Doncaster Safeguarding Adults Partnership Board

Procedure for Coordination of Overarching Safeguarding Investigations

DOCUMENT CONTROL

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**Appendix 1**
- Threshold guidance for overarching investigations

**Appendix 2**
- Overarching Safeguarding Plan Template

**Appendix 3**
- Equality Impact Assessment
1.0 Definition

An overarching safeguarding investigation 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 investigation is to effectively coordinate and manage a number of safeguarding cases to achieve outcomes for vulnerable adults, prevent further abuse and minimise risk of re-occurrence. This procedure should be read in conjunction with the South Yorkshire Procedures for Safeguarding Adults http://www.proceduresonline.com/southyorks/sab/

3.0 Threshold

A collaborative multi-agency/professional approach should be applied to the overarching safeguarding investigation process. The number of safeguarding referrals which constitute an overarching investigation 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 referrals in short period of time may trigger an overarching investigation 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 alerts 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 investigation may present at any point of the safeguarding process.

Where the need for such an investigation 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 DSAPB Safeguarding Adult Unit of the decision and record the action within the safeguarding adult process. (Refer to Appendix 1: Threshold guidance for overarching safeguarding investigations)

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

4.0 Terms of Reference

1. To risk manage the coordination of the investigations 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
• Contract & Commissioning Team – Contracts Officer and / or Contract Compliance Officer
• CQC Lead Inspector
• Head of Service for Safeguarding Adults and Partnership (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 ie. residential services for children and adults

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, 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 investigation;
• 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 strategy meeting should address key issues, including the processes for;

- Collating investigation 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 DSAPB Safeguarding Adults 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 investigation 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 Investigation Process

1. The process commences with the strategy meeting

2. The outcome of the strategy 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 investigation 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 investigation process (Refer to Appendix 1: Threshold guidance for overarching investigations)

3. The Senior Manager will be responsible for the chairing of the meeting, effective co-ordination of the safeguarding investigations 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 investigation. 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 investigation 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 investigation 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 investigation 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, DSAPB 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 DSAPB Safeguarding Adults Unit at:

Adult.Protection-Admin@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.
# Threshold Guidance for Overarching Investigations

<table>
<thead>
<tr>
<th>Level of concern</th>
<th>Circumstances</th>
<th>Actions Safeguarding</th>
<th>Actions Contract compliance</th>
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<tbody>
<tr>
<td>Minor</td>
<td>- provider has a history of recent difficulties (poor care / complaints)</td>
<td>Individual safeguarding meeting (s) – outcomes and action plan may lead to an overarching investigation</td>
<td>Attend the individual safeguarding meeting</td>
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<td></td>
<td>- an individual safeguarding alert may indicate a wider concern</td>
<td></td>
<td>Complete a follow up visit to check improvement under contract compliance</td>
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<td>- whilst unlikely there would be a medium impact on people if concerns applied widely across the home</td>
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<td></td>
<td>- the manager is complacent / not proactive in working to ensure preventions</td>
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<tr>
<td>Moderate</td>
<td>- a number of safeguarding alerts</td>
<td>Overarching safeguarding meeting held and followed up</td>
<td>Contract Compliance visit prior to the overarching safeguarding meeting and provision of a report outlining any concerns for the meeting.</td>
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<td></td>
<td>- low impact service shortfalls are almost certainly taking place and medium impact shortfalls are possible</td>
<td>Action Plan developed and agreed with the Service, this action plan should include reporting and communication arrangements, outcomes &amp; timescales.</td>
<td>Contract Compliance to complete subsequent follow up visits</td>
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<td>- there is a failure at a systems level to deliver service users outcomes across a range of needs</td>
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<td>A decision on suspension / embargo of new placements</td>
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<td>- the manager is failing to identify and act on the above</td>
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<td>Inform other commissioners</td>
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<tr>
<td>Level of concern</td>
<td>Circumstances</td>
<td>Actions Safeguarding</td>
<td>Actions Contract compliance</td>
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| 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 | Suspension / embargo of new placements  
Contract Compliance visit prior to the service as in Moderate above and inform assessment of risk  
Contract Compliance to complete subsequent follow up visits  
Inform other commissioners |
| 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 | Suspension of new placements  
Consider termination of contract  
Consideration of care needs of current service users  
Regular Contract Compliance visits – frequency to be agreed  
Inform other commissioners  
Ensure communication and marketing teams are alerted and on standby for media interest |
### Overarching Safeguarding Plan

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<thead>
<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>
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Appendix 3 - Equality Impact Assessment

Completed by: Safeguarding Adults Team Manager Governance & Assurance
Title of Procedure: Procedure for Coordination of Overarching Safeguarding Investigations
Date of Assessment: 07/11/14
Lead Manager: Head of Service Safeguarding Adults & Partnership
This is: New Procedure

Give a brief summary of the Policy/Procedure/Service Area

Doncaster Safeguarding Adults Partnership Board are committed to promoting the health and well-being of vulnerable adults and to prevent harm wherever possible through: the promotion of a good understanding of safeguarding adult procedures amongst all multi-agency staff to identify the signs, or potential signs, of abuse and report into the system appropriately.

The purpose of an overarching safeguarding investigation is to effectively coordinate and manage a number of safeguarding cases to achieve outcomes for vulnerable adults, prevent further abuse and minimise risk of re-occurrence.

This procedure provides information for the benefit of a range of staff (multi-agency) who may be required to lead or contribute towards an overarching safeguarding investigation.

Who are the main stakeholders in relation to this policy?

Doncaster Safeguarding Adults Partnership Board (DSAPB)
Doncaster Clinical Commissioning Group (DCCG)
Doncaster Community Integrated Services (DCIS)
Doncaster Bassetlaw Hospitals NHS Foundation Trust (DBHFT)
Rotherham, Doncaster & South Humber NHS Foundation Trust (RDASH)
Doncaster Metropolitan Borough Council (DMBC)
South Yorkshire Fire and Rescue
St Leger Homes
Service Users, including their families and carers
Other statutory bodies, including the Police
Data Collection and Consultation - examples: equality profile of employees/community, data sources, research and consultation carried out, internal/external communications

The procedure was developed through a consultation process with all DSAPB statutory agencies who are required to adhere to the South Yorkshire Procedures for Safeguarding Adults.

Data collected in relation to overarching safeguarding investigations will include all Equality and Diversity strands. Records relating to the number overarching safeguarding investigations are held by the DSAPB Safeguarding Adults Unit and an annual report is produced by the DSAPB detailing statistical analysis around the number of safeguarding cases.

All information is regarded as confidential and each organisation will have their own safeguards and procedures for dealing with this.

What are the impacts for employees/community members?

Race and Ethnicity
The procedure for coordination of overarching safeguarding investigations is not expected to impact in any negative way on different racial or ethnic groups. It is predicted that this process will have a positive impact on the rights of vulnerable people at risk or potential risk of abuse or neglect.

Gender and Gender Re-Assignment (includes male, female, trans people)
The procedure for coordination of overarching safeguarding investigations does not discriminate on gender grounds. It is predicted that this policy will have a positive impact on the rights of all vulnerable people at risk or potential risk of abuse or neglect, irrespective of their gender.
**Disability** (Includes physical and/or mental impairment)
The procedure for coordination of overarching safeguarding investigations is expected to have a positive impact upon people with impairments through embedding a culture of safeguarding and learning from lessons within the organisation. Robust systems will facilitate the identification of abuse or potential abuse of vulnerable adults to ensure it is reported and acted upon proportionately.

It is about preventing abuse and neglect through the multi-agency management of risk, as well as promoting good practice for responding to concerns on a multi-agency basis.

It will take into account any barriers to communication and understanding.

**Sexual Orientation** (gay men, lesbians, bi-sexual people)
The procedure for coordination of overarching safeguarding investigations is not expected to impact in any negative way to a person due to sexual orientation. Data collected around an individual’s sexuality does not indicate that sexuality poses a higher risk of abuse or neglect.

**Religion and Belief** (includes religions, beliefs and people who have no religious belief)
The procedure for coordination of overarching safeguarding investigations is not expected to impact in any negative way on people due to their different religion or beliefs. It is predicted that this policy should have a positive impact on the rights of vulnerable people at risk of abuse or potential abuse.

**Age** (includes young people, older people)
The procedure for coordination of overarching safeguarding investigations is predominantly for the vulnerable adults including older people, however where children or young people are identified the procedure considers the appropriate children’s services. Local data indicates that older people and people with learning disabilities are at the highest risk of abuse.

**Community Interaction/Interface**
Relationships between or within communities
Not applicable

Other socially excluded communities and/or groups
All groups other than under 18s are included by the policy.

**Conclusions and Recommendations**
All Safeguarding Adults work is underpinned by the Human Rights Act (1998) which sets out the right to enjoy all the freedoms and rights without discrimination on the grounds of
race, sex, colour, language, religion, political or other opinion, national or social origin, association with a national minority, property, birth or other status. All current national guidance and regional procedures reflect the Human Rights Act (1998) and the equality and diversity requirements of the communities they serve.

The procedure for coordination of overarching safeguarding investigations relates to all people and does not exclude anyone. The intention of the policy is to protect vulnerable persons and groups, as identified in the equality areas, `especially those who may be more at risk of abuse or who may be in a more vulnerable position.

The procedure for coordination of overarching safeguarding investigations is not expected to impact in any negative way on people due to their different religion or beliefs. It is predicted that this policy should have a positive impact on the rights of vulnerable people at risk of abuse or potential abuse.

To reduce barriers to access and understanding the DSAPB has interpretation and translation support available (language line, pool of interpreters, including British Sign Language).

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<th>Action Plan</th>
<th>Timescales</th>
<th>Lead Manager</th>
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<td>November 2017</td>
<td>Head of Service Safeguarding Adults &amp; Partnerships</td>
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<td>The policy should be monitored by equality strands for any trends and appropriate actions developed, according to findings.</td>
<td>Annually</td>
<td>Head of Service Safeguarding Adults &amp; Partnerships</td>
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<tr>
<td>Collect data</td>
<td>Annually</td>
<td>Head of Service Safeguarding Adults &amp; Partnerships</td>
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Review Date ……November 2017…