

NHS Derby and Derbyshire Integrated Care Board

Safeguarding Adults Policy

KEY POLICY MESSAGES	
1.	NHS Commissioners have particular responsibilities to ensure that those patients receive high quality care and that their rights are upheld, including the right to be safe.
2.	Everyone has an individual responsibility for the protection and safeguarding of adults at risk.
3.	The ICB has a responsibility to ensure that contract monitoring arrangements are established which guarantee that all commissioned services are committed to providing safe patient care and to taking action to minimise risk and promote the safety and well-being of patients at all times.

VERSION CONTROL

Title:	NHS Derby and Derbyshire Integrated Care Board Safeguarding Adults Policy
Supersedes:	NHS Derby and Derbyshire CCG's Safeguarding Adults Policy
Description of Amendment(s):	Version 0.1 to 0.4 – initial drafts Version 1.0 – final (approved) Version 1.1 – amendments made following 360 assurance team's recommendations regarding reflecting governance/ reporting and monitoring/review process of the policy
Financial Implications:	None
Policy Area:	Nursing & Clinical Quality
Version No:	Version 1.1
Author:	Bill Nicol, Assistant Director for Safeguarding Adults
Approved by:	System Quality Group, 4 th April 2023
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List of Referenced Policies:	Derbyshire & Derby City Multi-Agency Safeguarding Adult Policy Domestic Abuse Policy Prevent Policy Managing Safeguarding Allegations Against Staff Safeguarding Children Policy
Key Words section (metadata for search facility online):	Safeguarding Adults
Reference Number:	NQ02
Target Audience:	ICB approved policies apply to all employees, contractors, volunteers, and others working with the ICB in any capacity. Compliance with ICB policy is a formal contractual requirement and failure to comply with the policy, including any arrangements which are put in place under it, will be investigated and may lead to disciplinary action being taken.

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1. CONTEXT

- 1.1 NHS Derby and Derbyshire Integrated Care Board (the "ICB") is committed to working with partner agencies and key stakeholders to prevent all forms of abuse and mistreatment.
- 1.2 Some adults may require additional support in securing their rights to live free from abuse. They may have greater dependency and be unable to hold services to account for the quality of the care that they receive. NHS Commissioners have particular responsibilities to ensure that those patients receive high quality care and that their rights are upheld, including the right to be safe.
- 1.3 Safeguarding Adults describes interagency arrangements to protect adults from abusive behaviour and practice and the ICB's statutory members and are active partners of the Derbyshire and Derby City Safeguarding Adults Boards.
- 1.4 The Care Act (2014) has given the Safeguarding Adult Boards statutory status and as such replaces No Secrets (2000). The Care Act stipulates that the Local Authority must make enquiries, or cause others to do so, if they reasonably suspect that an adult is either at risk of, or is being abused or neglected.
- 1.5 The ICB has a statutory responsibility to ensure that the health contribution to safeguarding adults is discharged effectively across the health economy through the ICB commissioning arrangements. Commissioners have a responsibility to assure themselves of the quality and safety of the organisations they place contracts with and ensure that those contracts have explicit clauses that hold providers to account for promoting and maintaining patient safety.

2. SCOPE OF THE POLICY

- 2.1 Derbyshire and Derby City Safeguarding Adult Boards have a joint operational policy. This is a multi-agency protocol and must be followed when engaging in adult safeguarding practice. This policy must be read in conjunction with these multi-agency policy and procedures.
- 2.2 The Derbyshire and Derby City Policy and Operational Guidance (2015) can be accessed [here](#)¹.
- 2.3 This Policy applies to all staff (temporary or permanent) working within the ICB. Everyone has an individual responsibility for the protection and safeguarding of adults at risk.
- 2.4 The ICB has a responsibility to ensure that contract monitoring arrangements are established which guarantee that all commissioned services are committed to providing safe patient care and to taking action to minimise risk and promote the safety and well-being of patients at all times.

¹ <https://www.derbyshiresab.org.uk/home.aspx>

3. POLICY STATEMENT

- 3.1 The ICB is committed to ensure that commissioned services meet recognised national and local standards in safeguarding adults. This assurance is gained via arrangements for contract monitoring between commissioner and provider where care quality and positive patient outcomes are prioritised.
- 3.2 The ICB champions the rights of all patients to be safe at all times and not to be abused, neglected, or exploited.
- 3.3 The ICB is committed to working collaboratively with other partners to respect diversity (including race, religion, disability, gender, age and sexual orientation) and to promote equality for all.

4. DUTIES

Safeguarding duties apply to any adult who:

- 4.1 has a need for care and support whether or not the Local Authority is meeting any of those needs;
- 4.2 is experiencing, or is at risk of, abuse or neglect; and
- 4.3 as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse and neglect.

5. DEFINITIONS

"Abuse"

incidents of abuse may be one-off or multiple and can affect one person or many. Repeated incidents of poor care quality may be an indication of more serious underlying problems and may be an example of institutional abuse. In order to identify thematic patterns and repeat incidents it is critical that information is recorded and is shared on a need to know basis;

Categories of Abuse

The main forms of abuse as detailed within the Care Act (2015) are:

"Physical"

including assault, hitting, punching, slapping, pushing, kicking, misuse of medication and restraint, inappropriate sanctions, spitting, nipping;

"Sexual"

including rape and sexual assault, inappropriate looking or touching, subjection to pornography or sexualised behaviours, unwanted sexual contact, coercion;

"Psychological"

including emotional abuse, threats of harm or abandonment, deprivation of social contact, humiliation, controlling, intimidation, coercion, harassment, verbal abuse, withdrawal from services, extended family, friends and supportive networks;

"Financial/Material"

including theft, fraud, exploitation, misappropriation of finances, possessions, or benefits;

"Neglect"

including ignoring medical or physical care needs, failure to provide access to health and social care services, withholding access to medication, aids to daily living, adequate nutrition and heating;

"Discriminatory"

including forms of harassment, slurs or similar due to a person's race, age, gender, sexual preference, disability, physical appearance or religion;

"Organisational"

including abuse, neglect and poor standards of practice within a care setting;

"Modern Slavery"

including human trafficking, forced labour, sexual exploitation and domestic servitude;

"Domestic Abuse"

including psychological, physical, emotional, sexual, financial abuse, coercion, control, isolation from potential support networks, and fear of reprisal;

"Self-Neglect"

including poor levels of personal hygiene, hoarding, squalid living conditions and life choices which place the adult at serious risk of harm or death.

Any or all of these abuse categories may be perpetrated as a result of deliberate intent to harm, negligence, failure to respond, self-gain and gratification, acts of omission, or general ignorance. They are not mutually exclusive and can happen anywhere at any time and be perpetrated by anyone. The abuser is likely to hold a real or perceived position of power and authority over the adult at risk.

6. ROLES & RESPONSIBILITIES OF THE ICB

- 6.1 The ICB is responsible for ensuring that the NHS contribution to safeguarding adults at risk is discharged consistently and effectively across the health economy through robust commissioning arrangements.
- 6.2 The ICB will receive information relating to:
- 6.2.1 gaining assurance of how providers are delivering and meeting their Safeguarding Adult responsibilities. This is monitored and evaluated through the ICB's Safeguarding Adult Assurance Framework (SAAF), Joint Safeguarding Assessment Framework (JSAF), Small Provider Assurance Framework, Peer Review, and undertaking site visits to providers;
 - 6.2.2 participation in Safeguarding Adult Reviews (SARs) and Domestic Homicide Reviews (DHRs); and
 - 6.2.3 participation in case file audits with key stakeholders.
- 6.3 The ICB fully supports the Care Act (2014) underlying principles which are also found within the Derbyshire & Derby City Multi-Agency Safeguarding Adult Policy, these are:
- 6.3.1 **Empowerment** – presumption of person-led decisions and informed consent;
 - 6.3.2 **Prevention** – it is better to take action before harm occurs;
 - 6.3.3 **Proportionality** – least intrusive response appropriated to the presenting risk;
 - 6.3.4 **Protection** – support and representation for those in need;
 - 6.3.5 **Partnership** – local solutions through services working closely together with their communities. Recognising that communities have an important role to play in preventing, detecting, and reporting neglect, abuse, and mistreatment; and
 - 6.3.6 **Accountability** – accountability, ownership, and transparency when delivering safeguarding services and contributing to partnerships.
- 6.4 Responsibilities for all staff within the ICB are to:
- 6.4.1 be aware of the Derbyshire & Derby City Multi-Agency Safeguarding Adult Policy and the ICB equivalent;
 - 6.4.2 listen and treat seriously concerns raised about patient safety whatever the source;
 - 6.4.3 be able to report any concern in accordance with local arrangements;
 - 6.4.4 know who to contact to discuss concerns and where to get additional support if required for themselves or an adult at risk;
 - 6.4.5 understand the limits and boundaries of their role within the safeguarding adult operational framework;
 - 6.4.6 maintain accurate, comprehensive and legible records and maintain these safely in line with information governance arrangements;

- 6.4.7 participate in relevant staff training activities.
- 6.5 The ICB will contribute to and participate in the safeguarding enquiries process where this relates to commissioned services. The ICB will also provide appropriate information to enable the completion of Safeguarding Adult Reviews (SARs) and Domestic Homicide Reviews (DHRs).

7. REPORTING ABUSE

- 7.1 The ICB is a core member of both the Derby City & the Derbyshire Safeguarding Adults Boards. This ICB Safeguarding Adult Policy compliments but does not have priority over the Derbyshire & Derby City Multi-Agency Safeguarding Adult Policy and Procedures. The procedures, which can be found [here](#)², detail the action that must be taken when abuse is suspected, or has taken place.
- 7.2 If staff suspect that an adult is being abused or is at risk of being abused then they must ensure that the person is safeguarded from further harm.
- 7.3 All staff have a duty to ensure that medical assistance is arranged should it be necessary.
- 7.4 If there is reason to believe that an adult is in immediate risk of harm, or if a crime has been committed then the Police must be called.
- 7.5 Throughout this process the needs and wishes of the adult are paramount. Wherever possible the adult's opinions and desired outcomes should be the focus of decision making and actions.
- 7.6 Staff should inform and consult with their line manager or seek advice from the ICB's Safeguarding Adult's Team.
- 7.7 Details of all discussions, decisions taken, actions made, and the adults' views must be recorded accurately and stored securely. If it's not recorded then it didn't happen.

8. SAFEGUARDING ADULT REVIEWS (SARS)

- 8.1 The ICB has a statutory duty to work in partnership with the Derbyshire and the Derby City Safeguarding Adult Boards and participate in SARs when an adult dies as a result of abuse or neglect, or where there has been a serious incident, or in circumstances of institutional abuse and neglect.
- 8.2 The purpose of the SAR is to:
- 8.2.1 establish whether there are lessons to be learned from the way in which professionals and agencies worked together to safeguard the adult;
- 8.2.2 use the review as a learning opportunity to detail recommendations to improve systems and enhance collaborative working; and

² <https://www.derbyshiresab.org.uk/professionals/policies-and-procedures.aspx>

- 8.2.3 ensure that any urgent issues requiring immediate remedial action are identified and processed.
- 8.3 The ICB's Safeguarding Adult Team will inform NHS England Area Team when a SAR has been commissioned.
- 8.4 The ICB will ensure that the review and all relevant actions are completed in accordance with the SAR terms of reference and lessons learned are disseminated across the organisation.
- 8.5 Progress and interim reports will be made available to the ICB by the Safeguarding Adult Team.

9. PREVENT

- 9.1 Prevent is part of the Government's Contest Strategy which focusses primarily upon working with individuals and communities who may be vulnerable to being radicalised into supporting or undertaking acts of violent extremism and terrorism.

"The purpose of Prevent is at its heart to safeguard and support vulnerable people to stop them from becoming terrorists or supporting terrorism. Our Prevent work also extends to supporting the rehabilitation and disengagement of those already involved in terrorism. Prevent works in a similar way to programmes designed to safeguard people from gangs, drug abuse, and physical and sexual abuse." (CONTEST 2018)

- 9.2 The Healthcare Sector is a key strategic partner in Prevent and this was clearly endorsed by the publication of the Home Office revised CONTEST Strategy in 2018 which contained the following objectives:
 - 9.2.1 Objective 1: Tackle the causes of radicalisation and respond to the ideological challenge of terrorism.
 - 9.2.2 Objective 2: Safeguard and support those most at risk of radicalisation through early intervention, identifying them and offering support.
 - 9.2.3 Objective 3: Enable those who have already engaged in terrorism to disengage and rehabilitate.
- 9.3 Healthcare professionals may have contact with adults and children who could become radicalised. There is no obvious profile of such an adult or child which would aid identification of someone who is prepared to support extremism. Individuals who may be susceptible could be colleagues, patients, or extended family members. Prevent ensures that those who are at risk will receive help and support from partner agencies best placed to meet their needs.
- 9.4 The statutory Prevent Duty Guidance for specified authorities (which includes health) regarding their duty in the Counter-Terrorism and Security Act 2015 tells them in the exercise of their functions, to have due regard to the need to prevent people from being drawn into terrorism.

9.5 The Act states that the authorities subject to the provisions must have regard to this guidance when carrying out their duty. NHS providers and commissioners are identified as a specified authority. The guidance can be found [here](#)³.

NB: Due regard means that authorities (which includes health) should place an appropriate amount of weight on the need to prevent people being drawn into terrorism.

9.6 Contracts of employment, professional codes of conduct, and the Care Act (2014) require all healthcare staff to exercise a duty of care to patients and, where necessary, take action to safeguard and prevent criminal activity and behaviour.

9.7 The ICB will ensure that there are robust Prevent arrangements in place across the NHS in Derby and Derbyshire. These will be monitored and assessed by the SAAF and will therefore form part of the quality assurance process.

9.8 If any ICB staff member has a concern that someone is being radicalised to support or undertake terrorist activity then they should contact the Assistant Director for Safeguarding Adult and the ICB Prevent lead who will provide advice and identify appropriate referral pathways if required.

10. DOMESTIC HOMICIDES

10.1 Domestic Homicide Reviews (DHRs) were established on a statutory basis under Section 9 of the Domestic Violence, Crime & Victims Act (2004) and came into force on the 13th April 2011. To access the Multi-agency Statutory Guidance for the Conduct of Domestic Homicide Reviews please go [here](#).

10.2 A DHR means a review of the circumstances in which the death of a person aged 16 or over has, or appears to have, resulted from violence, abuse or neglect by a:

10.2.1 person to whom they are related or with whom they have/had an intimate relationship;

10.2.2 member of the same household.

10.3 The legal requirement is similar to the Safeguarding Adult Review (SAR) process and has been established to ensure that agencies are responding appropriately to victims of domestic violence by offering appropriate support mechanisms, resources, and interventions. The aim is to prevent avoidable future incidents of domestic violence and homicide.

10.4 The ICB has a duty to monitor these arrangements across healthcare providers through the SAAF and to contribute to DHR process as required.

³ <https://www.gov.uk/government/publications/prevent-duty-guidance>

11. INFORMATION GOVERNANCE

- 11.1 Personal information is subject to the principles of the Freedom of Information Act (2000), the Data Protection Act (1998), the common law doctrine of confidentiality and General Data Protection Regulations (2018).
- 11.2 Wherever possible the adult should be asked to give their consent for their information to be shared. If consent is not forthcoming, or the person lacks the mental capacity to consent to the request, then it is still possible to share the information in certain circumstances e.g. where a crime has been committed, where the person is at high risk of serious harm or death, or where others may also be at risk.
- 11.3 Concern about the abuse or wilful harm of an adult provides sufficient ground to warrant information being shared on a “need to know” basis. Unnecessary delays in sharing information should be avoided, where there is a risk of harm to an individual/individuals.
- 11.4 The ICB will follow the overarching Multi-Agency Information Sharing Agreement.

12. RECRUITMENT & EMPLOYMENT PROCESSES

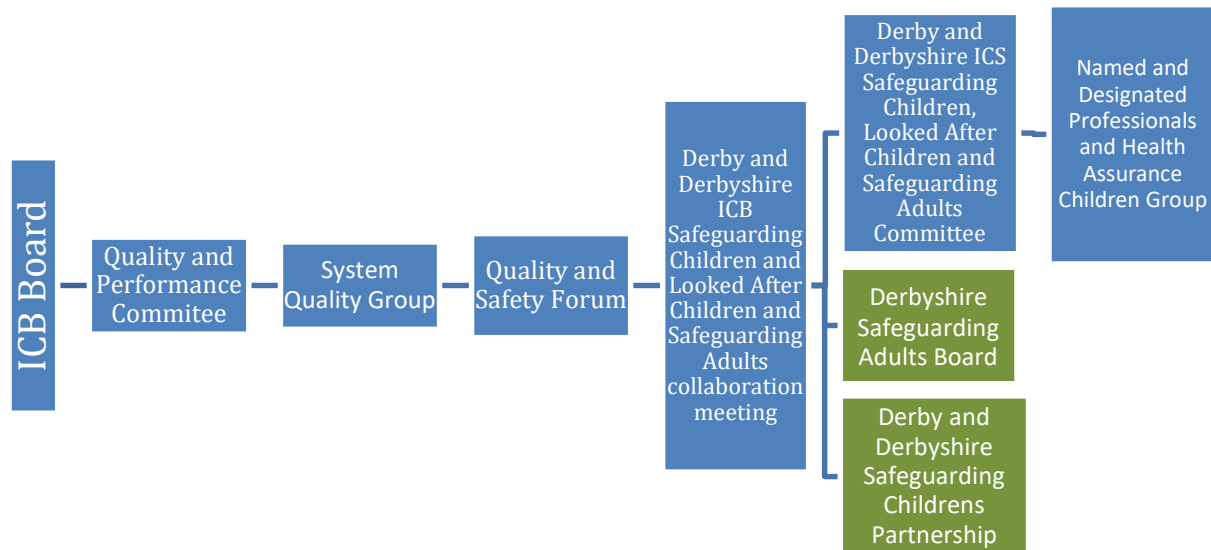
- 12.1 The ICB has a duty to ensure that safe recruitment processes are followed in accordance with NHS employers’ regulations and the Disclosure & Barring Scheme. (Safeguarding Vulnerable Groups Act 2006).
- 12.2 It is a requirement of the Care Act 2014 Statutory Guidance that Safeguarding Adults Boards should establish and agree a framework and process for any organisation to respond to allegations against anyone who works, (in either paid or an unpaid capacity), with adults with care and support needs. These individuals are known as a Person in Position of Trust (PiPoT). PiPoT when introduced will apply to all partner agencies of Derby and Derbyshire Safeguarding Adults Board (DSAB) so they can respond appropriately to allegations against people who whether an employee, volunteer or student, paid or unpaid, works with or cares for adults with care and support needs.
- 12.3 The ICB and the service providers they commission will be individually responsible for ensuring that information relating to PiPoT concerns are shared and escalated outside of their organisation in circumstances where this is required. Such sharing of information must be lawful, proportionate and appropriate. Organisations will be responsible for making the judgment that this is the case in every instance when they are the data controller. The receiving organisation becomes the Data Controller as defined by the Data Protection Act 1998 (please refer to Section 4.0 Legal Framework).
- 12.4 The PiPoT framework and process for Derby and Derbyshire SABs will be available in September 2019.

13. STAFF TRAINING

- 13.1 The ICB has a Safeguarding Adult training programme. This correlates training with the role, responsibility and performance expectation of all ICB staff. The training provided is linked to increasing levels of specialism, complexity of task, and level of contact with patients/service users as specified in the recently published Intercollegiate Document 'Adult safeguarding: Roles and Competencies for Health Care Staff' (2018).
- 13.2 All staff within the ICB will be required to attend mandatory safeguarding adult and Prevent training at the commencement of their employment and then as a refresher every three years.
- 13.3 Standards and compliance of staff training across NHS provider agencies will be monitored and evaluated as part of the SAAF process.

14. GOVERNANCE ARRANGEMENTS

- 14.1 To ensure that safeguarding is integral to the governance arrangements of the ICB the Assistant Director for Safeguarding Adults reports to the ICB Quality and Safety Group. The Designated Professionals also on exception present reports to the ICB Quality and Performance Committee and System Quality Group. The purpose of the reports produced are to provide assurance on the effectiveness of the safeguarding arrangements in place within commissioned services and the ICB; ensuring that safeguarding is integral to quality and audit arrangements within the ICB. The reports produced also ensure that the ICB Board via the structure highlighted in the table below is kept informed of national and local initiatives for safeguarding and oversee the implementation of learning from reviews and audits that are aimed at driving improvements to safeguard adults.
- 14.2 In addition to the reporting arrangements above an annual safeguarding report will be submitted to the ICB Board with exception reporting to the ICB Board on issues of significance e.g. SAR/DHR's, inspections' findings. ICB will also have a quarterly Joint Safeguarding Children and Adults Collaboration Committee that reports to the ICB Quality and Safety group. The table below provides an overview of the governance, reporting and escalation process within the ICB. The ICB Chief Nurse is the Executive lead for safeguarding and is kept fully briefed of any issues that need to be brought to the Executive lead for safeguarding attention.



15. COMMISSIONING ARRANGEMENTS

- 15.1 The ICB must ensure that service specifications for commissioned and contracted services include clear standards and monitoring arrangements for safeguarding adults, the Mental Capacity Act (2005) and the Deprivation of Liberty Safeguards (2009).
- 15.2 Safeguarding standards that are set within contracts and specifications pertaining to safeguarding services need to be SMART (Specific, measurable, achievable, relevant and timely):
- 15.2.1 **Specific** – clear expectations on what is required from the provider to fulfil their contract based on the NHS England – Safeguarding children, young people, and adults at risk in the NHS – Safeguarding accountability and assurance framework (2022) – SAAF;
- 15.2.2 **Measurable** – agreed monitoring tool / self-assessment framework for the provider to be able to complete and assess themselves on the key standards specified and record a compliance rating and action plan for any areas of noncompliance;
- 15.2.3 **Achievable** – contracted services to have the required resources to full and deliver the service being commissioned and mechanism of reporting/raising concerns or issues with the ICB Contract leads/ safeguarding service;
- 15.2.4 **Relevant** – clear set and relevant safeguarding standards based on what is required from the Provider in regard to fulfilling their safeguarding requirements/ roles and responsibilities; and
- 15.2.5 **Timely** – reporting process and timeframes for reporting into the ICB contract and safeguarding team clear and agreed.

- 15.3 The ICB must also ensure that all NHS providers have robust safeguarding policies and operational arrangements in situ in accordance with the Derbyshire and Derby City Multi Agency Safeguarding Adult Policy.
- 15.4 The ICB will seek assurance from NHS providers by a range of quality monitoring mechanisms drawing from qualitative and quantitative data including:
- bi-annual completion of the SAAF;
 - annual completion of the JSAF;
 - quality monitoring visits;
 - collation and analysis of safeguarding referrals and trends;
 - audit of safeguarding adult case files;
 - engagement with service users, carers, and partners;
 - review of serious incidents;
 - peer review; and
 - Quality Assurance Groups (QAG).
- 15.5 Attending a range of NHS provider meetings, regional forums, steering groups, sub-committees, and associated work streams (SAR, DHR, Prevent, MARAC, MAPPA) Annual Report.

16. EQUALITY STATEMENT

- 16.1 The ICB aims to design and implement policy documents that meet the diverse needs of our services, population and workforce, ensuring that none are placed at a disadvantage over others. It takes into account current UK legislative requirements, including the Equality Act 2010 and the Human Rights Act 1998, and promotes equal opportunities for all. This document has been designed to ensure that no one receives less favourable treatment due to their protected characteristics of their age, disability, sex (gender), gender reassignment, sexual orientation, marriage and civil partnership, race, religion or belief, pregnancy and maternity. Appropriate consideration has also been given to gender identity, socio-economic status, immigration status and the principles of the Human Rights Act.
- 16.2 In carrying out its function, the ICB must have due regard to the PSED. This applies to all activities for which the ICB is responsible, including policy development, review and implementation.
- 16.3 The complexities of abuse and neglect can significantly compromise a person's ability to seek support and redress. The ICB has a clear intention through this policy to encourage a positive impact upon patients and to protect and support all who are at risk from abuse and harm.

- 16.4 The ICB is committed to ensuring that it treats both employees and services fairly, equitably and reasonably and that it does not discriminate against individuals or groups on the basis of their ethnicity, gender, sexual orientation, age, religious beliefs or disability.
- 16.5 This policy takes into account the diverse needs of the community that we serve in Derby and Derbyshire.

17. DUE REGARD

This policy has been reviewed in relation to having due regard to the PSED of the Equality Act 2010 to eliminate discrimination; harassment; victimisation; to advance equality of opportunity; and foster good relations between the protected groups

18. REVIEW AND MAINTENANCE OF POLICY

18.1 Monitoring and review of policy

- 18.1.1 Each respective directorate is responsible for ensuring their policies are reviewed in a timely manner. When a policy is approaching a review date, the Director of Corporate Delivery, who is responsible for maintaining the ICB Policy Log, will liaise with the relevant team to ensure the review and approval of the policy is being undertaken.
- 18.1.2 The policy is reviewed every two years, except where national guidelines, legislation or service requirements indicate an earlier review.
- 18.1.3 Any new legislation/national guidance or change to operational procedures that may warrant significant changes to the policy document should also initiate an earlier re-approval date.
- 18.1.4 Minor amendments made during the policy document life-cycle do not require re-approval but these should be clearly stated within the control record and highlighted to staff, if necessary.
- 18.1.5 No policy document will lapse until the revised policy has been approved (even if the review date has expired), however, it must be apparent that the policy has been regularly reviewed by the responsible person to ensure it is still fit for purpose.
- 18.1.6 This policy must be read in conjunction with the Derbyshire & Derby City Safeguarding Adult Boards Multi-Agency Safeguarding Adult Policy and Practice Guidance.

Minimum requirement to be monitored	Responsible individual/ group/ committee	Process for monitoring e.g., audit	Frequency of monitoring	Responsible individual/ group/ committee for review of results	Responsible individual/ group/ committee for development of action plan	Responsible individual/ group/ committee for monitoring of action plan
ICB Safeguarding children and adult policies are reviewed and in line with national and local guidance.	Assistant Director for Children and the Assistant Director for Safeguarding adults are responsible in reviewing their Safeguarding policies to ensure that they are up to date and fit for purpose	Working together 2018 statutory guidance and Care Act 2014	Every two years but earlier if new guidance / legislation occurs	The ICB Safeguarding children, looked after children and adults' collaboration meeting will review the updated policy and approve. The approved Policy will then be shared with the ICB Quality and performance group and with ICB Clinical Governance team	Assistant Director for Children and the Assistant Director for Safeguarding adults are responsible for the development of the action plan.	The ICB Safeguarding children, looked after children and adults' collaboration meeting. Oversight of action being completed -ICB Board
As above	Assistant Director for Children and the Assistant Director for Safeguarding adults are responsible in reviewing their Safeguarding policies to ensure that they are up to date and fit for purpose	Production of safeguarding annual reports and reports for ICB meetings such as (Quality and Safety, Quality and performance and system Quality) which reflects activity, performance and data in relation to Safeguarding.	Annual reports and quarterly reports to ICB Quality and Safety Group. Reports to quality and performance and system Quality as requested.	Annual reports are approved by the ICB Safeguarding children, looked after children and adults' collaboration meeting and then shared with the ICB Quality and Safety group and then the ICB Board.	Assistant Director for Children and the Assistant Director for Safeguarding adults lead on the production of the annual reports for safeguarding children and adults.	The ICB Safeguarding children, looked after children and adults' collaboration meeting are responsible for approving the Safeguarding annual reports so that they can then be shared within the ICB assurance forums as indicated in the ICB governance handbook. Oversight of action being completed -ICB Board

Minimum requirement to be monitored	Responsible individual/ group/ committee	Process for monitoring e.g., audit	Frequency of monitoring	Responsible individual/ group/ committee for review of results	Responsible individual/ group/ committee for development of action plan	Responsible individual/ group/ committee for monitoring of action plan
As above	Polices are added to websites by the Safeguarding Administration team	Safeguarding children and adult policies will be made available for members of staff to refer to via the ICB staff and public facing website.	Policies on ICB websites are uploaded once safeguarding Policies have been updated / reviewed so that the most up to date version is available to view.	Safeguarding Administration team review website has the up to date policies made available.	Assistant Director for Children and the Assistant Director for Safeguarding adults lead is responsible in updating Policies and any actions required being undertaken	The ICB Safeguarding children, looked after children and adults' collaboration meeting. Oversight of action being completed -ICB Board
To ensure effective safeguarding structures are in place to support policy delivery.	Assistant Director for Children and the Assistant Director for Safeguarding adults	Regular review of the safeguarding children and adult team structures and assurance that team are fulfilling their statutory functions.	Every quarter	The ICB Safeguarding children, looked after children and adults' collaboration meeting.	The ICB Safeguarding children, looked after children and adults' collaboration meeting.	The ICB Safeguarding children, looked after children and adults' collaboration meeting. Oversight of action being completed -ICB Board
To ensure effective governance forums are operating in the ICB where safeguarding reports to.	Assistant Director for Children and the Assistant Director for Safeguarding adults are responsible for ensuring safeguarding reporting processes in place.	ICB Governance structure / handbook	6 monthly	The ICB Safeguarding children, looked after children and adults' collaboration meeting.	The ICB Safeguarding children, looked after children and adults' collaboration meeting.	The ICB Safeguarding children, looked after children and adults' collaboration meeting. Oversight of action being completed -ICB Board

Minimum requirement to be monitored	Responsible individual/ group/ committee	Process for monitoring e.g., audit	Frequency of monitoring	Responsible individual/ group/ committee for review of results	Responsible individual/ group/ committee for development of action plan	Responsible individual/ group/ committee for monitoring of action plan
To ensure delivery of safeguarding children and adult training programme	Assistant Director for Children and the Assistant Director for Safeguarding adults are responsible	Safeguarding Training strategy and Safeguarding training programme	Yearly	The ICB Safeguarding children, looked after children and adults' collaboration meeting	The ICB Safeguarding children, looked after children and adults' collaboration meeting	The ICB Safeguarding children, looked after children and adults' collaboration meeting. Oversight of action being completed -ICB Board

19. ASSOCIATED POLICIES

- Domestic Abuse Policy
- Prevent Policy
- [Managing Safeguarding Allegations Against Staff](#)⁴
- [Safeguarding Children Policy](#)⁵

⁴ <https://www.england.nhs.uk/publication/managing-safeguarding-allegations-against-staff-policy-and-procedure/>

⁵ <https://joinedupcarederbyshire.co.uk/your-services/safeguarding/safeguarding-children/#Resources><https://intranet.ddicb-nhs.uk/practice-area/safeguarding/safeguarding-children/resources/>

Appendix 1 – Raising a Safeguarding Concern

1. ALERTING

You are concerned that abuse, mistreatment, or neglect has or may have occurred

Assess immediate safety needs and wishes of the person at risk

Discuss with your line manager at the earliest opportunity

Make a written record of your concerns and any communications that you have had with others. Secure the information safely

If you or your manager require advice prior to making a referral then contact the CCG Safeguarding Adults Team

2. REFERRING

If you are sufficiently concerned then you must make a safeguarding referral

This can be done by contacting the appropriate **Local Authority**:

Derbyshire County Council 01629 533190 (24 hours)

Derby City Council 01332 642855 (out of hours: 01332 786968)

Adult Safeguarding advice on referral, policy, training and Prevent is available from:

Assistant Director for Safeguarding Adults & Prevent Lead

Telephone: 07900 545354 or 01332 868810

Designated Nurse for Safeguarding Adults/MCA Lead

Telephone. 07909 097615

Safeguarding Adults Manager

Telephone: 07979 511384 or 01332 868823