

SAFEGUARDING FRAMEWORK

July 2014



County Durham Health
and Wellbeing Board



County Durham Children
and Families Partnership



Safe Durham Partnership



Content	Page
Introduction	3
Local Safeguarding Children Board (LSCB)	4
Statutory responsibilities	
Statutory objectives and functions of LSCB	
Governance arrangements	5
Relationship with Children and Families Partnership	6
Relationship with Health and Wellbeing Board	7
Relationship with Safe Durham Partnership Board	8
Regulatory Bodies	
Inspection arrangements	9
Serious Case Review/Incident reviews	
Distinction between commissioning roles, directly delivered services and purchased/externally commissioned services	10
Safeguarding Adults Board (SAB)	11
Statutory responsibilities	
Functions of Safeguarding Adults Board	
Governance arrangements	13
Chairing and membership arrangements	14
Relationship with Children and Families Partnership	15
Relationship with Health and Wellbeing Board	
Relationship with Safe Durham Partnership Board	
Regulatory Bodies	16
Inspection arrangements	
Serious Case/Incident reviews	
Domestic homicide reviews	17
Distinction between commissioning roles, directly delivered services and purchased/externally commissioned services	
Current Government policies and drivers	
CCGs responsibilities in relation to safeguarding children and adults	18
Glossary	20
LSCB interface	22
SAB interface	23

Introduction

A Safeguarding Framework was initially agreed at the Shadow Health and Wellbeing Board meeting on 8th November 2012. The document set out the transitional arrangements with the Shadow Board and Local Safeguarding Children's Board and Safeguarding Adults Board.

Protecting vulnerable children and adults is a key priority of the Health and Wellbeing Board, Children and Families Partnership, and Safe Durham Partnership; and it is important that there are close links with these Partnership Boards and the statutory Local Safeguarding Children's Board and Safeguarding Adults Board.

This revised Safeguarding Framework clarifies the joint working arrangements between the Boards. This document should be read in conjunction with the [Collaborative working and information sharing protocol between professionals to protect vulnerable children and adults](#)

Local Safeguarding Children Board (LSCB)

Statutory responsibilities

Section 13 of the Children Act 2004 requires each Local Authority (LA) that is a Children's Services Authority to establish a LSCB for their area and specifies the organisations and individuals that should be represented on LSCBs.

Since 2006 the LSCB has been the statutory body for agreeing how the relevant organisations will co-operate to safeguard and promote the welfare of children in County Durham.

The LSCB encapsulates the guidance contained in [Working together to safeguard children \(March 2013\)](#)

Statutory objectives and functions of LSCBs

Section 14 of the Children Act 2004 sets out the objectives of LSCBs, which are:

- (a) to coordinate what is done by each person or body represented on the Board for the purposes of safeguarding and promoting the welfare of children in the area; and
- (b) to ensure the effectiveness of what is done by each such person or body for those purposes.

Regulation 5 of the Local Safeguarding Children Boards Regulations 2006 sets out that the functions of the LSCB, in relation to the above objectives under section 14 of the Children Act 2004, are as follows:

1(a) developing policies and procedures for safeguarding and promoting the welfare of children in the area of the authority, including policies and procedures in relation to:

- (i) The action to be taken where there are concerns about a child's safety or welfare, including thresholds for intervention;
 - (ii) Training of persons who work with children or in services affecting the safety and welfare of children;
 - (iii) Recruitment and supervision of persons who work with children;
 - (iv) Investigation of allegations concerning persons who work with children;
 - (v) Safety and welfare of children who are privately fostered;
 - (vi) Cooperation with neighbouring children's services authorities and their Board partners;
- (b) Communicating to persons and bodies in the area of the authority the need to safeguard and promote the welfare of children, raising their awareness of how this can best be done and encouraging them to do so

- (c) Monitoring and evaluating the effectiveness of what is done by the authority and their Board partners individually and collectively to safeguard and promote the welfare of children and advising them on ways to improve;
- (d) Participating in the planning of services for children in the area of the authority; and
- (e) Undertaking reviews of serious cases and advising the authority and their Board partners on lessons to be learned.

Regulation 5 (2) which relates to the LSCB Serious Case Reviews function and regulation 6 which relates to the LSCB Child Death functions are covered in this framework.

Regulation 5 (3) provides that an LSCB may also engage in any other activity that facilitates, or is conducive to, the achievement of its objectives.

Annual report

- Working Together 2013 requires each LSCB to produce and publish an annual report evaluating the effectiveness of safeguarding in the local area. The annual report should be submitted to the Chief Executive, Leader of the Council, Local Police and Crime Commissioner and the Chair of the Health and Wellbeing Board. The Durham LSCB annual report is also shared with LSCB partner agency senior management teams and the Children and Families Partnership.

Governance arrangements

The Local Authority and Corporate Director of Children and Adults Services in Durham hold a key responsibility in ensuring the LSCB is established and effective. Durham LSCB has a robust Governance and Memorandum of Understanding in place that forms the formal agreement between the board and all partner agencies.

The LSCB's role is to scrutinise local arrangements and it should therefore have a separate identity and an independent voice. It should not be subordinate to, nor subsumed within, other local structures in a way that might compromise it.

Chairing and Membership Arrangements

From April 2011 all LSCBs were required to appoint an independent chair of the Board and up to two lay members. The board continues to be chaired by an independent person and has one lay member and is actively looking to appoint a further lay member, recognising the valuable contribution they make to the wider work of the board in ensuring the public has a voice on the LSCB.

The LSCB has a broad membership from County Council Services, including Children and Adults Services, NHS Health Trusts, Probation, Police, Voluntary and Community sector, Schools and Colleges, Clinical Commissioning Groups and NHS England. The Lead Member for Children and Young People Services attends the Board as an observer.

All partner agencies are required to identify a representative at a sufficiently senior level who can fully represent their agency in Board decision making without the need to refer back to their organisation. They should be people with a strategic role in relation to safeguarding and promoting the welfare of children within their organisation and be able to:

- speak for their organisation with authority;
- commit their organisation on policy and practice matters; and
- hold their organisation to account.

The LSCB has a number of standing sub groups which have clear terms of reference and are commissioned to undertake detailed work specific areas of board business, reporting back to the LSCB on results and outcomes. These are:

- Policy and Procedures Sub Group
- Quality and Performance Sub Group
- Strategic Training Sub group
- Serious Case Review Monitoring Group
- Missing and Exploited Sub Group
- Child Death Overview Panel

Other Board business priorities can be managed through the operation of time limited task and finish group work. Such work can only be effectively completed if all agencies contribute the resources to each of these groups, ensuring appropriate representation.

The Board also has strong links with the Multi-Agency Public Protection Panel (MAPPA: Multi Agency Public Protection Arrangements) which focuses on the management of adults who pose a serious risk to vulnerable people and children.

The voice of Children and Young People

- The LSCB has established a link with *Investing in Children* to strengthen the voice and influence of children and young people in helping the Board to set its priorities and focus on issues that affect young people's safety and wellbeing. A young people's reference group is in place and they meet regularly with representatives of the Board.

Relationship with Children and Families Partnership

The LSCB's role is to ensure the effectiveness of the arrangements made by the partnership and individual agencies to safeguard and promote the welfare of children. Whilst the work of the LSCB contributes to the wider goals of improving the wellbeing of children, it has a narrower focus on safeguarding and protecting children. This fits with the vision of the CFP to ensure that 'All children, young people and families believe, achieve and succeed'

- The LSCB is not subordinate to nor subsumed within the Children and Families Partnership arrangements.
- The LSCB has a separate identity and an independent voice.

- The LSCB is able to challenge and scrutinise effectively the work of the Children and Families Partnership and partners.
- The LSCB forms a view of the quality of local safeguarding activity.
- The LSCB challenges organisations with an independent voice.
- The Children and Families Partnership is chaired by the Corporate Director of Children and Adult Services who is also a statutory member of the County Durham Health and Wellbeing Board.
- The Chair/Vice Chair of the LSCB is a member of the Children and Families Partnership, contributing to the Children, Young People and Families Plan (CYPFP) and undertaking actions within the plan.
- The LSCB have a working relationship to the Children and Families Partnership which is included in the governance structure.
- The LSCB annual report is presented to the Children and Families Partnership for information and the LSCB is involved and contributes to the development of the Children, Young People and Families Plan and has certain actions carried out by the LSCB.

Under Strategic Objective 3 in the CYPFP ‘A think family approach is embedded in our support of families’, the following actions will be led, or jointly led by the LSCB:

- Implement the Early Help Strategy to better support families who have additional needs.
- Implement the revised Working Together to Safeguard Children guidance with partners to ensure the most vulnerable children receive early help and support.
- Implement the sexual violence action plan which includes joint agency response to child sexual exploitation / sexual violence and children who go missing from home and care.
- Carry out Section 11 audits on an annual basis to ensure all services and functions have regard to the need to safeguard and promote the wellbeing of children and young people.
- Agree an inter-agency protocol for collaborative working and information sharing between agencies working with vulnerable children and adults

The LSCB interface arrangements are illustrated on page 22.

Relationship with the Health and Wellbeing Board

The Health and Social Care Act 2012, gives Health and Wellbeing Boards the overall strategic responsibility for assessing local health and wellbeing needs in the Joint Strategic Needs Assessment (JSNA) including safeguarding, and agreeing the Joint Health and Wellbeing Strategy.

Statutory organisations working with children and young people have a responsibility to ensure that they are safeguarded from harm. The Health and Wellbeing Board are sighted on the work of the Local Safeguarding Children’s Board to ensure an awareness of forthcoming priorities to ensure an effective working relationship is maintained between both Boards.

This fits with the vision of the Health and Wellbeing Board to ‘Improve the health and wellbeing of the people of County Durham and reduce health inequalities’

Under strategic objective 5 in the Joint Health and Wellbeing Strategy ‘protect vulnerable people from harm’ the following action will be led by the LSCB:

- Work in partnership to support vulnerable adults and children at risk of harm and work to stop abuse taking place.

The LSCB will need to link effectively with the Health and Wellbeing Board, including the Corporate Director of Children and Adults Services and the Director of Public Health County Durham, in order to inform and draw from the Joint Strategic Needs Assessment (JSNA) and the annual report of the Director of Public Health County Durham.

The Health and Wellbeing Board will ensure that the Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy recognise and take account of children’s’ safeguarding issues.

The Health and Wellbeing Board has an interest in the work of the LSCB to ensure it remains sighted on its effectiveness and interfaces, in order to provide assurance for its work, however, there is no legal responsibility to hold the LSCB to account.

The LSCB should not be subordinate to or subsumed within local structures that might compromise its separate identity and voice. There needs to be a clear distinction between the roles and responsibilities of the LSCB and the Health and Wellbeing Board, to ensure the maximum effectiveness of both.

The annual report of the Local Safeguarding Children Board is shared with the Health and Wellbeing Board to ensure priorities are shared and understood.

Relationship with the Safe Durham Partnership Board

The Safe Durham Partnership Board is chaired by the Corporate Director of Children and Adult Services who is also a statutory member of the County Durham Health and Wellbeing Board.

A member of the Local Safeguarding Children Board sits on the Safe Durham Partnership Board.

Protecting Vulnerable People from Harm is a priority of the Safe Durham Partnership. The vision of the Safe Durham Partnership Plan is that ‘every adult, child and place in County Durham will be, and will feel, safe’.

The Safe Durham Partnership will receive a copy of the annual report of the Local Safeguarding Children Board to ensure priorities are shared and understood.

Regulatory bodies

The Local Safeguarding Children Board is not accountable to or monitored by a Regulatory Body.

Inspection Arrangements

The Ofsted Single Inspection Framework (SIF), published on 7th November 2013, brings together an inspection framework for child protection, services for looked after children and care leavers, and local authority fostering and adoption services. It replaces the previous inspection frameworks and includes the Local Safeguarding Children Board.

Each judgement will be graded as: outstanding, good, requires improvement or inadequate, as will overall effectiveness. The overall effectiveness of the Local Safeguarding Children Board will be judged on the same four-point scale.

Serious Case/Child Death Review /Incident Reviews

The LSCB is responsible for undertaking Serious Case Reviews (SCR) of children's cases where abuse is a factor and Child Death Reviews of all deaths of children in accordance with statutory guidance

The increased leadership from CCGs has led to an increased focus on serious case reviews and domestic homicide reviews in health. Serious Case Reviews (SCR) must be carried out when a child dies and abuse is known or suspected to be a factor in the death. The LSCB must also consider holding a SCR when a child sustains a potentially life-threatening injury or serious and permanent impairment through abuse or neglect. Such consideration must also be given in cases where a child has been seriously harmed as a result of sexual abuse and in cases of parental domestic homicide

The LSCB undertake reviews of serious cases and advise the local authority and Board partners on lessons to be learnt. The LSCB also has a well-established programme of seminars to disseminate findings and outcomes to managers and practitioners. The outcome of a serious case Review is published on the LSCB website.

The findings of a SCR are taken into consideration by Ofsted as part of their inspection of local safeguarding arrangements.

The LSCB also carry out multi-agency Learning Lesson Reviews where the criteria for a SCR are not met but it is considered there are lessons to be learned. These reviews involve single agency 'Round Table' reflective discussions with those involved with the case and a multi-agency workshop to take forward the action planning and learning.

Child Death Reviews

From 1 April 2008, the LSCB acquired compulsory functions regarding all child deaths. Durham and Darlington have joined together into a single Child Death Review Panel to carry out this function which includes collecting and analysing information about the deaths of all children normally resident in County Durham and Darlington with a view to:

- Identifying any matters of concern including any case giving rise to the need for a SCR.
- Identifying any general public health or safety concerns arising from the deaths of children.

This panel is presently chaired by an independent chair who is a Consultant in Public Health Medicine.

Distinction between commissioning roles, directly delivered services and purchased/externally commissioned services

The LSCB do not commission or deliver services other than the delivery of Safeguarding Training and the commissioning of independent persons to write Serious Case Review overview reports.

Safeguarding Adults Board (SAB)

Statutory responsibilities

Safeguarding Adults is a shared responsibility and a high priority for all agencies working in County Durham. The Government's 'No Secrets' guidance (2000) required Local Authorities to set up an inter-agency framework between statutory agencies to facilitate joint working to safeguard adults. The Safeguarding Adults Framework of Standards (ADASS 2005) later endorsed this guidance by setting out good practice standards to be followed by Safeguarding Adults Boards (SAB). Following the review findings of 'No Secrets' in 2009, the Law Commission recommended Safeguarding Adults Boards should be placed on a Statutory footing. The Care Act, due to be implemented in 2015/16 has placed SABs on a statutory footing. This will give the board a clear basis in law for the first time and will strengthen the existing arrangements that are in place.

The SAB in County Durham is chaired by the Head of Adult Care. It is supported by three thematic sub groups, focussing on Performance and Quality; Policy and Practice; Communication, Engagement and Training

The main aims of the SAB are:

- To safeguard and promote the welfare of adults at risk in County Durham through inter-agency collaboration
 - The SAB safeguards and promotes the welfare of adults at risk in County Durham through inter-agency collaboration and co-ordinates the safeguarding activity undertaken by each organisation represented on the SAB. The SAB also gives strategic direction to partner agencies and organisations across County Durham in relation to safeguarding activity.
- To coordinate the safeguarding activity undertaken by each organisation represented on the board
- To ensure the effectiveness of what is delivered by each organisation for that purpose
 - The SAB ensures the effectiveness of what is done by each organisation in relation to Safeguarding Adults activity.
- To promote public confidence in safeguarding systems and ensure human rights are balanced with protecting the public from harm
 - It promotes public confidence in safeguarding systems within County Durham and ensures human rights are balanced with protecting the public from harm.
- To understand the nature of adult abuse and foster strategies that reduce incident and effect
- To give strategic direction to partner agencies and organisations across County Durham in relation to safeguarding activity

Functions

Thresholds, policies and procedures

The Policy and Practice Sub Group of the SAB is responsible for developing and implementing inter-agency Safeguarding Adults policies and procedures across County Durham, and establishing thresholds for intervention.

Currently, the threshold for safeguarding adults is met when a person is suffering harm or exploitation and is likely to have eligible social care needs, and where abuse cannot be ruled out.

Training

The SAB has agreed to ensure that the safeguarding adults policy and accompanying procedural guidance are available to, and understood by, the widest possible audience.

- The Board therefore oversees a Communications, Engagement & Training sub group, which addresses all multi-agency safeguarding adults related workforce development and training issues, as well as communications and raising awareness. The remit of this group is to build and oversee the implementation of a safeguarding adults workforce development strategy that is jointly and appropriately resourced;
- Ensures that multi-agency training meets relevant national occupational standards for each of the target groups (e.g. National Qualifications Framework/Learning Disabilities Awards Framework, Post Qualifying Social Work Award, NHS Knowledge and Skills Framework).
- Encourages all partner agencies to engage in inter-agency training that is designed and delivered on behalf of the SAB to ensure required standards are fulfilled.
- Oversees communications with the public and organisations in County Durham. Its role is to highlight the need to safeguard adults at risk and raise awareness of how this can be achieved.
- Is responsible for overseeing communications with the public and organisations in County Durham. Its role is to highlight the need to safeguard adults at risk and raise awareness of how this can be achieved.

Quality Assurance, Monitoring and Evaluation

The Performance and Quality Sub Group is responsible for monitoring and evaluating safeguarding activity across partner agencies and is essential to improving practice.

Safe recruitment, management and supervision of people who work with adults at risk:

The SAB is committed to working towards ensuring that staff and volunteers within each of the statutory partner agencies along with the wider social care and health community meet jointly agreed safeguarding competency requirements - based on national occupational standards - appropriate to their individual roles.

The Care Quality Commission has representation at the SAB. The Commission is involved in safeguarding adults activity where there is concern that an adult who uses a regulated service is or may be suffering from abuse.

Investigation of allegations concerning people working with adults at risk:

It is now a criminal offence for anyone who has been barred by the Disclosure and Barring Service (The CRB and ISA merged to become the DBS) to work or apply to work with vulnerable adults in a variety of regulated and controlled activities.

Participating in planning and commissioning

The Safeguarding Adults Board and its sub groups will be required to participate in the local planning and commissioning of services for Adults at risk ensuring they take safeguarding adults into account.

DCC's Children and Adults Commissioning Service work very closely with Safeguarding Practice Officers to ensure providers and services are safe and compliant with agreed standards and contracts. Safeguarding Practice Officers form a small integrated team consisting of personnel from social work and occupational therapy professions. They work closely with dedicated safeguarding personnel employed by the two CCGs in County Durham.

Commissioning staff also have a responsive approach to contributing to Executive Strategy Meetings.

Annual Report

The SAB produces and publishes an annual report on the effectiveness of safeguarding and promoting the welfare of adults at risk in the local area.

The Care Act 2014 states that every SAB must send a copy of its annual report to:

- The Chief Executive and leader of the local authority;
- The local policing body;
- The Local Healthwatch;
- The Chair of the Health and Wellbeing Board

Governance arrangements

The SAB was formed to improve the inter-agency activity associated with protecting 'adults at risk'. The accountabilities, responsibilities and authorities of the 'parent' organisations remain unaltered in terms of their legal, statutory and public accountabilities and responsibilities. Delegating responsibility for these actions to the Safeguarding Adults Board does not negate individual agency authority.

The Safeguarding Adults Board has a role in co-ordinating and ensuring the effectiveness of local individuals and organisations work to safeguard Adults at risk, it is not accountable for their operational work.

Each member of the Board retains their own existing lines of accountability for safeguarding and promoting the welfare of Adults at risk by their services. The SAB does not have a power to direct other organisations. However it has a clear role in terms of leadership and is able to question partners in relation to seeking assurance of their ability to deliver a robust safeguarding framework.

Chairing and Membership Arrangements

Schedule 2 of the Care Act specifies that members of an SAB must include at least the local authority that established it, the NHS clinical commissioning group and the chief officer of police. Core SAB members can decide who else should be a member, such as housing authorities or provider organisations. SABs will be required to produce a safeguarding plan, progress on which they must report annually.

The Board is currently chaired by the Head of Adult Care and is resourced by allocated staff within the Safeguarding Adults Unit in Children and Adults Services, Durham County Council. The SAB is in the process of recruiting an independent chair jointly with the LSCB.

NHS England and Clinical Commissioning Groups are key board partners on the SAB. The NHS England Area Team do not have direct attendance at SAB, however CCG board nurses represent the interests of the area team.

Members of the SAB should be people with a strategic role in relation to safeguarding and promoting the welfare of adults within their organisation. They should be able to:

- speak for their organisation with authority;
- commit their organisation on policy and practice matters; and
- hold their organisation to account.

Board members will have the delegated responsibility and authority from their agencies to make decisions in the following areas:

- Safeguarding Adults Board policy;
- Safeguarding Adults Procedures;
- Commitment of agencies' staff and time;
- Commitment to Serious Case Reviews;
- Deployment of the current Safeguarding Adults Board budget;
- Identification of additional staff to be nominated to sub groups.

The SAB has a broad membership including County Council Services, CCGs (who represent the NHS England Area Team), NHS Health Trusts, Children and Adults Services, Probation, Police, Voluntary Services, Prison Service, Department of Works & Pensions, Care Quality Commission, and Victim Support.

Strong links are maintained between the SAB and the LSCB through a reciprocal membership agreement whereby the Head of Adult Care and the Head of Children's Services attend both Boards.

Relationship with Children and Families Partnership

The Children and Families Partnership and the SAB will ensure that any issues which overlap between the two through the Think Family approach will be shared accordingly and appropriately.

Relationship with Health and Wellbeing Board

The Health and Social Care Act 2012, gives Health and Wellbeing Boards the overall strategic responsibility for assessing local health and wellbeing needs in the Joint Strategic Needs Assessment (JSNA) including safeguarding, and agreeing the Joint Health and Wellbeing Strategy.

The Health and Wellbeing Board has an interest in the work of the SAB to ensure it remains sighted on its effectiveness and interfaces, in order to provide assurance for its work, however, there is no legal responsibility to hold the SAB to account.

The Health and Wellbeing Board receive information on the priorities and performance of the SAB to ensure effective working relationships are maintained and that vulnerable people are safeguarded from harm.

Under Strategic Objective 5 in the Joint Health and Wellbeing Strategy 'protect vulnerable people from harm' the following actions will be led by SAB.

- Provide protection and support to improve outcomes for victims of domestic abuse and their children
- Safeguarding children and adults whose circumstances make them vulnerable and protect them from avoidable harm

The SAB should not be subordinate to or subsumed within local structures that might compromise its separate identity and voice. There needs to be a clear distinction between the roles and responsibilities of the SAB and the Health and Wellbeing Board, to ensure the maximum effectiveness of both.

The SAB will need to link effectively with the Health and Wellbeing Board, including the Director of Public Health. In doing that, the SAB should both inform and draw on the Joint Strategic Needs Assessment.

The Care Act 2014 states that the annual report of the SAB is shared with the chair of the Health and Wellbeing Board to ensure priorities are shared and understood.

Relationship with Safe Durham Partnership Board (SDPB)

The Safe Durham Partnership Plan includes a strategic objective "Protecting vulnerable people from harm". Actions include:

- Prevent abuse from happening by challenging the attitudes and behaviours which foster it and intervening early to prevent it
- Take action to reduce the risk to people who are victims of these crimes and ensure that perpetrators are brought to justice
- Provide adequate support where abuse does occur and work in partnership to obtain the best outcome for victims and their families

The SAB interface arrangements are illustrated on page 23.

Regulatory bodies

The SAB is not subject to a Regulatory Body however, the Association of Directors of Adult Social Services places a duty on Local Authorities to create and maintain safeguarding adults boards with local oversight from the Corporate Director of Children and Adults Services. In Durham, SAB has some accountability to the Overview and Scrutiny Committee.

Inspection Arrangements

The Safeguarding Adults Board is accountable for its work to the public and partner agencies. Agreement from partner agencies is required for all work that has implications for policy, planning and the allocation of resources.

Under the Care Act, from April 2015 The Safeguarding Adults Board will have a statutory requirement to produce a strategic plan. The SAB currently produces an Annual Report in October each year. A business plan and training strategy are also agreed in April of each year.

The arrangements for inspection of the activity of the SAB are via peer-led inspections across local councils. The North East ADASS Safeguarding Adults Network has supported and enabled peer review and feedback.

Standards and probes for adult safeguarding peer reviews have been developed as part of a sector-led response in which Local Government and partners take responsibility for improvement. This process aims to use the skills and expertise of professionals, managers, people who use services, councillors and partners within the sector.

These standards have been developed in partnership by the:

- Local Government Group (LG)
- Association of Directors of Adult Social Services (ADASS)
- NHS Confederation
- Social Care Institute for Excellence (SCIE).

Locally, the findings from these peer-led inspections are then fed into the Council's Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy, and prioritised as a corporate priority jointly by the Council and by the NHS.

Serious Case/Incident Reviews

As defined by the multi-agency policy, the SAB will take lead responsibility for conducting a SCR in respect of adults at risk who have been involved in a serious incident when serious abuse or harm has occurred; the process results in advice on lessons to be learned.

In addition, there are internal management reviews or investigations that may be undertaken by various organisations following a serious incident or high impact event. Where such an incident/ event involves a patient/ service user who may be considered to be an 'Adult at Risk' as defined by the Safeguarding Adult Procedures, a senior manager from Children and Adults Services should be invited to the management review or investigation. This includes:

- Incident Co-ordination Group
- Serious Untoward Incident
- Any other Co-ordination Group
- The Constabulary's Gold Group process - the first meeting determines who is invited.

This will ensure compliance with the Safeguarding Adults Inter-Agency Procedural Framework as full consideration will be given as to whether an Executive Strategy meeting or Serious Case Review should be commissioned.

Domestic Homicide Reviews

Although not a statutory requirement under the safeguarding adults agenda, there is a requirement under the Domestic Violence, Crime and Victims Act (2004) for Local Authorities, Police, Strategic Health Authorities, Probation and NHS Trusts to participate in Domestic Homicide Reviews (DHRs). Local arrangements in County Durham exist in terms of commissioning these reviews and this is the responsibility of the Safe Durham Partnership Board.

Distinction between Commissioning roles, directly delivered services and Purchased/externally commissioned services

The SAB does not commission or deliver services other than the delivery of adult safeguarding training – both to commissioners and providers of services.

The CAS Commissioning Service within DCC has strong links within the Safeguarding Adults Team and jointly addresses poor practice issues and contractual compliance issues.

Current government policies and drivers

There are three current pieces of legislation particularly relevant to safeguarding adults activity.

The Community Care Act (1990) is the primary legislation within adult care and sets out the primary duties of the local authority. This will be replaced by the Care Act in April 2015.

The Mental Capacity Act (2005) contains the core principles that: adults should be assumed to have mental capacity to make their own decisions unless it is proved otherwise; people should be supported to make their own decision before anyone concludes that they cannot make their own decisions; people have the right to make unwise or eccentric decisions; anything done for or on behalf of a person who lacks capacity must be done in their best interests; and that anything done for or on behalf of a person who lacks capacity must be the least restrictive of their basic rights and freedoms.

The Mental Capacity Act 2005 Deprivation of Liberty Safeguards (DoLS) came into force in April 2009 as an amendment to the Mental Capacity Act, 2005. They were introduced to protect the human rights of people who lack capacity and authorise their care in a registered care home or hospital. Deprivation of Liberty Safeguards may only be sanctioned when it is in the best interests of the vulnerable person. DoLS is an important and developing safeguard of the right to liberty of some of the most vulnerable people in our community.

In April 2013, the responsibility for acting as supervisory bodies i.e. completing DoLS assessments and authorising or refusing DoLS applications in hospitals transferred from the Primary Care Trusts to local authorities. While Local Authorities already held this responsibility for care homes the addition of hospitals meant that they assumed sole responsibility for the administration of DoLS in all settings where it applies.

There are a number of recent policy developments, which are important within the safeguarding arena and will impact on service delivery in the future.

Between 2010/13 some major national policy developments took place which contribute to changes in adult care, these include:

- A vision for adult social care: Capable communities and active citizens
- Think Local, Act Personal
- Adult Social Care Law Reform - Law Commission
- Health and Social Care Act 2012
- The Care Act 2014

The Care Act will implement statutory Safeguarding Adults guidance that will identify the duties and responsibilities of the Local Authority and its statutory partners in undertaking safeguarding investigations. It will also lay out the role of Safeguarding Adults Boards, and in doing so will place them on a statutory footing.

CCGs responsibilities in relation to safeguarding children and adults:

- Have clear lines of accountability, robust governance and leadership for safeguarding within the CCG, including regular board reports.
- Take an active membership role of the Safeguarding Adults Board (SAB) and the Local Safeguarding Childrens Board (LSCB) including resources to support these groups. Directors of Nursing for both North Durham and Durham Dales, Easington and Sedgfield CCG attend SAB and LSCB. Designated Professionals for both adults and children also attend the respective boards and associated sub groups.
- Provide assurance that commissioned health services have appropriate arrangements in place to safeguard children and adults (i.e. policies, governance, leadership, training, partnership working, senior membership of safeguarding boards and safe

recruitment processes). Contractual clinical quality review mechanisms, commissioning assurance visits, CCG safeguarding adult and children policies and multiagency policies are in place.

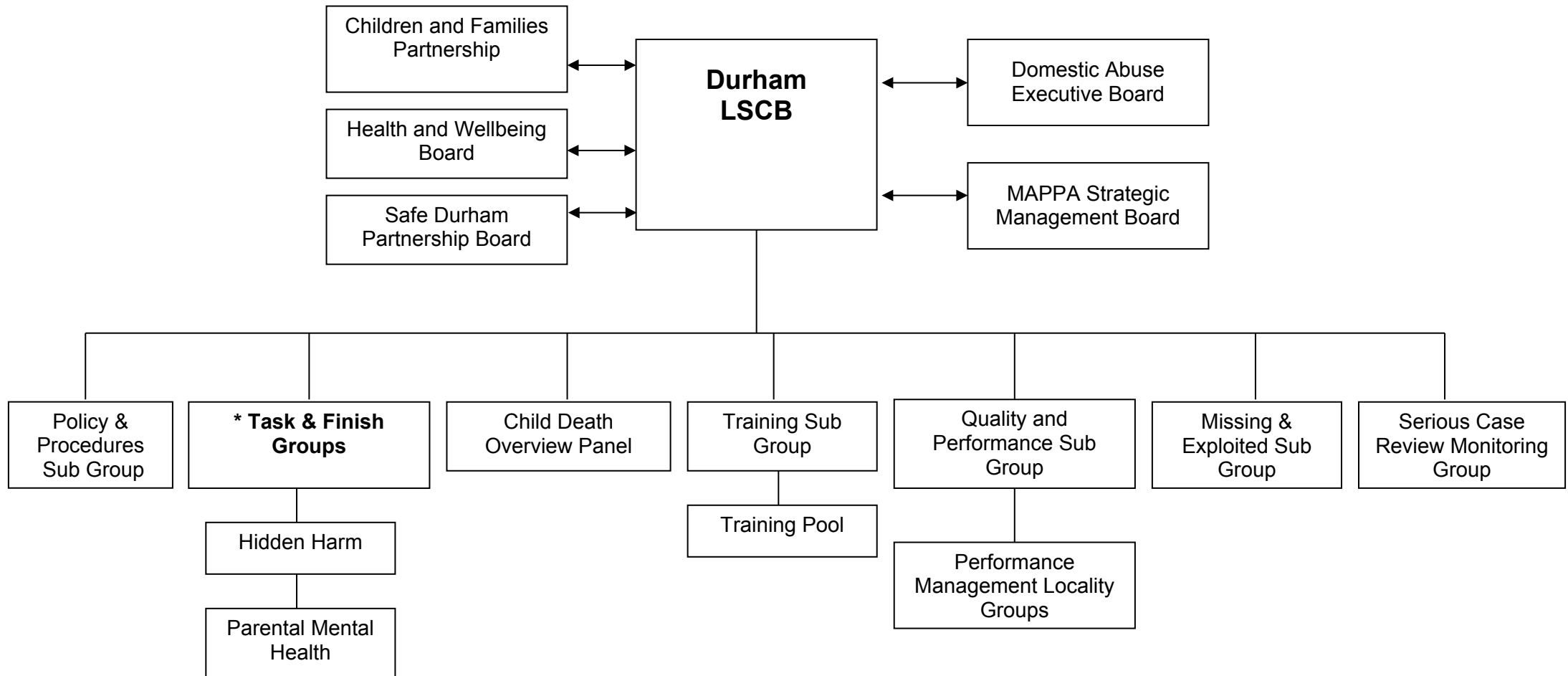
- Ensure information is shared with partner agencies (e.g. social care, police) to safeguard children and vulnerable adults. This will be achieved from commissioning support clinical quality, designated professionals and CCG leads.
- Ensure commissioned health services participate in Local Authority led case reviews should a safeguarding incident occur, disseminate learning and monitor implementation of improvement actions. This will be delivered through designated safeguarding children leads and safeguarding adult team
- Lead a local NHS investigation process if a safeguarding incident falls outside the remit of either of the safeguarding boards, but there is potential learning for health services. This will be delivered through designated safeguarding children leads and the safeguarding adult team
- In partnership with the Local Authority, provide assurance that health funded commissioned packages of care, both in and out of area, comply with the standards of the NHS contract. This is overseen by the CCG Director of Nursing and undertaken through the contracting of individual packages of care, supported by the clinical quality, continuing healthcare and safeguarding teams.
- The two Clinical Commissioning Groups in Durham have developed a 'hosting' arrangement for Safeguarding, representation on LSCB and SAB groups and designated named professional's representation. North Durham CCG hosts the safeguarding adult and children teams. A memorandum of Understanding has been signed by all parties.
- Support an effective multi-disciplinary response to failing services, especially those investigated under Executive Strategy processes as part of the Safeguarding Adults procedures. This includes support from the Medicines Management service in the undertaking of investigations. This is delivered through the designated professionals within the Safeguarding Adult Team under the direction of the lead CCG Director of Nursing.
- Provide representation at regular information sharing meetings held between Safeguarding Adults, DCC Commissioning Service and CQC to ensure continuity in the sharing of information. This is delivered through the designated professionals within the Safeguarding Adults Team under the direction of the lead CCG Director of Nursing.
- Provide full and active participation of health professionals in safeguarding children and adults' investigations as appropriate. This will be coordinated by the designated professionals and safeguarding adults leads under the supervision of the lead CCG Director of Nursing.
- Are members of the Quality Surveillance Group and safeguarding forums chaired by NHS England Area Team.
- CCG colleagues are statutory members of the Safe Durham Partnership and the Health and Wellbeing Board and are represented on the Children and Families Partnership.

Glossary of Terms

ADASS	Association of Directors of Adult Social Services
BASW	British Association of Social Workers
CCA	Community Care Act
CCG	Clinical Commissioning Group
CDDFT	County Durham & Darlington NHS Foundation Trust
CDOP	Child Death Overview Panel
CDRP	Child Death Review Panel
CIN	Child in Need
CP	Child Protection
CQC	Care Quality Commission
CQRG	Clinical Quality Review Groups
CRB	Criminal Records Bureau (Merged with ISA to become DBS)
DBS	Disclosure & Barring Service (ISA and CRB merged to create DBS)
DDES	Durham Dales, Easington, Sedgefield
DfE	Department for Education
DHR	Domestic Homicide Review
DoLS	Deprivation of Liberty Safeguards
ESM	Executive Strategy Meeting
ISA	Independent Safeguarding Authority (Merged with CRB to become DBS)
JSNA	Joint Strategic Needs Assessment
KPI	Key Performance Indicator
LA	Local Authority
LAC	Looked After Children
LADO	Local Authority Designated Officer
LAT	Local Area Team
LSCB	Local Safeguarding Children Board
MAPPA	Multi-Agency Public Protection Arrangements
MCA	Mental Capacity Act
NECS	North East Commissioning Support
NHSCDD	NHS County Durham & Darlington
OSC	Overview & Scrutiny Committee
PCT	Primary Care Trust
NHS	National Health Service

NSPCC	National Society for the Prevention of Cruelty to Children
SAB	Safeguarding Adults Board
SAFS	Safeguarding Adults Framework of Standards
SIF	Single Assessment Framework
SCIE	Social Care Institute for Excellence
SCR	Serious Case Review
SDPB	Safe Durham Partnership Board
SHA	Strategic Health Authority
SPO	Safeguarding Practice Officer

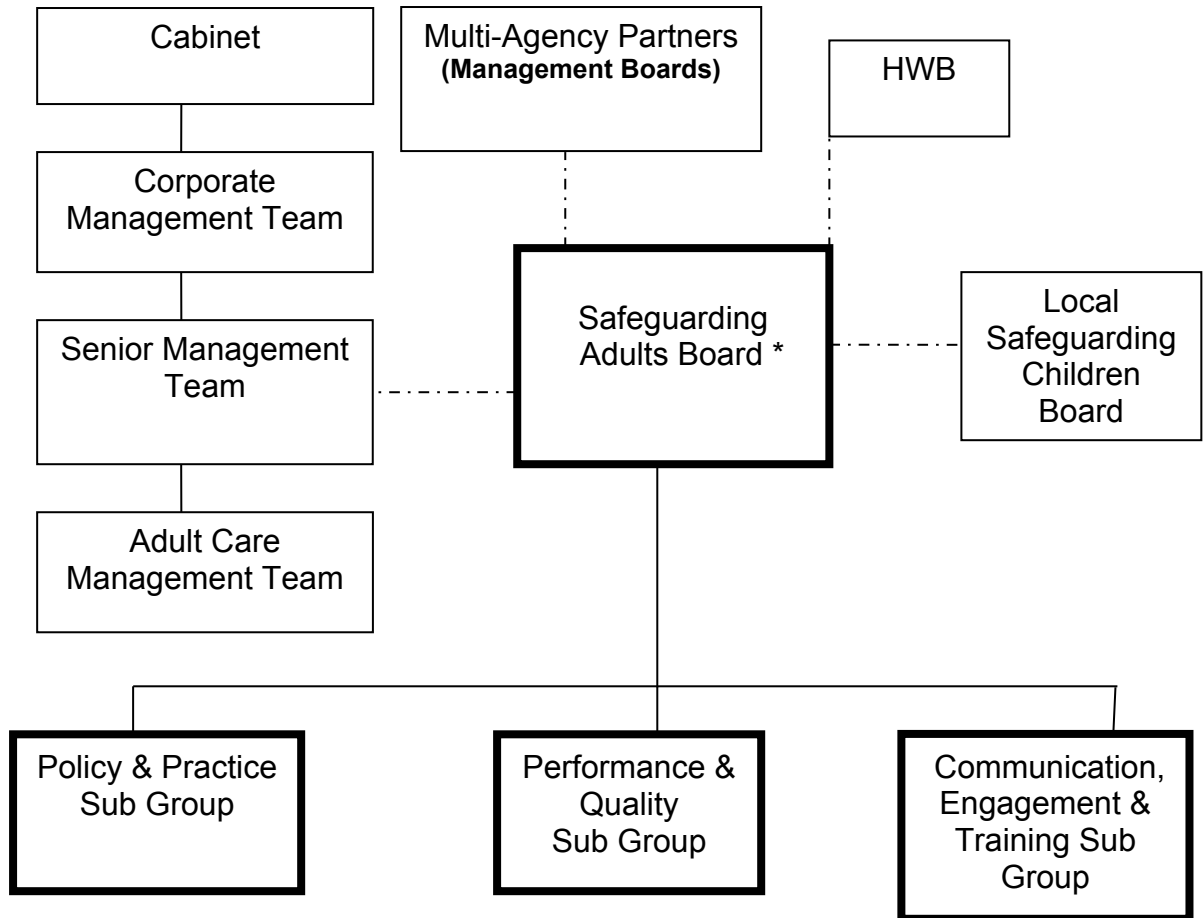
LSCB Interface Arrangements



*The task and finish groups are not standing groups, but are implemented when there is specific purpose.

SAB Interface Arrangements

----- Denotes linkage between chair/s members of respective groups.



* Safeguarding Adults Board undertakes actions within the Safe Durham Partnership Plan in relation to safeguarding adults.