

SAFEGUARDING ADULTS COMMISSIONING POLICY

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Responsible person	Matt O'Connor Safeguarding Adults Lead
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1 INTRODUCTION

- 1.1 Safeguarding adults is everybody's business. All staff have a responsibility to help prevent abuse and to act quickly and proportionately to protect people where abuse is suspected.

'All persons have the right to live their lives free from violence and abuse. This right is underpinned by the duty on public agencies under the Human Rights Act (1998) to intervene proportionately to protect the rights of citizens.'

ADSS (2005) Safeguarding Adults

- 1.2 PCT's have a duty to take reasonable care to ensure the quality of the services they commission and there is an expectation that provider organisations demonstrate robust safeguarding systems and safe practice within agreed local multi-agency procedures.
- 1.3 This policy describes the roles and responsibilities within NHSBA as a commissioning organisation in relation the safeguarding of adults.
- 1.4 This policy and the NHS Bradford and Airedale procedures aim to compliment the [Bradford District Multi-Agency Adult Protection Policy and Procedures](#)
- 1.5 All NHSBA staff, independent contractors and those working for provider organisations are expected to follow those multi-agency procedures, comply with this policy and assist in taking the necessary action to safeguard adults experiencing or at risk of abuse.

2 BACKGROUND

The experience of abuse and neglect is likely to have a significant impact on a person's health and well being. By its very nature abuse (the misuse of power by one person over another) has a large impact on a person's independence. Neglect can prevent a person who is dependent on others for their basic needs exercising choice and control over the fundamental aspects of their life and can cause humiliation and loss of dignity.

ADSS (2005) Safeguarding Adults

- 2.1 Abuse can be experienced or perpetrated by anyone and in any circumstances. It can be wilful or unintentional and can take many different forms including; physical, sexual, emotional (Including verbal), financial or material, neglect and discriminatory abuse. People can however become at particular risk of abuse due to their personal circumstances including; disability, illness and social isolation.
- 2.2 'Safeguarding' adults includes any work which aims to prevent abuse or to protect someone who may be already experiencing abuse. Effective safeguarding depends on a culture of zero tolerance of abuse, where concerns can be raised with confidence that action will be timely, effective, proportionate and sensitive to the needs of those involved.

- 2.3 Adult Protection concerns have been raised by pressure groups and the media since the 1980s and in 1998 the Longcare Enquiry highlighted the need for a multi agency response to allegations of abuse.
- 2.4 In 2000 an inter-departmental government working party produced “No Secrets Guidance on developing and implementing multi agency policies and procedures to protect vulnerable adults from abuse”. This led to the establishment of Bradford District Adult Protection Committee and the Adult Protection Unit. In 2006 the Adult Protection Committee became the Bradford District Safeguarding Board in response to further guidance from the Directors of Adult Social Services (Safeguarding Adults: A national framework for standards for good practice and outcomes in adult protection work- ADSS 2005).
- 2.5 These changes led to the development of a local multi agency policy and procedures, which were reviewed in 2009, and the establishment of Police Vulnerable Victim Co-ordinators to support the investigation of adult abuse cases.
- 2.6 Public awareness continues to improve and there is an increasing expectation that service providers have systems in place to identify early indicators of abuse, prevent abuse and that they act quickly and effectively in partnership with other relevant agencies to safeguard people when it is discovered that they are experiencing abuse.

3 POLICY STATEMENT

- 3.1 NHS Bradford and Airedale (NHSBA) will adopt a zero tolerance approach to adult abuse and will work to ensure that its policies and practices are consistent with agreed local multi-agency procedures and meet the organisations legal obligations.

Specifically:

- 3.1.1 Where concerns are raised, NHSBA Trust is committed to a proportionate and timely response to safeguard the particular individual(s) within a multiagency framework.
 - 3.1.2 The Trust is committed to sharing information required by other agencies, within agreed protocols and legislation, in order to safeguard people who may be at risk of abuse.
 - 3.1.3 The Trust is committed to analysing and sharing any learning from incidents and investigations, in order to improve practice and minimise risk of abuse.
 - 3.1.4 All NHSBA staff are expected to contribute to the safeguarding of people who may be experiencing or at risk of experiencing abuse and to work to the NHSBA safeguarding policy and local multi-agency procedures to report any concerns about abuse.
 - 3.1.5 Where staff feel unable to raise safeguarding concerns within the Trust for any reason, they must raise the concerns directly with the adult protection unit or with the police if they believe a crime has been committed.
- 3.2 As a commissioning organisation, NHS Bradford and Airedale will work with partner agencies in order to develop quality systems, promote safeguarding practice across the district and effectively monitor performance of providers in relation to safeguarding adults.

Specifically:

- 3.2.1 All organisations providing services commissioned by NHS Bradford and Airedale are required to demonstrate commitment to safeguarding adults and to working within agreed local multi-agency procedures, national guidance and legislation.
- 3.2.2 NHSBA will actively contribute to multiagency responses regarding concerns of abuse within commissioned services.
- 3.2.3 All providers are expected to establish procedures and systems of working that ensure safeguarding concerns are referred into the multi-agency procedures according to the District-wide policy.
- 3.2.4 NHS Trusts within Bradford and Airedale District, commissioned by NHSBA within Bradford District, are expected to actively contribute to the work of the Bradford District Safeguarding Adults Board and its sub groups.
- 3.2.5 All providers who deliver services commissioned by NHSBA are required to meet the minimum safeguarding adults standards as set out in section 6 of this policy.

4 SCOPE

- 4.1 This document along with “Bradford District Multi-agency Adult Protection Policy and Procedures” is focused on adults who have additional needs and may be at particular risk of abuse (including neglect) due to, for example; old age, disability, mental or physical ill health or dependency on drugs and alcohol.
- 4.2.1 This policy applies to all staff within NHS Bradford and Airedale and any services commissioned by NHS Bradford and Airedale, including:
 - Airedale NHS Trust
 - Bradford and Airedale Community Health Services
 - Bradford District Care Trust
 - Bradford teaching Hospitals NHS Foundation Trust
 - Independent contractors including; Dentists, General practitioners, Optometrists and Pharmacists.
 - Independent Sector Treatment Centre (ISTC)
 - Nursing and residential homes
 - Yorkshire Ambulance Services
 - Yorkshire Clinic
 - Yorkshire Eye Hospital
 - All community and voluntary organisations receiving funding from NHSBA

This includes; all employees, locums and agency staff, contractors, volunteers, students and any other learners undertaking any type of work experience or work related activity.

5 EQUALITY AND DIVERSITY STATEMENT

- 5.1 In line with the organisations Equality and Diversity Strategy, this policy aims to safeguard all individuals who may be at risk of abuse, irrespective of disability, mental capacity, race, religion/belief, colour, language, birth, nationality, ethnic or national origin, gender, sexual orientation, marital status, responsibility for dependants, medical conditions, intellect, disability, age, professional association or political belief.
- 5.2 All NHSBA staff and providers must respect the alleged victim's (and their family's) culture, religious beliefs, gender and sexuality however this must not prevent action to safeguard someone who is at risk or experiencing abuse. Support in clarifying or understanding diversity issues can be sought from the Equality and Diversity department.
- 5.3 Approaches to adult protection must be person centred. All staff and providers must take into account the individual's culture, religious beliefs, gender and sexuality when assessing risks and formulating individual protection plans.
- 5.4 All reasonable endeavours must be used to establish the person's preferred method of communication and to communicate in a way people can understand. This will include ensuring access to the interpreter's service where people use languages (including signing) other than English. Every effort must be made to respect the person's preferences regarding gender and background of the interpreter.

6 MINIMUM SAFEGUARDING ADULTS STANDARDS FOR PROVIDERS

All providers of services commissioned by NHSBA are required to meet the following minimum standards in relation to safeguarding adults. These standards are not comprehensive and may be in addition to those standards required by legislation, national guidance or other stakeholders, including regulators and professional bodies.

Additional standards required of NHS Trusts providing services (given in italics) apply to:

- Airedale NHS Trust
- Bradford and Airedale Community Health Services
- Bradford District Care Trust
- Bradford teaching Hospitals NHS Foundation Trust

6.1 Minimum standards: Policy and Procedures

- 6.1.1 The provider will ensure that it has up to date organisational safeguarding adults policies and procedures which reflect and adhere to the Local Safeguarding Adults Board policies.
- 6.1.2 The provider will ensure that organisational safeguarding policies and procedures give clear guidance on how to recognise and refer adult safeguarding concerns and ensure that all staff have access to the guidance and know how to use it.
- 6.1.3 The provider will ensure that all policies and procedures are consistent with and referenced to safeguarding legislation, national policy / guidance and local multiagency safeguarding procedures.

- 6.1.4 The provider will ensure that all policies and procedures are consistent with legislation / guidance in relation to mental capacity and consent, and that staff practice in accordance with these policies.
- 6.1.5 Providers of care homes and hospitals will maintain an up to date policy and procedure covering the Deprivation of Liberty Safeguards, and will ensure that staff practice in accordance with the legislation.

Additional standard for NHS Trusts only.

- 6.1.6 *The provider will identify a named health or social care professional with lead responsibility for ensuring the effective implementation of the deprivation of Liberty safeguards within the organisation.*

6.2 Minimum standards: Governance

- 6.2.1 The provider will identify a person(s) with lead responsibility for safeguarding adults.
- 6.2.2 The provider will cooperate with any request from Safeguarding Boards to contribute to multi-agency audits, evaluations, investigations and Serious Case Reviews, including where required, the production of a management report.
- 6.2.3 The provider must ensure that there is a system for identifying, analysing and referring any complaints which raise safeguarding concerns, including potential neglect.
- 6.2.4 Providers of hospitals and care homes will ensure that there are effective systems for recording and monitoring Deprivation of Liberty applications

Additional standards for NHS Trusts only.

- 6.2.5 *The provider will identify a Board level Executive Director with lead responsibility for safeguarding adults.*
- 6.2.5 *The provider will review the effectiveness of it's its organisational safeguarding arrangements at least annually and provide assurance through an annual safeguarding report.*
- 6.2.7 *The provider must have in place robust audit programmes to assure itself that safeguarding systems and processes are working effectively.*
- 6.2.8 *The provider will consider the organisational implications of any Serious Case Review(s) and will devise and action plan to ensure that any learning is implemented across the organisation.*
- 6.2.9 *The provider will ensure that there is an effective system for identifying and recording safeguarding concerns, patterns and trends through it's governance arrangements including; risk management systems, patient safety systems,*

complaints, PALS and human resources functions, and that these are referred appropriately according to multiagency safeguarding procedures.

6.2.10 The provider should identify and analyse the number of complaints and PALS contacts that include concerns of abuse or neglect and include this information in their annual safeguarding or complaints report to their board.

6.2.11 The provider should identify and analyse the number of Patient Safety Incidents and Serious Untoward Incidents that include concerns of abuse or neglect and include this information in their annual report to their board.

6.3 Minimum standards: Multiagency working and responding to concerns

6.3.1 The provider will ensure that any allegation, complaint or concern about abuse from any source is managed effectively and referred according to the local multiagency safeguarding procedures.

6.3.2 The provider will ensure that all pressure ulcers of grade 3 or 4, will be referred to specialist tissue viability practitioners for assessment in accordance with the Pressure Ulcer Prevention and Management Policy. Where the assessment concludes abuse or neglect may be a contributory cause, a multi-agency safeguarding referral must be made.

6.3.3 The provider will ensure that all allegations against members of staff (Including staff on fixed-term contracts, temporary staff, locums, agency staff, volunteers, students and trainees) are referred according to local multiagency safeguarding procedures.

6.3.4 The provider will ensure effective contribution to safeguarding case conferences / protection meetings through attendance by appropriate and informed representatives / practitioners.

Additional standard for NHS Trusts only.

6.3.5 The provider will ensure senior representation on the Local Safeguarding Adults Board and contribution to their sub groups.

6.4 Minimum standards: Recruitment and employment practice

6.4.1 The provider must ensure safe recruitment policies and practices which meet the NHS Employment Check Standards, including enhanced Criminal Record Bureau (CRB) checks for all eligible Staff. This includes staff on fixed-term contracts, temporary staff, locums, agency staff, volunteers, students and trainees.

6.4.2 The provider will ensure that Criminal Records Bureau checks are repeated for eligible staff in line with national guidance / requirements.

6.4.3 The provider must ensure that their employment practices meet the requirements of the Independent Safeguarding Authority (ISA) scheme and

that referrals are made to the ISA, where indicated, for their consideration in relation to inclusion on the adults barred list.

- 6.4.4 The provider should ensure the all contracts of employment (Including volunteers, agency staff and contractors) include an explicit responsibility for safeguarding adults.
- 6.4.5 The provider will ensure that all safeguarding concerns relating to a member of staff are effectively investigated, that any disciplinary processes are concluded irrespective of a person's resignation, and that 'compromise agreements' are not be allowed in safeguarding cases.

6.5 Minimum standards: Training

- 6.5.1 The provider will ensure that all staff and volunteers undertake safeguarding training appropriate to their role and level of responsibility and that this will be identified in an organisational training needs analysis and training plan.
- 6.5.2 The provider will ensure that all Staff, contractors and volunteers undertake safeguarding awareness training on induction, including information about how to report concerns within the service or directly into the multiagency procedures.
- 6.5.3 The provider will ensure that all staff who provide care or treatment undertake safeguarding training in how to recognise and respond to abuse (How to make an alert) at least every 3 years.
- 6.5.4 The provider will ensure that all Staff, contractors and volunteers who provide care or treatment understand the principles of the mental capacity act / consent legislation at the point of induction.
- 6.5.5 The provider will ensure that all staff and volunteers undertake mental Capacity Act / Consent training, including the Deprivation of Liberty Safeguards appropriate to their role and level of responsibility and that this will be identified in an organisational training needs analysis and training plan.

Additional standards for NHS Trusts only.

- 6.5.6 *The provider will undertake regular training needs analysis to determine which groups of staff require further safeguarding adults training. This will be agreed with the commissioners' Safeguarding Adults Lead and as a minimum will include all professionally registered staff with team leadership roles undertaking multiagency training in how to recognise and respond to abuse.*
- 6.5.7 *The provider will ensure that its contribution to the provision of multiagency training is proportionate to its multiagency training requirement.*

7 PERFORMANCE AND MONITORING OF PROVIDERS

- 7.1 Providers performance in relation to safeguarding adults, will be managed primarily through usual contract monitoring arrangements. Where in place, this will be through existing Contract Monitoring Boards and their sub groups.
- 7.2 NHSBA may require providers to produce additional information regarding their safeguarding adults work, in order to monitor compliance with this policy.
- 7.3 In addition to the standards required by this policy, legislation, national guidance or other stakeholders, NHSBA may also use local quality and incentive schemes to identify additional safeguarding standards or related targets for providers.
- 7.4 NHSBA may receive and use information from other agencies and organisation where this is relevant to the performance management of the provider in relation to safeguarding adults. This may include information from:
- Adult Protection Unit (Bradford District)
 - Safeguarding Adults Board(s) and their sub groups
 - Police
 - Service user / advocacy groups
 - Adult and Community Services / Local Authority Departments
 - NHS Providers and contractors
 - Care Quality Commission
 - Nursing and care homes
- 7.5 NHSBAs annual safeguarding report to the Clinical Quality Governance and Risk sub committee will summarise trends, unresolved risks and safeguarding activity from commissioned services.

8 SHARING INFORMATION

- 8.1 NHSBA is committed to sharing information with other agencies, in a safe and timely manner, where this is necessary for the purposes of safeguarding adults in accordance with the law and multiagency procedures. This may include personal and sensitive information.
- 8.2 All providers of services commissioned by NHSBA are required to share information with other agencies, in a safe and timely manner, where this is necessary for the purposes of safeguarding adults in accordance with the law and local multiagency procedures. This may include personal and sensitive information about
- the person(s) at risk of or experiencing abuse
 - family members
 - staff
 - members of the public
- 8.3 All providers are also required to share anonymised and aggregated data where requested, for the purposes of monitoring and developing safeguarding practice.

- 8.4 Referrals into multi-agency procedures from providers, independent contractors and NHS Bradford and Airedale will be monitored by the Adult Protection Unit and activity reported to the Bradford District Safeguarding Adults Board.

9 MANAGEMENT OF SAFEGUARDING ADULTS - RELATED SERIOUS UNTOWARD INCIDENTS (SUIS)

- 9.1 All serious safeguarding adults incidents must be reported in accordance with NHSBA Serious Untoward Incident Policy, as well as being managed and reported following local multiagency safeguarding adults policy.
- 9.2 All serious Untoward Incidents reported to NHSBA will be reviewed by the risk team and the Safeguarding Adults Lead, Director or Deputy Director with Safeguarding Adults responsibility, to identify any safeguarding adults concerns.
- 9.3 All suspicions of fraud in safeguarding cases will be reported to the tPCT Local Counter Fraud Specialist, Director of Finance and Procurement or the National Fraud and Corruption Line. This is in accordance with the tPCT Counter Fraud and Corruption Policy.
- 9.5 The Adult Protection Unit may inform NHS Bradford and Airedale of any potentially serious adult protection referrals within services commissioned by NHSBA., Including independent contractors.
- 9.6 Any senior NHSBA manager dealing with any claims, complaints, disciplinary or performance issues will be responsible for seeking advice regarding any safeguarding risks and making referrals to the multi-agency procedures according to this policy.

10 ALLEGATIONS OF ABUSE AGAINST STAFF

- 10.1 All allegations of abuse against staff, including where there is clear evidence that they are false or malicious, will be recorded and monitored using the organisations incident management policy.
- 10.2 All allegations of abuse against staff must be managed according to local multiagency safeguarding adults procedures.
- 10.3 In line with Bradford District Multiagency Procedures, if there is clear and immediate evidence that an allegation is false, the reasons for not undertaking any further investigation must be stated along with any other measures taken to manage risks. A history of making allegations does not constitute evidence that this allegation is false.
- 10.4 All other allegations that a member of staff has caused or been complicit in abuse or neglect (i.e. where there is no immediate evidence that it is false) must be referred using local multi-agency procedures.
- 10.5 Managers must also consider the need for temporary exclusion or redeployment under the disciplinary policy based on potential risk to the alleged victim(s) if the allegation is found to be true.

- 10.6 The provider must ensure that all other concerns relating to the conduct or capability of staff are monitored and that any safeguarding related concerns are managed in accordance with this policy and local multiagency procedures.
- 10.7 Providers must also ensure that any safeguarding concerns arising from disclosures made during the course of an investigation or other Human Resources process are managed in accordance with this policy and local multiagency procedures.

APPENDIX A

DEFINITIONS

Abuse

Abuse is the violation of an individual's human or civil rights by any other person/s (No secrets, department of Health. 2000) and involves the misuse of power by one person over another (safeguarding Adults ADASS 2005)

Abuse can be unintentional or deliberate and can result from either actions or inactions.

Abuse can take many different forms and is often considered under the following headings:

- physical
- sexual
- emotional
- financial (or material)
- neglectful or
- discriminatory

Adult

For the purposes of this document, adult refers to anyone who is eighteen years or older. Children and young people under the age of eighteen are subject to safeguarding children policy and procedures.

Adult Protection Unit

This refers to a joint funded team, hosted by the Bradford Metropolitan District Council (Adult and Community Care Services).

The unit provides advice and support to agencies or individuals involved in adult protection work.

The unit also co-ordinates Strategy Meetings where there is concern about an alleged victim within Trust services or where the alleged perpetrator is a member of Trust staff.

The Adult Protection Unit and Safeguarding Adults Coordinators can also receive alerts directly from alleged victims, carers, staff and members of the public.

Concerns

This refers to any suspicion, allegation, or other concern relating to the safety or wellbeing of an adult who may be experiencing or at risk of abuse. Individuals do not need 'proof' in order to raise concerns under the safeguarding adults' procedures.

Mental Capacity

Mental Capacity is the ability to; understand, retain and weigh up information in order to make a decision and to communicate the choice they have made. When an adults' ability to make a particular decision is reduced, they can be at increased risk of abuse, including neglect.

Mental Capacity Act

The Mental Capacity Act (MCA) 2005 provides a statutory framework to empower and protect people who may require help to make decision or may not be able to make decisions for themselves.

The Mental Capacity Act is accompanied by a 'Code of Practice' which provides practical guidance and everyone who works with people who may lack capacity has a duty to work within and have 'due regard' to the Code. The Trust expects all staff who work with people who may have reduced capacity to work within the code of practice.

Multi-Agency Procedures

This refers to the locally agreed multiagency adult protection procedures coordinated through the local Safeguarding Adults Board (Previously adult Protection Committees)

In Bradford District this is the Bradford District Safeguarding Adults Board: Adult Protection Procedures

[Bradford Metropolitan District Council | AP Procedures | About the Bradford District multi-agency Adult Protection Procedures](#)

Neglect

Neglect is a form of abuse and may be defined as the persistent failure to meet a person's basic physical and or psychological needs. Neglect can be either unintentional or deliberate.

Neglect can involve failing to provide adequate food, shelter and clothing, failing to protect from physical harm or danger, or the failure to facilitate access to appropriate medical care or treatment. It may also include neglect of or unresponsiveness to a person's basic emotional needs. Examples could include:

- Poor quality care
- Inadequate hygiene support
- Failure to ensure adequate hydration or nutrition
- Under or over use of medication
- Lack of privacy or dignity
- Serious Pressure Ulcer (grade 3 or 4)
- Failure of care due to inadequate equipment, systems, procedures or practice

Provider

This refers to all organisations, independent contractors and individuals who provide services that are commissioned by NHSBA, and extends to all their employees, locums and agency staff, sub-contractors, volunteers, students and learners undertaking any type of work experience placement or work related activity.

Safeguarding

Safeguarding means all work which enables an adult to retain independence, wellbeing and choice and to access their human right to live a life that is free from abuse and neglect.

ADSS (2005) Safeguarding Adults

Safeguarding work can include;

Prevention – actions which identify and reduce the risk of abuse, and

Adult protection – actions to protect someone who is experiencing abuse

APPENDIX B

BIBLIOGRAPHY

- 1 Association for Directors of Social Services (2005) Safeguarding Adults: A national framework for standards for good practice and outcomes in adult protection work.
- 2 Bradford District Multi-agency Adult Protection Policy and Procedures
- 3 Buckinghamshire County Council (1998) Independent Longcare Inquiry.
- 4 Data Protection Act (1998).
- 5 Department of Health (2004) Protection of Vulnerable Adults Scheme in England and Wales for care homes and domiciliary care agencies: A Practical Guide.
- 6 Disability Discrimination Act (2005).
- 7 Fraud Act (2006).
- 8 Human Rights Act (1998).
- 9 National Centre for Social Research and Kings College London. (2008) UK Study of Abuse and Neglect of Older People: Prevalence Survey Report.
- 10 Race Discrimination Act (1976).
- 11 Safeguarding Vulnerable Groups Act (2006).
- 12 NHS employment check standards (NHS Employers)

APPENDIX C

Roles & Responsibilities within NHSBA

<u>Role</u>	<u>Responsibilities</u>
All staff	<p>Working actively to identify and safeguard people who may be experiencing or at risk of abuse.</p> <p>Support and work within agreed Trust and multi-agency adult protection policy and procedures relevant to their role and responsibility.</p> <p>Attend safeguarding adults training appropriate to their role and responsibilities and draw any learning needs (in relation to safeguarding adults) to the attention of their manager.</p> <p>Take immediate action to minimise risk to adults where abuse is suspected.</p> <p>Reporting suspicion of abuse or neglect using organisational or multi-agency procedures.</p> <p>Report serious crimes or situations where a person is at immediate risk due to a crime to the police</p> <p>Reporting suspicions of fraud according to the Fraud and Corruption Policy.</p> <p>Reporting concerns to a senior Trust manager or via the (whistleblowing policy) where they feel unable to report to their Line Manager or remain concerned that the adult(s) is still at risk.</p> <p>Reporting concerns directly to the Adult Protection Unit (or the police if they believe a crime has been committed) when they feel unable to raise concerns within the organisation or believe that their concern has not been acted upon.</p> <p>Work within professional codes of practice.</p> <p>Identify the need for additional safeguarding advice and support and seek this from the Safeguarding Lead or Adult Protection Unit when required.</p>
Trust Board	<p>Ensuring that the Trust has effective systems and resources in place to meet its legal obligations, monitor safeguarding activity and to safeguard adults who may be at risk of or experiencing abuse, within commissioned services.</p> <p>To provide Board representation to the Audit and Governance Sub Committee.</p> <p>Identify a lead director with executive responsibility for</p>

	<p>Safeguarding Adults</p> <p>Undertake Safeguarding Adults Training appropriate to their role and responsibilities</p>
Chief Executive	<p>The Chief Executive is responsible for ensuring that the Trust Board and Non-executive Directors receive relevant information regarding safeguarding issues within the Trust and commissioned services, in order to inform the decisions of the Trust Board.</p>
Director of Nursing	<p>Ensure that the Trust has in place policy & Assurance systems to monitor the safeguarding performance of commissioned services.</p> <p>Provide executive leadership on safeguarding issues within commissioning.</p> <p>Ensure senior representation of commissioning on the Safeguarding Adults Board.</p>
Director of Human Resources or designated deputy	<p>Ensuring that Criminal Record Bureau checks are carried out on in accordance with legal requirements and national guidance.</p> <p>Ensure that concerns about staff are monitored and referred to the Independent Safeguarding Authority according to current national guidance and that HR systems are compliant with any succeeding legal requirements or guidance in respect of the protection of vulnerable adults.</p> <p>Ensuring that recruitment procedures comply with NHS Employment Check Standards and legal requirements in relation to the protection of adults.</p> <p>Ensure that systems are in place to monitor allegations against staff and to inform managers and other agencies in line with the Trust's legal requirements and agreed multi-agency policy and procedures.</p>
Quality/ Governance / Risk Managers	<p>To work with the Safeguarding Adults Lead to ensure that governance and risk management arrangements effectively monitor performance in relation to safeguarding adults.</p> <p>Work with the Safeguarding Adults Lead to identify safeguarding related issues and ensure that these are effectively managed where appropriate within the within the multiagency adult protection procedures.</p>
Managers	<p>Ensure the implementation of Trust and multi-agency safeguarding adult policy and procedures within their service.</p> <p>Ensure that safeguarding concerns are reported using</p>

	<p>organisational and multi-agency procedures.</p> <p>Identify support for staff who raise safeguarding concerns</p> <p>Identify potential safeguarding related risks within their area of responsibility and ensure that risks which cannot be managed are escalated to the corporate risk register.</p> <p>Ensure that systems are in place to monitor staff attendance on identified safeguarding adults training relevant to their role, according to agreed Trust guidelines.</p> <p>Ensure that implications for the safeguarding of adults is considered in all service developments.</p>
<p>NHSBA Safeguarding Adults Lead</p>	<p>Representing the Trust (commissioning) at the Safeguarding Adults Board and sub groups as required and reporting back any issues likely to impact on the Trust.</p> <p>Liaise with the Adult Protection Unit and advise the relevant Directors and Managers regarding cases of suspected abuse within their service.</p> <p>Liaise with Human Resources Department regarding the monitoring of safeguarding allegation against staff.</p> <p>Provide professional advice to the organisation and teams regarding Trust and multi-agency safeguarding procedures.</p> <p>Lead and support the development of safeguarding adults' documentation and practice across the organisation.</p> <p>Provide advice and support the commissioning and contract management process to ensure that commissioned services have appropriate safeguarding systems and monitoring in place.</p> <p>To inform the appropriate Board Sub-Committee of safeguarding adults' activity, practice development and potential risks via an annual report.</p> <p>Support and advise the work of Contract monitoring boards and clinical review groups.</p> <p>Contribute to the management of Serious untoward incidents</p> <p>Liaise with and advise risk management regarding corporate risk register in relation to safeguarding adults.</p>
<p>Audit & Governance Committee</p>	<p>To monitor Trust performance in relation to safeguarding on behalf of the Trust Board.</p> <p>To receive an annual report in relation to safeguarding adults' activity, risks and practice development.</p>

	To approve Trust policy and procedural documentation relating to safeguarding adult's.
Clinical Quality Governance & Risk Sub-Committee	To monitor the effectiveness of safeguarding adults systems and controls and make recommendations to the Audit & Governance Committee.

APPENDIX D.

TRAINING for NHSBA STAFF

1. Line Managers will identify the level of training appropriate for all posts with reference to Table 1.
2. As a minimum requirement, all new starters will attend the safeguarding introduction (Children & Adults) session as part of the central induction.

NHS Bradford and Airedale may also identify additional training for staff who:

- have regular contact with patients / service users
- review packages of care
- manage complaints or concerns
- review serious untoward incidents
- have Professional leadership roles
- have corporate responsibilities related to safeguarding

3. Staff may attend further safeguarding adults training appropriate to their specific role where this need is agreed as part of their Joint Development Review (See Table 1).
4. Line Managers are responsible for checking that staff have attended the required training as part of induction review (for new starters) and Joint Development Review processes.

Table 1.

NHS Bradford and Airedale – Safeguarding Adults Training		
Title	Duration	Target Audience
<u>Corporate induction: Safeguarding Children , Young People and Adults - key Messages</u>	20 mins	Mandatory for all new starters, including those who do not have regular contact with patients or the public.
<u>Recognising & Responding to abuse (Multi-agency)</u>	1 day	This is the minimum level of multiagency training available and is suitable for; <ul style="list-style-type: none"> • staff who have regular contact with patients or carers. • Case managers • Complaints and PALS managers • Staff in professional leadership roles • Professional staff responsible for conducting investigations or disciplinary procedures
<u>Service Managers Training (Multiagency training)</u>	2 day	This multiagency course is appropriate for managers of services or departments who provide care or services (Including case management) to patients.
<u>Team based training</u>	Various	Training may also be organised for specific teams of NHSBA staff according to need via the NHSBA Safeguarding Adults Lead

APPENDIX G - EQUALITY IMPACT ASSESSMENT TOOL

Stage One: Screening of a policy, procedure, strategy or restructure

<p>1. Name of policy, procedure, or strategy</p>	<p>Safeguarding Adults Commissioning Policy</p>	<p>2. Main Aims</p>	<p>To describe the expectations and standards required of all providers in relation to safeguarding adults who are experiencing or at risk of experiencing abuse.</p>
<p>3. Is it a policy, strategy, procedure or restructure?</p>	<p>Commissioning Policy</p>	<p>4. Who has been consulted thus far?</p>	<p>Strategic Health Authority Safeguarding Lead. Regional Safeguarding Adults Network (Commissioning)</p>
		<p>5. How has the policy been explained to those most likely to be affected directly or indirectly?</p>	<p>The standards have been developed in consultation with the Health Safeguarding Group (Local NHS Providers)</p>

Collecting and collating existing information and data

Please indicate in the table below whether the policy has the potential to impact adversely on the equality target groups		
Equality Target Group	1. Is the policy <i>likely</i> to have a potential negative impact with regards to the equality target group listed? 0 = No 1 = Little 2 = Medium 3 = High Please support your judgement with evidence in box 2	2. How have you arrived at the conclusions in box 1? i. Who have you consulted? (appropriate individuals/groups internally and externally) ii. What have they said? iii. What information/data have you interrogated? iv. Where are the gaps in your analysis
Age Older people Young people Children Early years	1	This policy applies only to people aged 18 or over. This policy sets the standards required of providers across all age groups. The equality statement (Section 5) gives a clear expectation of providers in relation to equality and diversity The minimum standards (Section 6) have been informed by reviews of local and national adult protection cases involving adults of all ages.

Disability	Sensory disabilities Physical disabilities Learning disabilities Mental health	1	<p>The equality statement (Section 5) gives a clear expectation of providers in relation to equality and diversity</p> <p>Section 5 also includes a requirement to ensure all reasonable endeavours to establish a person's preferred method of communication.</p> <p>The minimum standards (Section 6) have been informed by reviews of local and national adult protection cases involving adults with disabilities, including the 'Six lives' report from the Local Government ombudsman'.</p>
Gender	Men Women Transgender	1	No evidence of adverse impact
Race	Minority Ethnic Communities	1	Section 5 includes a requirement to ensure all reasonable endeavours to establish a person's preferred method of communication.
Religion or Belief	Christian Muslim Hindu Buddhist Sikh	1	The equality statement (Section 5) gives a clear expectation of providers in relation to belief and religion.

	Jew Other		
Sexual Orientation	Lesbian Gay Bisexual	1	No evidence of adverse impact

Summary

Please describe the main points arising from the initial screening here

This policy sets out standards expected of all providers in relation to safeguarding. It includes standards of safeguarding training, employment practices, governance and multiagency working and is underpinned by principles of personalisation, human rights, equality and diversity.

This policy formally builds safeguarding into contracts with our providers and requires a commitment to the work of the Safeguarding Adults Board and multiagency procedures which includes a wide range of stakeholders.

Section 5 gives a clear expectation of providers in relation to equality and diversity, including preferred methods of communication.

Is a Full Equality Impact Assessment Required?

No

Yes

How will the implementation of the policy be monitored?

NHSBA Contract monitoring processes

1. Signature of Policy Lead conducting impact assessment:

**2. Approved by Equality and Diversity Lead:
(Member of the equality and diversity team)**

Date:

Review Date: