wishes and ensure their safety and continued well-being.

- It must include a review date

- The initial review should be carried out by the Adult Safeguarding Team unless this responsibility is formally designated to another Adult Social Care Team or external agency.
 - Subsequent reviews can, where agreed, be part of a scheduled Care and Support review cycle
- 17.5 A Safeguarding Adults Review (SAR) may be held in accordance with the MK Together Case Review process
- when an adult 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.
 - if an adult in its area has not died, but the SAB knows or suspects that the adult has experienced serious abuse or neglect. *Ref Statutory Guidance S14.162/163*
- 17.6 Referrers will, with due regard to confidentiality and Data Sharing Law and Regulations, be advised of the outcome of the Enquiry.

Part D. Operational Issues

Section 20. Roles and Responsibilities

20.1 Everyone has a responsibility to report abuse or concerns of abuse, additionally specific roles are as set out in this policy.

20.2 MK Together Management Board has a lead responsibility for safeguarding as set out in the 2020 MK Together Handbook Ref mktogether.co.uk

20.3 All organisations retain responsibility for their statutory functions and responsibilities.

20.4 The Milton Keynes Council Designated Adult Safeguarding Manager (DASM) will be responsible for the management and oversight and coordination of cases where allegations are made or concerns raised about a person who may have harmed or who may pose a risk to adults.

20.5 Employers are expected to ensure that appropriate actions are taken in line with this policy.

20.5.1 Carry out risk management and appropriate Human Resources (HR) procedures, including safe recruitment and supervision of staff.

20.5.2 Ensure that appropriate action is taken by their organisation so that learning from past events is applied to reduce the risk of harm to adults with care and support needs in the future.

20.5.4 Make appropriate referrals to the Disclosure and Barring Service (DBS).

20.5.5 Offer support and advice to their staff, or volunteers, against whom allegations have been made. Such staff or volunteers should be treated fairly and honestly. The employer has a duty of care to them.

Section 21. Recording requirements and Information sharing

21.1 It is important that accurate records are kept regarding information, discussions, meetings and actions in relation to the safeguarding concern and enquiry.

21.2 Where a member of public is aware of or worried about abuse, they are encouraged to make a written note.

21.3 Health and social care workers MUST keep a written record on their agency records management system.

21.3.1 As necessary recording should take place on agreed standard forms or in specified formats provided by the Milton Keynes Council Adult Safeguarding Team.

21.3.2 Access to safeguarding records must be restricted on a 'need to know' basis, through agreed access arrangements, following the organisations information governance procedures.

21.3.3 Where the concern relates to a member of staff as the adult at risk or as the source of risk there must be additional access restrictions to ensure confidentiality.

21.4 The Council's Adult Social Care Records Management System is the primary source for safeguarding enquiry records and statistical data. The system includes task allocation, authorisation, timescale checks and audit.

21.5 When deciding whether to share information, each case must be judged on its own facts. Decisions must be **justifiable and proportionate** ensuring that the information shared:

- is relevant and necessary (not simply all the information held)
- shared only with the relevant people who need the information, and specifically needed at that time.
- balances the duty to protect people with care and support needs from actual or potential harm or abuse and the effect upon individuals of information about them being shared (for example, upon the person's Article 8 Human Rights (the right to private and family life).

21.6 In specified circumstances the safeguarding Adults Board retains the power to “request a person to supply information to it or to another person. The person who receives the request must provide the information to the SAB” [Ref Care Act Guidance 14.186](#)

Section 22. Training Implications

22.1 All agencies who work with adults at risk must ensure that their staff receive Safeguarding training in accordance with the MK Together Competency Framework [Ref mktogether.co.uk](http://mktogether.co.uk)

22.2 The training that a staff member has received (or not) does not negate their responsibility to report abuse.

Section 23. Complaints and Appeals

23.1 Complaints about safeguarding actions, or failure to act, should, in the first instance, be raised using the Complaints Process for the relevant service or agency.

Part E. Quality Standards, Monitoring and Review

Section 24. Quality Standards

24.1 The quality standards in this policy and procedure are as follows

- Section 13.1 Concerns registered on the Adult Social Care Records System within 24 hours or immediately if urgent.
- Section 13.2 This screening must commence within 24 hours or immediately if urgent
- Section 14.3 An initial Safeguarding Discussion should take place within 5 working days
- Section 14.3 Enquiries should be completed within 28 working days.
- Section 17.2 A discussion within 10 working days of a completed enquiry in specified circumstances

Section 25. Equality Impact Assessment

25.1 This policy could affect different groups of people in the following ways.

- Racial/ethnic groups - No differential impact
- Religious/belief groups -No differential impact
- Gender and marital status groups -No differential impact
- Disability groups - See comments below
- Sexual orientation groups -No differential impact
- Age groups - See comments below

25.2 It is probable that the procedures within this policy will be most applicable for disabled and older service users where issues of vulnerability are more frequent. All safeguarding concerns will be considered on an individual basis and will identify the particular situation and the action to be taken specific to the individual.

25.3 Appropriate and proportionate safeguarding processes will be managed through the Safeguarding Adults Board via the regular quality audits carried out by the Quality Assurance and Serious Case Review Subgroup.

Section 26. Monitoring and Review

26.1 The effectiveness of this policy and procedure will be monitored by the identified Adult Safeguarding Lead (ASL) within organisations and overseen by the MK Together Partnership.

26.2 The document will be reviewed as required in response to national guidance and Law and at least 3 yearly. Changes to this policy must be agreed by all parties who have approved this version, a working group may be convened to agree any amendments.