Doncaster Safeguarding Adults Board

Procedure for Coordination of Overarching Safeguarding Enquiries

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Appendix 1    Threshold guidance for overarching enquiries

Appendix 2    Overarching Safeguarding Plan Template

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**Amendments since last version**

This procedure has been amended to reflect the terminology changes associated with the Care Act 2014, include the links between overarching safeguarding enquiries and the Contracts provider failure procedures, and include Making Safeguarding Personal.
1.0 Definition

An overarching safeguarding enquiry involves a set of circumstances where there are multi-agency or multi-professional safeguarding concerns which are complex, large scale, high profile or involve a whole service i.e. Care Home, a Home Based Care Service, a Hospital/Ward or other services.

2.0 Purpose

The purpose of an overarching safeguarding enquiry is to effectively coordinate and manage a number of safeguarding cases to achieve outcomes for adults at risk, prevent further abuse and minimise risk of re-occurrence. This procedure should be read in conjunction with the South Yorkshire Procedures for Safeguarding Adults which are available at http://www.doncaster.gov.uk/services/adult-social-care/safeguarding-adults-policy-and-procedures. This procedure should always run alongside individual enquiries ensuring the principles of Making Safeguarding Personal are embedded.

3.0 Threshold

A collaborative multi-agency/professional approach should be applied to the overarching safeguarding enquiry process. The number of safeguarding concerns or enquiries which constitute an overarching enquiry is deliberately not specified as the criteria relates to the complexity, uniformity and systematic or institutional nature of allegations.

A number and / or nature of safeguarding concerns or enquiries in short period of time may trigger an overarching enquiry based on the following considerations.

The following can be regarded as symptomatic but not definitive:

- Evidence of current basic health or care needs not being met.
- Embargos and cautions being applied by the Contracts Monitoring Team or other commissioning arrangements
- Difficulty in engaging with proprietors, managers or staff at the service.
- Multiple concerns to Care Quality Commission (CQC) and their responsive regulatory action within a short period of time.
- Rapid turnover of staff or managers within the service, leading to discontinuity of communication i.e. Acting Manager(s) in place.
- Possible transfer of ownership or responsibilities for the service.
- Issues concerning staff behaviour and attitudes.
- Frequent and / or repetitive challenging behaviour incidents and concern about the interactions of residents.
- Isolation of service from obvious support and concerns about lack of transparency.
- Service design and / or environmental concerns.
- Service is being stretched in meeting needs through capacity and capability e.g. Care Home without nursing appears to be trying to meet the needs of people who require nursing or hospital ward with insufficient staff to meet dependency and acuity needs.
- A number of criminal offences may have been committed.
Multiple breaches of the Health and Social Care Act 2008 may have occurred (this refers to the range of standards for which CQC are responsible). This list is not exhaustive and professional judgement must be applied.

The threshold for an overarching safeguarding enquiry may present at any point of the safeguarding process.

Where the need for such an enquiry becomes apparent, leadership, effective management and clarity of roles and responsibilities are vital.

It is the role of the Safeguarding Manager in consultation with the agencies involved to agree when the threshold for an overarching case is triggered. The Safeguarding Manager must notify the DSAB Safeguarding Adult Board Support Unit of the decision and record the action within the safeguarding adult process. (Refer to Appendix 1: Threshold guidance for overarching safeguarding enquiries)

Once a decision has been made to commence an overarching safeguarding enquiry a planning meeting will be held within 7 working days. This meeting will be initiated by the identified Senior Manager, following consultation with the Safeguarding Manager.

Where the concerns are related to provider failure, it may be more appropriate to manage through the DMBC Contracts Provider Failure Toolkit or alongside this procedure.

4.0 Terms of Reference

1. To risk manage the coordination of the enquiries at a strategic level and to provide clear guidance and instructions.

2. To ensure the safeguarding strategy in relation to each individual agency is well co-ordinated and delivers its action plan.

3. To receive reports and information, monitor progress, identify further areas for improvement and develop action plans as appropriate.

4. To ensure resources, knowledge and expertise are available to deliver the safeguarding plan.

5. To ensure inclusion of the appropriate people to this meeting as required.

6. To identify any emerging themes and trends.

7. To ensure a co-ordinated communication strategy is put in place to include the media.

8. To support contingency plans in the event of service closure.

9. To inform and update the Board

5.0 The Overarching Strategy Meeting
5.1 Who should attend

The Senior Manager in liaison with the Safeguarding Manager will determine the membership of the group. Consideration of the following people will be given;

- Safeguarding Adults Operational Team Manager
- Health and / or Social Care Commissioners (if commissioning placements)
- Safeguarding Lead CCG
- Commissioning Team – Contracts Monitoring Officer and / or Contract Officer
- CQC Lead Inspector
- Head of Service for Safeguarding Adults (when not acting in the Senior Manager role)
- The Police
- Any professional whose involvement is central to the allegations / alerts (eg. ambulance, fire service, GP, specialist nurse, social worker)
- Where relevant it may be appropriate to involve Children and Young Peoples Services i.e. residential services for children and adults
- DSAB Safeguarding Adults Business Support Unit admin support, requested from dsab@doncaster.gov.uk

The following are to be invited where appropriate to the issues identified;

- Legal representative depending on the nature of the concerns
- HR representative depending on the nature of the concerns
- Environmental Health
- Trading Standards
- Health and Safety
- Service Provider

5.2 Involving the Service Provider

A Service Provider could be a Care Home, Care Provider, Ward, Unit, Department or Service that is the subject of concern.

The involvement of the Service Provider is important to ensure an immediate safeguarding plan can be agreed however it may be necessary to hold an initial meeting without them if:
• The services’ staff and managers are under enquiries;
• There is a possibility that the provider may tamper with evidence, and;
• Specific advice not to invite is given by the Police or CQC.

If the provider is not invited based on the above, they must be informed that a meeting is taking place and that relevant information will be shared.

The service provider needs to supply a list of placing / funding authorities, to include those residents who are self-funding and the type of care commissioned. In addition they need to provide details about each resident / patient, including their full name, date of birth, GP, next of kin, information about capacity to understand the safeguarding process (and their room number if this is a Care Home), this is to mitigate against possibility of duplication.

5.3 The Meeting

The planning meeting should address key issues, including the processes for;

• Collating safeguarding enquiry information
• Collating risks and agreeing risk management plans
• Identification of themes or trends
• Ensure the right agencies are invited and are able to contribute
• Ensure each agency is clear about their respective responsibilities
• Agreeing approach / statements where media interest is present
• Ensure out of area arrangements are reflected and taken account of
• Ensure a collective communication plan is in place for service user and family members

The meeting will be minuted and records kept by the Safeguarding Adults Business Support Unit.

5.4 The Agenda

The agenda for the meeting will be determined by the Senior Manager and the following should be considered;

• The nature of the abuse under consideration
• Consider whether immediate intervention is required
• The position and views of the adults in the service
• Update on enquiry progress and activity
• Information regarding the alleged perpetrators
• Overarching risks and safeguarding plan  
• Whether a further meeting is required  
• Make recommendations to support commissioning actions  
• Agree an overarching communication plan i.e. Family and media interest

6.0 Overarching Safeguarding Enquiry Process

1. The process commences with the planning meeting

2. The outcome of the planning meeting will be the development of an Overarching Safeguarding Plan (refer to Appendix 2: Overarching Safeguarding Plan)

7.0 Roles and Responsibilities

1. The Safeguarding Manager when identifying the potential need for an overarching safeguarding enquiry process will make contact with a Senior Manager (with Safeguarding expertise) within their organisation.

2. The Senior Manager then confirms the need for an overarching safeguarding enquiry process (Refer to Appendix 1: Threshold guidance for overarching enquiries)

3. The Senior Manager will be responsible for the chairing of the meeting, effective co-ordination of the safeguarding enquiries and implementation of a communication strategy.

4. The appointment of a project officer is at the discretion of the Senior Manager and will be determined by the size and complexity of the enquiry. He / she will work closely with the Safeguarding Manager to undertake and ensure the co-ordination of all processes.

5. Those agencies participating in the overarching enquiry should maintain a communication link with the Senior Manager throughout this process. The Senior Manager will then liaise with the Safeguarding Manager or anyone else required.

6. Where the concerns meet the threshold for an overarching safeguarding enquiry a meeting should be convened within 7 working days. There may be exceptional circumstances where the meeting is arranged outside of this timescale, this should be agreed between the Safeguarding Manager and the Senior Manager.

8.0 Communication

It is crucial that a robust communication strategy is agreed as soon as the overarching safeguarding enquiry is commenced. It should ensure consistency and be flexible in order to manage changes in circumstances. The communication
strategy should be monitored, reviewed and evaluated at regular intervals by the Senior Manager and Safeguarding Manager to ensure its effectiveness.

It should identify the key stakeholders including providers, service users, their families and those who care about them, relevant local authority departments, staff, commissioners, DSAB partners, legal services, local politicians and links with communication officers in relation to managing the media interest.

The communication strategy should determine who needs to be informed, how and when. This may include a standard formatted letter and key messages to be provided to relatives and carers; provide link to Communications Teams around any potential media interest / release and update as necessary. The Senior Manager will be responsible for checking these actions have taken place and monitoring outcomes.

9.0 **Risk Management and the Overarching Safeguarding Plan**

This will need to be agreed within each meeting, named individuals within the meeting will be responsible for updating the Senior Manager on the outcome of their actions / interventions. This may be delegated to the project officer if appointed. A summary of the risk management and safeguarding plans will be required for all meetings.

10.0 **Record Keeping**

A copy of all records relating to overarching safeguarding meetings should be sent via secure email to the Safeguarding Adults Hub Business Support Unit at: 

**SABSU-GCSX@doncaster.gcsx.gov.uk**

All records received will be stored AS_Safeguarding / Cases / Overarching investigations.

All information should be sent via secure email in line with South Yorkshire Procedures for Safeguarding Adults and agencies own Information Governance Policies.
### Appendix 1

**Threshold Guidance for Overarching Enquiries**

<table>
<thead>
<tr>
<th>Level of concern</th>
<th>Circumstances</th>
<th>Actions Safeguarding</th>
<th>Actions Commissioning Team</th>
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</table>
| Minor            | - provider has a history of recent difficulties (poor care / complaints)  
- an individual safeguarding alert may indicate a wider concern  
- whilst unlikely there would be a medium impact on people if concerns applied widely across the home  
- the manager is complacent / not proactive in working to ensure preventions | Individual safeguarding meeting (s) – outcomes and action plan may lead to an overarching enquiry | Attend the individual safeguarding meeting  
Contract monitoring visit to check improvement under contract compliance |
| Moderate         | - a number of safeguarding alerts  
- low impact service shortfalls are almost certainly taking place and medium impact shortfalls are possible  
- there is a failure at a systems level to deliver service users outcomes across a range of needs  
- the manager is failing to identify and act on the above | Overarching safeguarding meeting held and followed up  
Action Plan developed and agreed with the Service, this action plan should include reporting and communication arrangements, outcomes & timescales. | Consideration of suspension / embargo of new placements  
Contract monitoring visit to feed into the overarching Safeguarding meeting and provision of a report outlining any concerns for the meeting  
Review of care needs of current service users  
Inform other commissioners  
Follow up contract monitoring to complete subsequent follow up visits  
Support with provider improvement plan |
<table>
<thead>
<tr>
<th>Level of concern</th>
<th>Circumstances</th>
<th>Actions Safeguarding</th>
<th>Actions Contract compliance</th>
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</table>
| Major            | - Abuse / neglect is evident  
- safeguarding Team/ Commissioners lack confidence in managers to deliver appropriate care and prevent abuse | Overarching safeguarding meeting held and follow up  
Action Plan required as in Moderate above | Consideration of suspension / embargo of new placement and /or termination of contract  
Review of care needs of current service users  
Regular Contract monitoring compliance visits – frequency to be agreed  
Feed into the overarching Safeguarding meeting and provision of a report outlining any concerns for the meeting.  
Inform assessment of risk to feed into multi-agency Quality and Risk Meeting  
Contract compliance to complete subsequent follow up visits  
Inform other commissioners and professionals |
| Persisting Major | - loss of confidence in the organisation  
- series of action plans relating to safeguarding concerns over a period of time but improvements not sustained  
- service users are at constant risk | Overarching safeguarding meetings at frequent intervals possibly every 2-3 week  
Meetings attended by managers and / or owners from the organisation  
Action Plan agreed with the Organisation | Consideration of suspension / embargo of new placements and /or termination of contract  
Review of care needs of current service users  
Regular Contract monitoring compliance visits – frequency to be agreed  
Feed into the overarching Safeguarding meeting and provision of a report outlining any concerns for the meeting. |
| Inform assessment of risk to feed into multi-agency Quality and Risk Meeting |
| Contract compliance to complete subsequent follow up visits |
| Inform other commissioners and professionals |
| Ensure communication and marketing teams are alerted and on standby for media interest |
### Overarching Safeguarding Plan

<table>
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<tr>
<th>Risk identified</th>
<th>Action identified</th>
<th>By whom (lead and agency)</th>
<th>By when</th>
<th>Date Achieved</th>
<th>Comments</th>
<th>Outcome</th>
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Appendix 2

- Action Completed
- Action Partially Completed
- Action not commenced/Significantly behind schedule