

NAS Safeguarding Adults Policy

SO-0194

Please note this policy relates to adults over the age of 18 using any service provided by the National Autistic Society.

For children's safeguarding, please refer to SharePoint.

Throughout this policy, the term 'staff' refers to anyone working or volunteering on behalf of the National Autistic Society including senior managers, the board of trustees, paid staff, volunteers, sessional workers, agency staff and students.

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1. Purpose and Scope

Our aim at the National Autistic Society (NAS) is to ensure that the welfare of adults at risk of abuse or neglect is paramount in line with

- The Care Act 2014 (England)
- Social Services and Well-Being (Wales) Act 2014
- Adult and Support Protection (Scotland) Act 2007
- The Northern Ireland Adult Safeguarding Prevention and Protection In Partnership Policy Document 2015
- Safeguarding Vulnerable Groups (Northern Ireland) Order 2007.

Adults at risk should never experience abuse of any kind. NAS has a responsibility to promote the welfare of all adults at risk, to keep them safe and to practise in a way that protects them. All adults at risk, regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity have the right to equal protection from all types of harm or abuse. NAS will work in collaboration with adults at risk, their parents/ family members, carers, Local Authorities and other agencies and stakeholders to promote the welfare of adults at risk.

Our aim is to ensure that everyone at NAS knows and understands that safeguarding is their responsibility and concerns and incidents must be reported in accordance with policy and procedure.

This policy has been developed in context with the overall regulatory requirements to ensure that NAS has implemented appropriate measures to reduce the potential for abuse and/or neglect occurring, and take positive action when it is suspected or identified.

This policy provides guidance for staff in the prevention, reporting, investigation and action with regard to suspected abuse or neglect against adults at risk. The procedures for reporting concerns and protecting adults at risk must be applied in accordance with the local authority safeguarding policy and procedures where the adult at risk is located.

This policy outlines the framework for the adult services to meet their safeguarding duties and obligations, demonstrate best practice in relation to safeguarding and do everything it can to keep our adults at risk safe.

The policy is to be followed by:

- NAS Adult Residential Services
- NAS Adult Day Services
- NAS Adult Outreach Services
- NAS Supported Living Services
- NAS Resource Centres
- NAS National Programmes services/activities involving adults at risk, including but not limited to: helplines, support services, branches and fundraising
- Any other services provided by NAS which relate to or involve adults at risk

This policy applies to:

- This policy applies to anyone working on behalf of the National Autistic Society including senior managers and the board of trustees, paid staff, volunteers, sessional workers, agency staff and students.
- This policy applies to services in all four nations covered by the National Autistic Society (England, Wales, Scotland and Northern Ireland)

This policy is overarching and, together with the Safeguarding Children in Children's Services and Safeguarding Children in Education, overrides all other company policies and procedures.

This policy applies to all adults at risk over the age of 18 years whether living with their families, in state care, or living independently with or without support. Whilst the specific statutory legislation differs across the devolved nations, the principals remain the same.

Adults at risk include:

- People with care and support needs such as the elderly or those with disabilities. They may be seen as an easy target to abuse and be less likely to be able to identify or report abuse.
- People with communication difficulties can be particularly at risk because they may not be able to report the abuse to others.

Safeguarding adults at risk and promoting their welfare means:

- Protecting the rights of adults at risk from to live in safety, free from abuse or neglect.
- Preventing harm and reducing the risk of abuse or neglect to adults with care and support needs.
- Stopping abuse and neglect wherever possible.
- Safeguarding adults in a way that supports them in making choices and having control about how they want to live.
- Promoting an approach that concentrates on improving lives for the adults involved.
- Providing information and support in accessible ways to help people understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or well-being of an adult.
- Addressing what has caused the abuse or neglect.
- Working together with professionals, wider organisations and other people to prevent or stop the risks and incidents of abuse.
- Ensuring that the adult's wellbeing is promoted including having regard to their view, feelings, wishes and beliefs in deciding any actions.
- Recognising that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances.

- Preventing wherever possible impairment of the health of adults at risk
- Ensuring that adults at risk are living in circumstances consistent with the provision of safe and effective care, and
- Acting to enable all adults at risk to have the best outcomes.

Adult protection is defined as being part of safeguarding and promoting welfare. It is the work done to protect specific adults at risk who are suffering, or are likely to suffer, significant harm. Adult protection is about the protection of adults at risk from violence, exploitation, abuse, neglect and radicalisation.

2. Introduction

There are 10 categories of adult abuse which include physical abuse, emotional/ psychological abuse, sexual abuse, neglect/ acts of omission, domestic abuse, financial/ material abuse, modern slavery, discriminatory abuse, organisational/ institutional abuse and self-neglect.

We believe that:

- people we support should never experience abuse or neglect of any kind
- we have a responsibility to promote the welfare of all people we support, to keep them safe and to practise in a way that protects them.

We recognise that:

- the welfare of people we support is paramount in all the work we do and in all the decisions we take
- working in partnership with people we support, their parents, carers and other agencies is essential in promoting their welfare
- all people we support, regardless of age, disability, gender reassignment, race, ethnicity, religion or belief, sex, or sexual orientation have an equal right to protection from all types of harm, abuse or neglect.
- some people we support are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues.
- extra safeguards may be needed to keep people that we support who are additionally vulnerable safe from abuse. These should be appropriate, proportionate and the least restrictive.

We will seek to keep people we support safe by safe by:

- valuing, listening to and respecting them
- appointing a Safeguarding Lead, a Safeguarding Advisor for Adult Services, a Safeguarding Advisor for National Programmes, a lead trustee/board member for safeguarding and an Independent Safeguarding Board
- adopting adult safeguarding best practice through our policies, procedures and code of conduct for staff and volunteers

- developing and implementing an effective online safety policy and related procedures
- providing effective management for staff and volunteers through supervision, support, training and quality assurance measures so that all staff and volunteers know about and follow our policies, procedures and behaviour codes confidently and competently. In partnership with recruiting and selecting staff and volunteers safely, ensuring all necessary checks are made
- recording and storing and using information professionally and securely, in line with data protection legislation and guidance [more information about this is available from the Information Commissioner's Office: ico.org.uk/fororganisations]
- sharing information about safeguarding and good practice with people we support and their families via leaflets, posters, group work and one-to-one discussions
- making sure that people we support and their families know where to go for help if they have a concern
- using our safeguarding procedures to share concerns and relevant information with agencies who need to know, and involving people we support, parents, families and carers appropriately
- using our procedures to manage any allegations against staff and volunteers appropriately
- creating and maintaining an environment where peer-on-peer abuse is not tolerated and ensuring that we have a policy and procedure to help us deal effectively with any peer-on-peer abuse that does arise
- ensuring that we have effective complaints and whistleblowing measures in place
- ensuring that we provide a safe physical environment for the people we support, staff and volunteers, by applying health and safety measures in accordance with the law and regulatory guidance
- building a safeguarding culture where staff and volunteers, people we support and their families, treat each other with respect and are comfortable about sharing concerns.
- working collaboratively with external professionals to keep people safe, in line with key legislation. This may involve supporting and contributing to investigations conducted by police, local authority teams or regulators.

Staff responsibilities in relation to safeguarding include:

- Assessing the situation.
- Ensuring the safety and wellbeing of the adult at risk.
- Establishing the viewpoint, thoughts and wishes of the adult at risk in relation to the safeguarding issue and the procedure.
- Maintain any evidence.
- Follow NAS procedures for reporting incidents/ low level concerns/ safeguarding notifications.

- Remain calm, try not to display any signs of shock or disbelief to the adult at risk.
- Listen carefully to the adult at risk and demonstrate understanding.
- Inform the adult at risk that need will need to share information. Explain to them what information will be shared and why.
- Clearly record the incident/ allegation using the actual words of the adult at risk, what the staff member has seen and the actions they have taken.
- To follow the 6 Key Principles of Safeguarding.

This policy must be read in conjunction with:

- Relevant Local Authority Social Services Safeguarding policies / relevant procedures outlined by the Local Safeguarding Adults Boards/ Local Authorities / Health Trusts or other relevant Statutory or Regulatory Bodies.

3. Legal Framework

This policy has been drawn up on the basis of legislation, policy and guidance that seeks to safeguard adults in England/Wales/Scotland/Northern Ireland. This policy should be read in conjunction with the key pieces of legislation in bold for each nation as a minimum. A list of key pieces of legislation follows, however this list is not exhaustive.

England

- **The Care Act 2014**
- Mental Capacity Act 2005 and Mental Capacity (Amendment Act) 2019 (including introduction of Deprivation of Liberty Safeguards (DOLS))
- Safeguarding Vulnerable Groups Act 2006.
- Health and Social Care Act 2012.
- Equality Act 2010.
- Human Rights Act 1998.
- Data Protection Act 2018.
- Public Interest Disclosure Act 1998.
- Domestic Abuse Act 2021
- Immigration Act 2016
- Fraud Act 2006
- Protection from Harassment Act 1997
- Serious Crime Act 2015
- Mental Health Act 1998
- Sexual Offences Act 2003

Wales

- **Social Services and Well Being (Wales) Act 2014.**
- Wellbeing of Future Generations (Wales) Act 2015
- Human Rights Act 1998
- Violence Against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015
- Serious Crime Act 2015
- Domestic Abuse Act 2021
- Mental Capacity Act 2005 and Mental Capacity (Amendment Act) 2019 (including introduction of Deprivation of Liberty Safeguards (DOLS))
- Data Protection Act 2018
- Protection from Harassment Act 1997
- Fraud Act 2006
- Equality Act 2010
- Immigration Act 2016
- Mental Health Act 1998
- Sexual Offences Act 2003

Scotland

- **Adult and Support Protection (Scotland) Act 2007**
- Regulation of Care (Scotland) Act 2001
- Human Rights Act 1998
- Adults with Incapacity (Scotland) Act 2000
- Mental Health, Care and Treatment (Scotland) Act 2003
- The Adult Support and Protection (Scotland) Act 2007
- Forced Marriage (Protection and Jurisdiction) (Scotland) Act 2011
- Domestic Abuse (Scotland) Act 2011
- Protection of Vulnerable Groups (Scotland) Act 2007
- Abusive Behaviour and Sexual Harm (Scotland) Act 2016

Northern Ireland

- **The Northern Ireland Adult Safeguarding Prevention and Protection In Partnership Policy Document 2015**
- Safeguarding Vulnerable Groups (Northern Ireland) Order 2007
- Protection of Freedoms Act 2012
- Human Rights Act 1998
- The Mental Capacity Act (Northern Ireland) 2016

- Mental Health (Northern Ireland) Order 1986
- The Domestic Abuse and Civil Proceedings Act (Northern Ireland) 2021
- The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003
- The Sexual Offences (Northern Ireland) Order 2008

4. Supporting Documents

This policy statement should be read alongside our organisational policies, procedures, guidance and other related documents:

- Role Description for Safeguarding Lead and Safeguarding Advisors, Nominated Individual, Responsible Person, Responsible Individual.
- Safeguarding Children Policy
- Safeguarding Children and Young People in Education
- Whistleblowing Policy
- NAS E-Safety Policy
- Data Protection Policy
- Information Security Policy
- Deprivation of Liberty Safeguards Policy
- Missing Adult Policy
- Support Planning Adults Policy
- Suicide and Self- Harm Policy
- Supporting People to Manage Their Money Safely Policy
- Medication Policy
- Positive Behaviour Support Policy
- Use of Restrictive Practice in NAS Schools and Services Policy
- Alcohol, Drugs and Solvent Abuse Policy
- Health, Mental Health and Wellbeing Adults Policy
- Health and Safety Policy
- Investigation Policy and Procedure
- Recruiting and Managing Volunteers Policy
- Recruitment and Selection Policy
- Disclosure and Barring Service Policy
- Scottish Protecting Vulnerable Groups Scheme Policy
- Conduct and Capability Policy
- Equal Opportunities and Diversity Policy
- Fairness and Dignity at Work Policy
- Induction and Probation Policy and Procedure
- Anti – Slavery Policy
- Learning and Development Policy
- First Aid Policy
- Complaints Resolutions Policy Adult Services
- Social Media Policy

5. Safeguarding Statement

If staff or a volunteer observes, or are made aware of any instance where abuse has/ is suspected to have occurred/ there is a significant risk may occur, they have a

professional responsibility to bring this to the immediate attention of their manager or appropriate senior staff as set out in local procedure. Following this, the facts will be investigated in line with the appropriate procedures, and any matter which continues to raise concerns or is likely to be detrimental to the interests of the people we support or appears to breach an individual's rights will result in a suitable plan of action to stop this from continuing to happen.

In all cases of abuse, NAS will seek to ensure that the appropriate authorities are notified within a 24-72 hour period, depending on the severity and urgency of the situation (for Northern Ireland – within 24 hours to RQIA), this may include contact with the police to determine if a criminal offence has been committed. All safeguarding matters will be reported to the relevant and appropriate external agencies including:

- The Police (Public Protection Team/Appropriate Adult) where applicable.
- The Local Authority Safeguarding Team.
- Care Quality Commission (England)
- Care Inspectorate (Wales)
- Care Inspectorate (Scotland)
- Mental Welfare Commission (Scotland)
- SSSC (who in turn will notify the appropriate Scottish Minister)
- Social Worker/Care Manager - Northern Ireland
- Designated Adult Protection Officer (DAPO) of the specific HSC Trust – Northern Ireland

All Services must have an up to date copy of their local multi-agency guidelines on the safeguarding of adults, and these must be followed.

6. Six Key Principles of Safeguarding

There are six recognised key safeguarding principles:

1. **Empowerment:** a presumption of person-led decisions and informed consent.
2. **Protection:** support and representation for those in greatest need.
3. **Prevention:** it is better to act before harm occurs.
4. **Proportionality:** a proportionate and least intrusive response appropriate to the risk presented.
5. **Partnership:** local solutions achieved via services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.
6. **Accountability:** accountability and transparency in delivering safeguarding.

The key principles from the perspective of the adult at risk:

1. **Empowerment:** I am consulted about the outcomes I want from the safeguarding process and these directly inform what happens.
2. **Protection:** I am provided with help and support to report abuse. I am supported to take part in the safeguarding process to the extent to which I want to do so and to which I am able.
3. **Prevention:** I am provided with easily understood information about what abuse is, how to recognise the signs and what I can do to seek help.
4. **Proportionality:** I am confident that the responses to risk will take into account my preferred outcomes or best interests.
5. **Partnership:** I am confident that information will be appropriately shared in a way that takes into account its personal and sensitive nature. I am confident that agencies will work together to find the most effective responses for my own situation.
6. **Accountability:** I am clear about the roles and responsibilities of all those involved in the solution to the problem.

What these principles mean for the NAS:

1. **Empowerment:** we give individuals relevant information about recognising abuse and the choices available to them to seek to ensure their safety. We give them clear information about how to report abuse and crime, and any necessary support in doing so. We consult them before we take any action. Where someone lacks capacity to make a decision, we always act in his or her best interests.
2. **Protection:** our local reporting arrangements for abuse and suspected criminal offences, along with our risk assessments, work effectively. Our governance arrangements are open and transparent and communicated to the people we support.
3. **Prevention:** we can effectively identify and appropriately respond to signs of abuse and suspected criminal offences. We make staff aware, through provision of appropriate training and guidance, of how to recognise signs and take any appropriate action to prevent abuse from occurring.
4. **Proportionality:** we discuss with the individual and where appropriate with partner agencies the proportionality of possible responses to the risk of significant harm before we take a decision. Our arrangements support the use of professional judgement and the management of risk.
5. **Partnership:** we have effective local information-sharing and multi-agency partnership arrangements in place and staff understand these. We foster a 'one team' approach that places the welfare of individuals above organisational boundaries.
6. **Accountability:** the roles of all agencies are clear, together with the lines of accountability. Staff understand what is expected of them and others. The NAS recognises its responsibilities, acts upon them and accepts collective responsibility for safeguarding arrangements.

7. Safeguarding and Mental Capacity

England and Wales

NAS adheres to the five statutory principles outlined in the Mental Capacity Act 2005 and safeguarding in England and Wales:

- **The presumption of capacity** - Every adult that we support has the right to make their own decisions and must be assumed to have capacity to do so unless it is proved otherwise. This means that you cannot assume that someone cannot make a decision for themselves just because they are autistic, have a particular medical condition or disability.
- **Individuals being supported to make their own decisions** - A person must be given all practicable help before anyone treats them as not being able to make their own decisions. This means you should make every effort to encourage and support people to make the decision for themselves. If lack of capacity is established, it is still important that you involve the person as far as possible in making decisions.
- **Unwise decisions** - People have the right to make decisions that others might regard as unwise or eccentric. You cannot treat someone as lacking capacity for this reason. Everyone has their own values, beliefs and preferences which may not be the same as those of other people.
- **Best interests** - Anything done for or on behalf of a person who lacks mental capacity must be done in their best interests.
- **Least restrictive option** - Someone making a decision or acting on behalf of a person who lacks capacity must consider whether it is possible to decide or act in a way that would interfere less with the person's rights and freedoms of action, or whether there is a need to decide or act at all. Any intervention should be weighed up in the particular circumstances of the situation.

Summary of principles adapted from

<https://www.scie.org.uk/mca/introduction/mental-capacity-act-2005-at-a-glance>

Northern Ireland

NAS adheres to the five statutory principles laid out in the Mental Capacity Act (Northern Ireland) 2016 and safeguarding:

No-one should be treated as lacking capacity unless proven they do - A person who is thinking about carrying out a deprivation of liberty must not misinterpret the first Principle as requiring them to presume or assume that the person has capacity or that the person lacks capacity. The Principle places the onus on a person intending to carry out the deprivation of liberty to have properly established a person's capacity. However, the starting point when establishing capacity should be that the person has capacity.

No assumptions can be made - This Principle forbids any assumptions based merely on any condition that the person has or any other characteristics of the person.

Such a condition or characteristic may be a disability, age, appearance, physical or mental illness or anything else. Just because a person presents symptoms of a condition that often, or sometimes, can suggest a person lacks capacity cannot be used as the reasoning for establishing or concluding that the person lacks capacity.

Help and support must be provided – This principle requires that anyone who is considering whether a person lacks capacity must consider and provide all practicable help and support to allow the person to make their own decision.

No determination of lack of capacity can be made until all practicable help and support has been provided.

This helps individuals to play as big a role as possible in the decision-making process to retain as much autonomy as possible.

No assumptions can be made because of unwise decisions - All persons have their own wishes, feelings, beliefs and values. No one should be assumed to lack capacity just because they make a decision that to others may appear unwise.

This applies even if family members, friends, health and social care staff or others are unhappy with the decision. Unwise decisions are even allowed if the decision is one that could have negative effects on the person making the decision.

All acts and decisions must be made in the person's best interests - The person determining best interests is required, so far as is practicable, to encourage and help the person to participate as fully as possible in the decision-making process.

Special regard must be given to the person's values and beliefs, and past and present wishes and feelings.

The person determining best interests must also consult with others and take into account their views as to what would be in the best interests of the person who lacks capacity.

The person determining best interests must also have regard to any less restrictive alternatives to the proposed deprivation of liberty.

Summary of principles from <https://www.health-ni.gov.uk/mca-principles>

Scotland

NAS adheres to the five statutory principles of the Adults with Incapacity (Scotland) Act 2000 and safeguarding:

- **Benefit the adult** – any action or decision must be beneficial to the person and must only be taken when the benefit cannot be achieved without it.
- **Be the least restrictive option** – any action or decision taken should be the minimum necessary to achieve the purpose and should restrict the person's freedom as little as possible.
- **Take account of the wishes of the person** – the past and present wishes and feelings of the person should be taken into account as far as possible and the person must be offered in communicating their views.

- **Take account of the views of others with an interest in the person's welfare** – this includes the person's primary carer, nearest relative, named person, attorney or guardian.
- **Encourage the person to exercise existing skills and develop new ones** – the person should be encouraged to participate by using any skills they have relating to property, financial affairs or personal welfare and to develop new skills if possible.

Summary of principles taken from <https://www.headway.org.uk/media/2783/a-guide-to-the-adults-with-incapacity-scotland-act-factsheet.pdf>

All Nations

It is inevitable that there will be times when an adult that we support, who has capacity, decides to accept a situation that may be perceived as potentially abusive or neglectful. This is a decision that they have the right to make, unless:

- other people are being put at risk (for example, letting friends who are abusive or exploitative into a shared living environment, where they may put other residents at risk)
- a child is involved
- the alleged perpetrator has care and support needs and may also be at risk
- a serious crime has been committed
- staff are implicated
- coercion is involved.

In these situations, we would have a duty to act and report concerns. In regard to the Data Protection Act 2018 and The General Data Protection Regulations 2018, please note these do not supersede safeguarding concerns, therefore you are able to share concerns about a safeguarding matter within the service or externally. You won't need the individual's consent to share the information in most circumstances.

If you believe that a person with capacity is acting in a way that is a risk only to their own safety or wellbeing, and they are not being unduly influenced by anyone else, then you may decide not to intervene and not to share safeguarding information with other partners. A decision not to intervene must be discussed with the appropriate manager or NAS Safeguarding Lead. If a decision not to intervene is made, then the following steps must be taken:

- support the person to weigh up the risks and benefits of different options
- make sure that they are aware of the level of risk and possible outcomes,
- agree on the level of risk they are taking
- offer to arrange an advocate or peer supporter for them, if they would like this
- offer support for them to build their confidence and self-esteem, if it appears relevant

- record your reasons for not intervening or sharing information, including every detail of your assessment of the person's capacity and of your conversations with them about the potential risks posed by their chosen action
- review the situation regularly
- make sure that they understand where they can go if they want to seek help in the future
- try to build trust and use your professional skills and the relationship you have with the person to make it possible for them to better protect themselves, encouraging them to continue the conversation with other people who they trust, such as family members, friends and other professionals.

It may be necessary to share information about the person with capacity outside your organisation without their consent, if other people's safety is potentially at risk. If this is the case, discussion with the appropriate manager or NAS safeguarding lead must be held as to sharing the information.

If information needs to be shared without consent, if as long as it does not increase the risk to the person, they should be informed that you will share their information, and why. You should also:

- explore the reasons for their objections and find out what their concerns are
- explain why you are concerned about them and why you think it is important to share the information
- tell them who you would like to share it with and why
- explain what the benefits may be to the person of sharing information about them
- discuss the potential consequences of not sharing the information
- reassure them that their information will not be shared with anyone who does not need to know

Please note that in line with the Adults with Incapacity Act (Scotland) 2000, all staff supporting an individual in NAS Scotland services must have records detailing an individual's welfare guardian, where this is relevant, and are required to liaise with the welfare guardian appropriately in relation to an individual's care delivery.

8. Safeguarding and Deprivation of Liberty

The Deprivation of Liberty Safeguards (DoLS) are an amendment to the Mental Capacity Act 2005. **They apply in England and Wales only.** They provide additional safeguards if the restrictions and restraint used to keep a person lacking mental capacity safe will deprive that person of their liberty within a care home or hospital setting. These settings must ask the permission from the Local Authority to deprive people of their liberty if they are subject to continuous supervision and control and are not free to leave. Where NAS thinks it needs to deprive someone of their liberty they have to ask for this to be authorised by the Local Authority which provides funding for the placement. They can do this up to 28 days in advance of when they plan to deprive the person of their liberty. NAS must fill out a form requesting a

standard authorisation. This is sent to the Local Authority which has to decide within 21 days whether the person can be deprived of their liberty.

The supervisory body appoints assessors to see if the conditions are met to allow the person to be deprived of their liberty under the safeguards. They include:

- The person is 18 or over (different safeguards apply for children).
- The person is suffering from a mental disorder.
- The person lacks capacity to decide for themselves about the restrictions which are proposed so they can receive the necessary care and treatment.
- The restrictions would deprive the person of their liberty.
- The proposed restrictions would be in the person's best interests.
- Whether the person should instead be considered for detention under the Mental Health Act.
- There is no valid advance decision to refuse treatment or support that would be overridden by any DoLS process.

If any of the conditions are not met, deprivation of liberty cannot be authorised. This may mean that the care home has to change its support plan so that the person can be supported in a less restrictive way.

If all conditions are met, the Local Authority must authorise the deprivation of liberty and inform the person and NAS in writing. It can be authorised for up to one year. NAS adheres to the principles of the MCA 2005 and the amendments to include DoLS and seeks DoLS authorisations from the relevant Local Authorities for any person being supported who has been assessed to lack mental capacity to make decisions about their support and care, who is subject to continuous supervision and controls and is not free to leave the service.

The Deprivation of Liberty Safeguards are part of the Mental Capacity Act (Northern Ireland) 2016. They provide additional safeguards when a person is in a place where care or treatment is being provided, a person is not free to leave and a person is under continuous supervision and control. If someone wants to deprive a person of liberty they must make sure the following safeguards are in place:

- They must believe that the person lacks the mental capacity to decide about the deprivation of liberty and must write this down on a statement of incapacity.
- They must believe that a deprivation of liberty is in the person's best interests and write this down.
- They must believe that a deprivation of liberty will help prevent serious harm coming to the person or serious physical harm to other people.
- They must consult a nominated person.
- They must have an authorisation for the deprivation of liberty. NAS adheres to this legislation.

9. Safeguarding Procedures

The NAS will adhere to the following procedures in relation to adult protection, these are outlined in detail in the policy.

- We will follow the procedures set out by the Local Safeguarding Adult's Board (LSAB) / Local Adults Social Services / Designated Adult Protection Officer (DAPO) of the specific HSC Trust in the area in which the service is located and take account of guidance issued by the appropriate government department or regulatory body.
- Seek to ensure we have an organisational nominated lead responsible for safeguarding adults; Nominated Individual and Safeguarding Lead
- Seek to ensure every member of staff (including temporary and agency staff and volunteers) and the Board of Trustees knows the name of the appropriate manager in their service or the contact details of the Nominated Individual and Safeguarding Lead and understands their role in safeguarding.
- Seek to ensure all staff and volunteers understand their responsibilities in being alert to the signs of abuse and neglect and maintain an attitude of "it could happen here."
- Seek to ensure all staff and volunteers understand their responsibility for referring any concerns to the appropriate manager or Nominated Individual and Safeguarding Lead and are aware that they may raise concerns directly with Adult's Social Care Services if they believe their concerns have not been listened to or acted upon.
- Seek to ensure that those who use our services and or their carers / advocates, (where appropriate) understand the responsibility placed on the service and staff for safeguarding by setting out its obligations in the service welcome pack or user guide and publish the policy on the NAS website;
- Operate a vetting policy which seeks to ensure the suitability of staff working with vulnerable adults at all times.
- Develop effective links with relevant agencies and co-operate as required with their enquiries regarding safeguarding matters including attendance at strategy meetings, initial case conference, core groups and review meetings;
- Seek to ensure that the duty of care towards the people supported by the NAS and staff is promoted by raising awareness of illegal, unsafe and unwise behaviour and assist staff to monitor their own standards and practice;
- Keep written records of concerns about adults we support, even where there is no need to refer the matter immediately;
- Seek to ensure any Safeguarding data is sent in line with The General Data Protection Regulations and any documents sent externally are password protected.
- Seek to ensure all safeguarding records are kept securely, separate from the main file, and in locked locations;
- Seek to ensure that all safeguarding files are transferred in a safe and timely manner when an adult moves or changes service.

- Be aware of and follow procedures set out by Adult Social Services and the LSAB where an allegation is made against a member of staff or volunteer, including making a referral to the DBS / PVG / Access NI if a person in regulated activity has been dismissed or removed due to safeguarding concerns, or would have been had they not resigned. Such referrals will always be given priority and will be done promptly and made within at least one month of the person leaving our employment.
- Seek to ensure that the appropriate training in Safeguarding is provided to the Board of Trustees and appropriate members of staff across all our services
- Seek to ensure a review of the adult safeguarding policies and procedures is undertaken and monitor the efficiency with which the related duties have been discharged in accordance with current legislation. An annual safeguarding report will be produced for the Board of Trustees by the Nominated Individual and Safeguarding Lead.
- Our procedures will be reviewed and updated regularly and at least annually.

10. Staff and Volunteers' Roles and Responsibilities

All NAS Staff and Volunteers

- To follow this policy and ask questions if not sure about any aspect of this policy.
- To be aware that abuse does happen; to always remain alert to the possibility of abuse and ready to act upon information that you receive or signs of abuse you see or hear about.
- To be aware of the early warning signs of potential abuse situations and the possible signs of abuse.
- To notify a Manager or Area Manager or Nominated Individual and Safeguarding Lead if there is any reason to suspect that someone has been or may be the subject of abuse.
- To maintain a professional confidential approach in line with NAS Equal Opportunities Policy when dealing with the person supported and any other person who may be involved.
- To seek to ensure good communication of observations are made in writing.
- To actively teach those we support about how to keep themselves safe (including online) through practical teaching and learning opportunities.
- To challenge any practice that does not fit with NAS Values.

Director of Adult Services, Director of National Programmes and Director of Assurance and Compliance

- Ratify this policy annually to seek to ensure it conforms to relevant law and guidance

- The Director of Adult Services has overall responsibility for ensuring that there are sufficient and appropriate measures in place to safeguard the people supported in Adult Services
- Seek to ensure that resources are available to seek to ensure that staff have skills, knowledge and understanding necessary to keep those we support safe.
- To act on any trends / themes or significant occurrences that are identified.

NAS Nominated Individual and Safeguarding Lead

- To take leadership responsibility for the Charity's safeguarding arrangements and report to the relevant subcommittee of the Board of Trustees and the Independent Safeguarding Committee
- To promote a culture of listening to those we support and taking account of their wishes and feelings, both in individual decisions and the development of services
- To seek to ensure there are clear whistleblowing procedures and a culture that enables issues about safeguarding and promoting the welfare of those we support to be addressed
- To seek to ensure there are clear escalation policies for staff to follow when safeguarding concerns are not being addressed within their service or by other agencies
- To seek to ensure safer recruitment practices and ongoing safe working practices are followed by adult services
- To create a culture of safety, equality and protection within services

Area Managers

- Seek to ensure all relevant staff are aware of this policy, receive appropriate training are aware of the services' local procedures to support safeguarding and follow this policy and procedures
- Seek to ensure safe recruitment practices are always followed
- Seek to ensure effective reporting to both the Director of Adult Services and Nominated Individual and Safeguarding Lead as and when required.
- To seek to ensure appropriate duty of care to employees and minimise the stress inherent in the investigation process.
- To seek to ensure that Service Managers are equipped with the appropriate skills to support and manage safeguarding procedures in their service.

Safeguarding and Concerns Manager

- Will liaise with services and assist staff with their safeguarding duties
- Liaising with the Area Manager to inform them of issues, especially ongoing safeguarding enquiries.

- Acting as a source of support, advice and expertise to staff on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies.
- Bulk report to the Charity Commission
- Produce data and reports for SMG, SQDC and the Independent Safeguarding Board
- Liaise with other teams to seek to ensure that there is a comprehensive oversight of safeguarding concerns, complaints and issues with quality of service

Ensuring that where concerns are raised that they have been (where relevant):

- referred cases of suspected abuse to the local authority / Trust safeguarding teams
- raised with the funding authority
- concerns have been reported to the regulatory authority where appropriate
- reported where a crime may have been committed to the police.
- That capacity has been considered
- That a protection plan has been developed
- report incidences where a person is dismissed or left due to risk/harm to the DBS

Safeguarding Advisors (Advisors for Adults Services and National Programmes)

- To seek to ensure Adult Services/National Programmes safeguarding arrangements are effectively supported and implemented, based on adherence to compliance requirements and a strong, shared culture of safeguarding.
- To take a lead operational role in developing and reviewing the safeguarding policies and procedures to ensure they reflect any internal changes in practice or revised statutory guidance.
- To advise on safeguarding concerns and support NAS staff and volunteers in their interaction with the local statutory safeguarding partners and other external professionals.
- To act as mentor to individual managers and colleagues in complex safeguarding cases.
- To support the High Risk Assessment and Panel Process alongside the Safeguarding Lead/Nominated Individual.
- To seek to ensure that safeguarding plans and arrangements are personalised to the people we support.
- To report relevant data to the Nominated Individual and Safeguarding Lead, Adult Services/National Programmes Director, and Director of Assurance and Compliance.
- To chair the admissions Panel for new referrals to services for those with complex needs who may be particularly vulnerable to the risk of harm.

- To promote a whole service networked approach to safeguarding across the four nations taking account of differences in legal requirements.
- To lead, maintain and develop on ensuring effective recording of incidents and maintaining a centralised safeguarding database.

Nominated Safeguarding Lead Trustee Responsibilities

- To attend meetings of the Independent Safeguarding Board as Board (trustee) representative.
- To support the chairs of relevant board sub committees understanding of the issues, findings and recommendations discussed at the ISB.
- To raise relevant safeguarding issues to the full NAS board where not appropriate for the sub-committee chairs to raise.
- To seek to ensure that the organisation's risk register reflects current safeguarding risks, controls and measures to manage the risks.
- To present their own report to the chair of the ISB who will present an annual report to the NAS board, identifying trends and any areas of concern.
- To ensure that Safeguarding is on the Board and Committee agendas and help trustees understand and challenge the reports.
- To work alongside the Chair of the Independent Safeguarding Board to help Board ensure a safer culture within the organisation:
 - Creating the right culture
 - Champion safeguarding at Board level.
 - Attend relevant safeguarding training events and conferences.
 - Support other trustees in developing their individual and collective understanding of safeguarding.
 - Attend meetings, activities, projects to engage with staff, volunteers and beneficiaries to understand safeguarding on the ground.
 - Work with the chair, CEO, Chair of the ISB and designated safeguarding lead and communications team in order to advise on the management of all serious safeguarding cases.
 - Support regular safeguarding updates for staff, volunteers and beneficiaries.

The Registered / Service Manager

- To seek to ensure all safeguarding concerns are reported in line with legislation, policy and procedure.
- To build a strong safeguarding culture in the home / service where those supported are listened to, respected and involved in both the development of the home / service and decisions about the home / service.
- Seek to ensure that day-to-day care is arranged and delivered so as to keep each person safe and to protect each person effectively from harm

- Seek to ensure that staff continually and actively assess the risks to each person and the arrangements in place to protect them, based on the individual person's needs, and recognise that adults we support are able to take a particular risk or follow a particular course of action where this is in their best interest
- To seek to ensure that all decisions are made with a person in line with their capacity.
- Help each person we support to understand how to keep safe
- Seek to ensure that staff have the training and skills to identify and act upon signs that an individual is at risk of harm. Seek to ensure that staff skills in safeguarding are gained, refreshed and recorded in the workforce plan.
- Manage relationships between those we support to prevent them from harming each other.
- Where there are safeguarding concerns for a person we support, a protection plan is agreed and is followed

Adult Services Staff

- All staff are responsible for providing a safe environment in which those we support can learn / live
- To read and understand safeguarding policies and procedures and how to identify and report abuse
- To seek to ensure that training is up to date in adult safeguarding
- Members of staff are not responsible for investigating concerns or suspicions.
- To read and follow this policy and ask questions if not sure about any aspect of this policy.
- To be aware that abuse does happen; to always remain alert to the possibility of abuse and ready to act upon information that you receive or signs of abuse you see or hear about.
- To be aware of the early warning signs of potential abuse situations and the possible signs of abuse.
- To notify the Manager or Area Manager or Nominated Individual and Safeguarding Lead if there is any reason to suspect that someone has been or may be the subject of abuse.
- To maintain a professional unbiased and confidential approach in line with NAS Equal Opportunities Policy when dealing with the victim and any other person who may be involved.
- To seek to ensure good communication of observations are made in writing
- To actively teach those we support about how to keep themselves safe (including online) through practical learning opportunities
- To follow support plans and any protection plans that may be in place

11. Equal Opportunities

Employees of the NAS or NAS volunteers shall not discriminate against any individual we support on the grounds of race, nationality, age, beliefs, sexual orientation, or social standing and shall work in such a way as to give equal opportunity for each individual to achieve the maximum benefit and potential consist with respecting the dignity and value of fellow human beings.

These same principles of fairness, equity and transparency will apply in how all employees of NAS are treated, and without exception this will include those employees who report abuse, and those who are either investigating or subject to an investigation.

12. Disclosure / Someone Shares a Concern or Worry

If an adult experiencing abuse or neglect speaks to you about this, assure them that you are taking them seriously. Listen carefully to what they are saying, stay calm and get a clear and factual picture of the concern.

- Be honest and avoid making assurances that you may not be able to keep confidentiality. Be clear and say that you need to report the abuse. Do not be judgmental and try to keep an open mind.
- If an adult experiencing abuse or neglect speaks to you about this, assure them that you are taking them seriously.
- All staff (professionals and volunteers) of any service involved with adults at risk should inform the relevant manager if they are concerned that an adult has been abused or may be at risk of harm as soon as possible.
- If you hear about an incident of abuse from a third party (this is when someone else tells you about what they have heard or seen happen to a vulnerable adult at risk), encourage them to report it themselves or help them to report the facts of what they know

What to do if you suspect abuse

Everyone with a duty of care to an adult at risk should:

- act to protect the adult at risk
- deal with immediate needs and seek to ensure the person is, as far as possible, central to the decision-making process
- report the abuse to an appropriate person or service (e.g. your line manager) who will report this to the relevant local authority.
- if a crime has or may have been committed, contact the police to discuss or report it
- record the events.

A concern may be a direct disclosure by the adult at risk, or a concern raised by staff or volunteers, others using the service, a carer or member of the public, or an observation of the behaviour of the adult at risk, or the behaviour of another.

All staff (professionals and volunteers) of any service involved with adults at risk should inform the relevant manager if they are concerned that an adult has been abused or may be at risk of harm.

13. Allegations Made Against Staff or Volunteers

Any allegation that a member of NAS staff or a NAS volunteer has abused, harmed or neglected an adult at risk must be reported immediately to a senior manager within the organisation, the relevant statutory agencies and the appropriate regulatory body. This should be done within 24-72 hours of all allegations that come to an employer's attention or that are made directly to the Police if a member of staff or volunteer has or is alleged/ suspected to have:

- behaved in a way that has harmed an adult at risk, or may have harmed an adult at risk
- possibly committed a criminal offence against or related to a child or an adult at risk
- behaved towards an adult at risk in a way that indicates they may pose a risk of harm to adults at risk
- behaved or may have behaved in a way that indicates they may not be suitable to work with adults at risk

There are two aspects to consider when an allegation is made:

- **Looking after the welfare of the adult at risk** – Staff are responsible for ensuring that the PWS is not at risk and referring cases of suspected abuse to the local authority safeguarding team as described in Part one of this guidance.
- **Investigating and supporting the person subject to the allegation** – Staff should discuss with the relevant involved statutory services, the nature, content and context of the allegation, and agree a course of action.

When dealing with allegations statutory safeguarding teams should:

- follow statutory guidance
- deal with allegations quickly, fairly and consistently;
- provide effective protection for the PWS and support the person subject to the allegation.

Services should seek to ensure they understand the local authority arrangements for managing allegations, including the contact details and what information the registering body will require when an allegation is made.

If there are concerns or an allegation against the service manager, this should be reported to the relevant Area Manager within the National Autistic Society.

The possible suspension of the staff member or volunteer, without prejudice, should be discussed with HR and the NAS Safeguarding Team without delay if there are

concerns that a staff member has harmed an adult at risk or is at risk of harming an adult at risk.

Staff members and volunteers (including supply and agency staff) against whom an allegation is made are owed a duty of care and should be treated fairly, honestly and without discrimination. They should be provided with support throughout the process.

The Police and other relevant agencies should always agree jointly when to inform the subject of allegations which may be subject to criminal procedures.

When managing allegations against staff, it is important to recognise the distinction between allegations that meet the harms threshold and allegations that do not, also known as “low-level concerns”.

Low level concerns

As part of their whole approach to safeguarding services should seek to ensure that they promote an open and transparent culture in which all concerns about all adults working in or on behalf of the service (including volunteers and contractors) are dealt with promptly and appropriately.

Creating a culture in which all concerns about adults (including allegations that do not meet the harms threshold) are shared responsibly and with the right person, recorded and dealt with appropriately, is critical. It should enable services to identify concerning, problematic or inappropriate behaviour early; minimise the risk of abuse; and seek to ensure that adults working in or on behalf of the service are clear about professional boundaries and act within these boundaries, and in accordance with the ethos and values of the institution.

A **low-level concern** is any concern – no matter how small, and even if no more than causing a sense of unease or a ‘nagging doubt’ - that an adult working in or on behalf of the service may have acted in a way that:

- is inconsistent with the staff code of conduct, including inappropriate conduct outside of work;
- does not meet the allegations threshold or is otherwise not considered serious enough to consider a referral to the regulatory body. (Examples of such behaviour could include, but is not limited to being over friendly with PWS; spending too much time with one particular PWS, having favourites)

It is crucial such concerns are reported so appropriate guidance, supervision, training and action can be taken.

Services should:

- ensure their staff are clear about what appropriate behaviour is, and are confident in distinguishing expected and appropriate behaviour from concerning, problematic or inappropriate behaviour, in themselves and others;

- empower staff to share any low-level safeguarding concerns with the Service Manager or Safeguarding Advisor for Adults;
- address unprofessional behaviour and support the individual to correct it at an early stage;
- provide a responsive, sensitive and proportionate handling of such concerns when they are raised; and help identify any weakness in the services' safeguarding system.

14. Supporting Staff and Supervision of Staff

All staff working directly with vulnerable adults will have supervision with a suitably experienced person during which safeguarding concerns and processes will be discussed. Each staff member should have 6 supervisions per year including their annual appraisal.

We recognise that staff working in an NAS service who have become involved with a vulnerable adult who has suffered harm, or appears to be likely to suffer harm, may find the situation stressful and upsetting.

We will support such staff by providing an opportunity to talk through their anxieties with the relevant line manager and to seek further support such as counselling or regular supervision, reflective practice, as appropriate. Employees also have access to a confidential helpline - The First Assist Employee Assistance Programme (EAP).

In order to reduce the risk of allegations being made against staff, and seek to ensure that staff are competent, confident and safe to work with vulnerable adults, they will be made aware of safer working practice guidance and will be given opportunities in training to develop their understanding of what constitutes safe and unsafe behaviour.

15. Recruitment and Selection of Employed Staff and Volunteers

The NAS has a written recruitment and selection policy statements and procedures for the recruitment and selection of both employed staff and volunteers.

In England, under the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 19 NAS may only employ 'fit and proper' staff who are able to provide care and treatment appropriate to their role and to enable them to provide the regulated activity. To meet this regulation, NAS must operate robust recruitment procedures, including undertaking any relevant checks. They must have a procedure for ongoing monitoring of staff to make sure they remain able to meet the requirements, and they must have appropriate arrangements in place to deal with staff who are no longer fit to carry out the duties required of them.

Employing unfit people, or continuing to allow unfit people to stay in a role, may lead the Care Quality Commission (CQC) to question the fitness of NAS as a provider.

In Scotland, The Care Inspectorate expects care services to periodically re-check the suitability of care service staff as a matter of good practice. The Care

Inspectorate can make recommendations where they identify that a practice may lead to poor outcomes for people, but does not prescribe timescales for frequency of periodic checking. NAS checks annually.

Volunteers working in care services in Scotland should be treated in the same way as paid staff and any volunteers within a care service without a Protection of Vulnerable Groups scheme record or a relevant Disclosure Scotland certificate and should ideally have no direct service user contact and should not in any circumstances work unsupervised.

The statement is included in all job advertisements, publicity material, recruitment websites, and candidate information packs.

The recruitment process is robust in seeking to establish the commitment of candidates to support the NAS's measures to safeguard adults and to deter, identify, reject or identify people who might pose a risk of harm to adults or are otherwise unsuited to work with them.

All staff and volunteers in regulated activity within our services have been checked as to their suitability, including verification of their identity, qualifications, previous employment history and DBS / PVG / Access NI check and a right to work in the UK.

Staff will only work in regulated activities prior to verification by the NAS of their satisfactory DBS / PVG / Access NI Certificate on the rare occurrence that it is deemed that the person supported would be put at risk because the staff member had a delayed start date. (Please note: In England, in such circumstance, an application will be made to the Adult First Scheme, which checks against the adult barring list only). The staff will not be left unsupervised and will be subject to a full risk assessment.

Volunteers who are not working in regulated activity, will be supervised at all times.

The protocol for receiving information prior to Agency staff working in services must be followed and this includes sight and consideration of an appropriate and in date DBS check, references, training history (this must include safeguarding and other basic mandatory training).

16. Training

All staff and volunteers will receive safeguarding adults training that is relevant to their role, including, but not limited to, from the Board of Trustees, support staff in services and volunteers. For those working directly with adults, safeguarding training will be completed within the induction framework and be refreshed on an annual basis (not later than 13 months since the last training) via the face-to-face Safeguarding People training developed by the NAS or via the on-line safeguarding training or from the relevant Local Authority / Local Safeguarding Adult Board/ Northern Ireland Adult Safeguarding Partnership/ Adult Protection Committee or specialist organisation.

The training will as a minimum must cover:

- categories of adult abuse
- prevention and recognition of abuse
- dealing with disclosures and suspicions of abuse
- information sharing
- Whistleblowing
- maintaining confidentiality
- mental capacity - (Mental Capacity Act (England & Wales) 2005, Mental Capacity Northern Ireland Act 2016 and Adults with Incapacity Act (Scotland) 2000)
- deprivation of liberty

All staff and volunteers must read, understand and become knowledgeable about adult safeguarding procedures during induction and must undertake refresher training on an annual basis. Failure by a member of staff to report actual or reasonably suspected abuse of an adult will be treated as a disciplinary offence.

17. Equality Impact Assessment

NAS employees and volunteers shall not discriminate against any person on the grounds of race, nationality, age, religious or similar philosophical beliefs, sexual orientation, or social standing and shall work in such a way as to give equal opportunity for each person we support to achieve the maximum benefit and potential, consistent with respecting the dignity and value of fellow human beings.

In the design of this policy we have considered the complex inter-relating elements that impact on effective support and safeguarding of autistic adults at risk. Our implementation of this policy should seek to lessen some of the known inequalities that exist in society, including, but not limited to race, disability and gender. Through carefully designed provision and support that affords opportunities for people with those protected characteristics to receive equality of access to all aspects of safeguarding provision. This policy has been designed and consulted on with a large stakeholder group internal to the NAS, including community and residential based staff.

18. Safeguarding Contacts

Nominated Individual and Safeguarding Lead

Name: Cassy Harrison

Email: cassy.harrison@nas.org.uk

Mobile: 07731989968

Safeguarding Advisor for Adult Services

Name: Jonny Elphinstone

Email: Jonny.Elphinstone@nas.org.uk

Safeguarding Advisor for National Programmes

Name: Jessica Hingley

Email: Jessica.hingley@nas.org.uk

Mobile: 07548775446

Safeguarding and Complaints Manager

Name: Sue West

Email: Notifications.Safeguarding@nas.org.uk

Chair of the Independent Safeguarding Board

Name: John Goldup

Email: John.Goldup@nas.org.uk

Trustee for safeguarding and adult protection

Name: Dr Manpreet Pujara

Email: Manpreet.Pujara@nas.org.uk

19. Safeguarding Adults Procedures by Nation

- [SO-0194-001-0223 Safeguarding Adults Procedure ENGLAND](#)
- [SO-0194-002-0223-Safeguarding Adults Procedure WALES](#)
- [SO-0194-003-0223 Safeguarding Adults Procedure SCOTLAND](#)
- [SO-0194-004-0223 Safeguarding Adults Procedure NORTHERN IRELAND](#)

20. Appendices to Be Used by Adult Services

- [SO-0194-005-0223 – Safeguarding Report Form](#)
- [SO-0194-006-0223 – Safeguarding Closure Form](#)
- [SO-0194-007-0223 – Reporting Procedure Flowchart](#)
- [SO-0194-008-0223 – Types & Indicators of Abuse](#)
- [SO-0194-009-0223 – Serious Incident Flowchart](#)
- [SO-0194-010-0223 – Escalation Protocol](#)
- [SO-0194-011-0223 – Protection Plan template](#)

21. References

- Care Quality Commission (CQC)
- Care Inspectorate for Wales
- Care Inspectorate - Scotland
- RQIA – Northern Ireland
- HSC Trust
- Access NI
- The Care Act 2014
- Adult Safeguarding Policy for Northern Ireland 'Adult Safeguarding: Prevention and Protection in Partnership' 2015
- Social Services and Well Being (Wales) Act 2014.
- Adult Support & Protection Act (Scotland) 2007
- Mental Capacity Act (Northern Ireland) 2016
- Adults with Incapacity (Scotland Act) 2000
- Mental Capacity Act 2005 (England and Wales)
- Purchasers' Contracts
- Local Adult Safeguarding Boards

22. Other Relevant Policies and Guidance

- Near Miss Framework
- Safeguarding Quality Assurance Framework
- Safeguarding Incident Investigation Forms
- Higher Risk Support Needs Framework
- Notifications Booklet – SO-0183-001-0319
- Whistleblowing Policy HR-0002
- Online E-Safety Policy
- Data Protection Policy – IGP-02
- Conduct Management Policy – HR-0022
- Anti-Discrimination and Anti-Harassment Policy SO-0231
- Deprivation of Liberty Safeguards Policy SO-0190
- Equal Opportunities
- Local Authority Guidelines
- Care and Support Statutory Guidance- Department of Health and Social Care
- Making Safeguarding Personal – Guide 2014

We are committed to reviewing our policy and good practice annually. This policy was last reviewed on: 04 April 2023.