



# Safeguarding & Mental Capacity Act Policy and Procedures

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Adults, young people and children

<b>Policy Name:</b>	Safeguarding & Mental Capacity Act Policy and Procedures
<b>Version Number:</b>	3
<b>Ratified By:</b>	Melvin Bradley
<b>Ratified Date:</b>	30/09/2024
<b>Review Period:</b>	2 Years
<b>Review Date:</b>	September 2026

## Contents

1. Aim.....	3
2. Scope of this policy .....	3
3. Legislative Framework.....	3
4. MhIST safeguarding objective.....	3
5. Definitions (Child) (Working Together 2018).....	4
6. Definitions (Adult) .....	4
7. Key Principles for adult safeguarding.....	5
8. What to do if you are concerned about an Adult / Child.....	5
9. Safe Recruitment.....	6
10. Sharing information .....	6
11. Allegations against staff and volunteers .....	7
12. Whistleblowing .....	7
13. Training and supervision .....	7
14. Safeguarding Lead.....	7
15. Safeguarding statement .....	7
16. Mental Capacity Act 2005 (MCA) & Best Interest Decisions.....	7
17. Deprivation of Liberty Safeguards (DoLS).....	9
18. Useful Local Safeguarding contact details .....	10
19. References and other relevant legislation and guidance .....	10
20. Appendix 1.....	13
21. Appendix 2 – Safeguarding Adult Process.....	14
22. Appendix 3 – What to do if you are concerned about a child.....	15
23. Appendix 4 – Organisational Safeguarding Structure .....	16
24. Appendix 5 – Internal escalation procedure for concerns.....	17
25. Appendix 6 – Safeguarding and Incident tracking .....	17

## 1. Aim

Safeguarding is everyone's business. MhIST believes that it is always unacceptable for adults, young people and children to experience abuse of any kind and recognises its responsibility to safeguard the welfare of all adults at risk in line with The Care Act (2014) and The Children's Act (1989 /2004). The aim of this policy is to ensure that MhIST safeguards the welfare of adults, young people and children who may be at risk and are able to recognise the signs and respond appropriately to allegations of abuse. We aim to achieve this by ensuring that MhIST complies with statutory and local guidance for safeguarding and promoting the welfare of children, young people and adults at risk by creating a safe environment.

## 2. Scope of this policy

This policy and procedure applies to all MhIST staff, volunteers and visitors whose work brings them into contact with adults, young people and children that may be at risk of abuse or neglect.

## 3. Legislative Framework

### Adults

The Care Act (2014) and corresponding guidance (Department of Health, 2014) is new legislation about care and support for adults in England. The Care Act outlines key principles for supporting adults who have been or are at risk of abuse or neglect and; provides a framework for local authorities and partner organisations for making safeguarding enquiries.

### Children

The standards in this policy incorporate legislation and Government expectations in respect of children. This includes The Children Act 1989 & 2004 and the Government's Every Child Matters agenda. In 2010 HM Government issued 'Working Together to Safeguard Children'. The guidance is for statutory and voluntary organisations alike and covers all the expectations of Government in relation to safeguarding children in England. This was updated in 2018.

## 4. MhIST safeguarding objective

Our objective is to keep adults, young people and children at risk safe by:

- Preventing abuse and neglect wherever possible.
- Supporting adults, young people and children in a way that supports them in making choices and having control about how they want to live.
- Taking all safeguarding enquiries seriously and acting upon them.
- Raising awareness about what abuse is, how to stay safe and how to raise a concern about the safety or wellbeing of an adult, young person or child.
- In safeguarding adults and those children aged between 16–18, we will always consider the best interests of the individual at risk in line with The Mental Capacity Act (MCA, 2005) and corresponding Code of Practice (sections 16 & 17 for further detail).
- All staff and volunteers are obliged by The Care Act (2014) and The Children's Act (1989/2004) to share information or concerns they may have in relation to harm or neglect being caused to an adult, young person or child at risk.

***Safeguarding is everyone's responsibility': for services to be effective each professional and organisation should play their full part.***

## 5. Definitions (Child) (Working Together 2018)

### Definition of a child

A child is defined in the Children Act 1989 and Children Act 2004, as anyone who has not yet reached their eighteenth birthday. Safeguarding children legislation applies to anyone under the age of 18 because this is the legal definition of a child. Throughout this policy when we refer to a child our meaning (unless otherwise stated) is a person under the age of 18.

### Different types of abuse (Child)

Definitions of abuse are taken from Working Together to Safeguard Children (HM Government, 2018). Abuse is defined as a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). A child may be abused by an adult or adults, or another child or children.

- Physical abuse
- Emotional abuse
- Sexual abuse
- Neglect

## 6. Definitions (Adult)

### What is Safeguarding?

Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect.

### Who is an adult at risk?

Guidance issued under The Care Act 2014 which supersedes the No Secrets guidance (2000) states that:

*".. safeguarding duties apply to an adult who has needs for care and support (whether or not the Local Authority is meeting any of those needs) is experiencing, or at risk of abuse or neglect and as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse or neglect".*

### What is abuse?

Some staff may be particularly well-placed to spot abuse and neglect, as in many cases they may be the only professionals with whom the adult has contact. The adult may say or do things that hint that all is not well. It may come in the form of a complaint, a call for a police response, an expression of concern, or as part of a disclosure during an assessment. Regardless of how the safeguarding concern is identified, everyone should understand what to do, and where to go locally to get help, support and advice. It is vital that professionals, staff and members of the public are vigilant on behalf of those unable to protect themselves.

*The Care Act 2014* defines the following areas of abuse and neglect; they are not exhaustive but are a guide to behaviour that may lead to a safeguarding enquiry. This includes:

- Physical abuse
- Sexual abuse
- Financial or material abuse
- Psychological and/or Emotional abuse
- Neglect and acts of omission
- Self-neglect
- Discriminatory Abuse
- Institutional or Organisational Abuse
- Modern Slavery

- Domestic abuse (*including Stalking & Female Genital Mutilation*)
- Radicalisation to terrorism (*The Government's Counter Terrorism Strategy includes all which focuses on preventing Adults & Children from becoming radicalised/involved with terrorism. For non-urgent support [office hours] you can contact NHS Greater Manchester Integrated Care Prevent lead Kaleel Khan 01204 463390 or email [kaleelkhan@nhs.net](mailto:kaleelkhan@nhs.net) For urgent concerns or in an emergency contact the Police on 999*)

## 7. Key Principles for adult safeguarding

There are a number of principles underpinning the work we carry out with adults and MhIST is guided by the following principles set out in *The Care Act 2014*:

- Empowerment
- Protection
- Prevention
- Proportionality
- Partnership
- Accountability

## 8. What to do if you are concerned about an Adult / Child

Where staff have concerns about the safety of an adult and/or child, they are duty bound to report these concerns to the relevant agency. If the adult and/or child is in immediate danger then contact 999 immediately and then contact your line manager for support. If the safeguarding concerns do not pose an immediate danger then contact your line manager in the first instance, if your line manager is not available then refer to the 'organisational structure' in appendix 4. The management team will then decide if referral to external agencies (including the Local Authority Safeguarding Teams) is required. Should these concerns involve senior members of the organisation, staff should refer to the organisations Whistle Blowing Policy, however this should not delay in following the Local Authority Safeguarding policies and procedures. Staff members must complete an incident form for any safeguarding concerns identified.

Please refer to section 10 for further advice on information sharing.

All staff should ensure that they assist the police or Social Services with investigations as and when required. In the event that someone is clearly at risk of immediate harm then it is appropriate for the reporting member of staff to ring the emergency number (999) to inform the relevant emergency service (as appropriate). The management team must be alerted as soon as is practicably possible in such circumstances.

It is important that the adult is supported throughout the process by the staff member:

- Remaining calm, not showing shock/disbelief and listening carefully.
- Not asking detailed or leading questions.
- Ensuring that any emergency action needed has been taken to ensure immediate safety of the adult and/or child.
- Giving the person appropriate contact details so that they can report any further issues or ask any questions that may arise.

## Procedure for raising concerns and reporting

Please see appendices 2 & 3 and follow your Local Authority policy and procedures in respect of:

Adult - <https://www.bolton.gov.uk/safeguarding-protecting-adults/safeguarding-adults-risk>

Child - <https://www.boltonsafeguardingchildren.org.uk/worried-child>

## 9. Safe Recruitment

MhIST have appropriate systems and procedures in place to ensure the safe recruitment of all staff and volunteers within the organisation who come into contact with adults, young people and children. This should include requirements set out by the Disclosure and Barring Service (DBS).

The ISA Vetting and Barring scheme is designed to identify those people who are considered as 'unsuitable' to work with vulnerable adults and are therefore prevented from obtaining employment in such positions. A responsibility is placed upon employers to identify such people and notify the ISA. They will also be required to check the ISA Vetting and Barring scheme list before offering employment to any new staff that are likely to have regular contact with vulnerable adults.

## 10. Sharing information

Sharing information is an essential part of effective safeguarding practice. It allows multiple staff and/or agencies to build a complete picture of a situation where one individual or agency would be unable to do so. Often it is only when information from a number of sources is shared that it becomes clear that an adult, young person or child is at risk of harm. This then enables early intervention and prevention work to be carried out.

Confidentiality and consent are two key issues, confidential information is information which is personal, sensitive, not already lawfully in the public domain, and shared in confidence or the reasonable expectation of confidence. Confidential information may be shared with the consent of the person who provided it or to whom it relates.

However, before applying consent when sharing confidential information the following circumstances should be considered (consent not required):

- If there is evidence or reasonable cause to believe that an adult, child or young person is suffering or at risk of suffering significant harm, or of causing significant harm to themselves or others, if it is for direct patient care.
- Where an individual 16 years and over lacks capacity to consent supported by the Mental Capacity Act (2005).
- To prevent significant harm to children and young people.

Data Protection legislation supports this and makes sure information can be shared 'legally.' It is therefore important when sharing personal / confidential information the law is applied. Consent is just one of the legal bases.

"The duty to share information can be as important as the duty to protect patient confidentiality" (Caldicott Principle 7)

The failure to share information can put individual's life at risk.

All practitioners should not assume that someone else will pass on information that they think may be critical to keeping a child safe. If a practitioner has concerns about a child's welfare and considers that they may be a child in need or that the child has suffered or is likely to suffer significant harm, then they should share the information with local authority children's social care and/or the police (Working Together, 2018).

For additional guidance click on the link below:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/721581/Information\\_sharing\\_advice\\_practitioners\\_safeguarding\\_services.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/721581/Information_sharing_advice_practitioners_safeguarding_services.pdf)

## **11. Allegations against staff and volunteers**

Adults and Children can be subjected to abuse by those who work with them in any and every setting. All allegations of abuse or maltreatment of adults and/or children by an employee, agency worker, independent contractor or volunteer will be taken seriously and treated in accordance with the Bolton Safeguarding Children Board (BSCB) procedures accessed at:

<https://www.boltonsafeguardingchildren.org.uk/downloads/download/13/managing-professional-allegations> .

Actions may involve the immediate suspension of the staff member while the investigation is carried out.

## **12. Whistleblowing**

MhIST recognises that it is important to build a culture that allows staff to feel comfortable about sharing information, in confidence and with a lead person, regarding concerns about quality of care or a colleague's behaviour. Please see the associated policy 'Whistleblowing policy and procedure'.

## **13. Training and supervision**

All MhIST employees and volunteers receive mandatory training within 6 months of joining the organisation; this includes safeguarding adults and children's training, including training on recognising signs of abuse; duty of reporting; their role in responding to suspected abuse; risk assessment and management. Safeguarding training for Adults, Children, PREVENT & MCA is refreshed every three years for ALL staff and volunteers.

MhIST are committed to ensuring that all staff who have contact with adults at risk or children receive an appropriate level of supervision and support.

## **14. Safeguarding Lead**

The Safeguarding Lead for MhIST is: Melvin Bradley and has day to day responsibility for safeguarding across MhIST

## **15. Safeguarding statement**

All services must display the statement for service users on Safeguarding see **appendix 1** for a copy of the Safeguarding Statement.

## **16. Mental Capacity Act 2005 (MCA) & Best Interest Decisions**

The MCA is applicable to individuals aged 16 years and over. It provides the legal framework to empower people to make certain decisions about themselves or professionals/care providers making decisions on behalf of individuals who lack the mental capacity to make particular decisions at a particular time. The MCA Code of Practice (2007) defines the lack of capacity as:

*'A person who lacks capacity to make a particular decision or take a particular action for themselves at a time the decision or action needs to be taken'.*

MhIST will need to ensure:

- That they meet their statutory responsibilities for people who lack capacity to consent to care and treatment.



- That all relevant employees are aware of their responsibilities under the MCA 2005 and DoLS 2009 framework.
- That staff operate at all times in accordance with the MCA 2005 and the accompanying statutory code of practice.
- That their organisation complies with Care Quality Commission (CQC) requirements for training MCA and DoLS (Outcome 7).

When a healthcare professional is considering undertaking a mental capacity assessment around a specific decision to be made the assessment must be time and decision specific. If there is more than one decision to be made then a capacity assessment should be done for each decision.

This is underpinned by the Mental Capacity Act which sets out 5 statutory principles, the values that underpin the legal requirements in the Act. The Act is intended to be enabling and supportive of people who lack capacity, not restricting or controlling of their lives.

1. A person must be assumed to have capacity unless it is established that he/she lacks capacity.
2. A person must not be treated as unable to make a decision unless all practicable steps to help him/her to do so have been taken without success.
3. A person is not to be treated as unable to make a decision because he/she makes an unwise decision.
4. An act done or a decision made, under this Act for or on behalf of a person who lacks capacity must be done, or made, in his/her best interests.
5. Before any action is taken, or any decision is made, regard must be given to whether the purpose for which it is needed can be effectively achieved in a way that is less restrictive of the person's rights and freedom of action.

**Stage one:** Diagnostic Test:

Does the individual have the signs, symptoms or behaviours that indicate an impairment or disturbance in the functioning of their mind or brain (either permanent or temporary).

**Stage two:** Functional Test, consider if the individual is able to do the following four points:

- To understand the information relevant to the decision.
- To retain that information (for long enough - this is professional judgement).
- To use or weigh that information as part of the process making the decision.
- To communicate the decision (whether by talking, using sign language or any other means).

If the individual is unable to do any one of these four points then on the balance of probabilities they will lack capacity for that specific decision.

For some people, their ability to meet some or all of these criteria will fluctuate over time and it is therefore important that abilities to make decisions are reviewed regularly. Capacity is decided on the balance of probability, this is called the 'reasonable belief test' in other words you should be more sure than not.

## **Best Interests**

Principle 4 of the Mental Capacity Act is that any action undertaken or decision made on behalf of someone who lacks mental capacity must be undertaken or made in the individual's best interest.

The only exception may be when an individual who lacks capacity has previously made an Advanced Decision to refuse specified treatment. For more information refer to the MCA code of practice: <https://www.gov.uk/government/publications/mental-capacity-act-code-of-practice>.

A best interest decision can only be made if the individual has been assessed as 'lacking capacity' to make a specific decision. The process of decision making should be based on the five principles of the MCA and should, first and foremost, involve the person being given all 'practicable' and individualised support to make a decision for themselves. Decisions made should be recorded clearly in the patient's case notes.

The MCA (2005) establishes an advocacy service to provide safeguards for people who lack Capacity to make a decision at the time it needs to be made and are unfriended, including representing the views of the patient in adult safeguarding cases. Contact the local IMCA service for support: [helpline@voiceability.org](mailto:helpline@voiceability.org) or [+44\(0\)300 303 1660](tel:+44(0)3003031660).

All employees and volunteers of MhIST will report any concerns around mental capacity and best interests decisions to the Safeguarding lead and/or Manager who will seek further support from the relevant funding authority (Local Authority or NHS Clinical Commissioning Group) and/or the Bolton Safeguarding Adults and/or Children's Teams.

Employees and volunteers are not expected or qualified to assess the mental capacity of people that use MhIST services. However, there may be times when people who attend MhIST do have fluctuating capacity. In such circumstances MhIST employees and volunteers will endeavour to make contact with suitably qualified staff within the NHS or local authority such as a GP or care co-ordinator.

MhIST employees and volunteers will not administer medication.

## **17. Deprivation of Liberty Safeguards (DoLS)**

Before a DoLS is applied for, there are two questions that should be asked, this is known as the Acid test:

1. Is the person subject to continuous supervision and control and
2. Is the person free to leave

If these areas are in question, an application for DoLS should be made by the Managing Authority or the Funding Authority.

Examples of what constitutes a deprivation of liberty are:

- Using locks or key pads which stop a person going out or into different areas of a building.
- The use of some medication, for example, to calm a person.
- Requiring a person to be supervised when out.
- Holding a person so that they can be given care or treatment.
- Bedrails, wheelchair straps, and splints
- The person having to stay somewhere against their wishes.
- Physically stopping a person from doing something which could cause them harm.

If any employee or volunteer of MhIST is concerned that a service user is being deprived of their liberty and a DoLS is not in place then this must be reported to the safeguarding lead and/or Manager who will contact the Funding Authority (Local Authority or NHS Clinical Commissioning Group) for further support.

## 18. Useful Local Safeguarding contact details

Service Safeguarding Lead	Service Area	Contact
NHS Greater Manchester Integrated Care Safeguarding Adults & Childrens Team	Office hours, Mon-Fri for <b>Non-urgent</b> support only	01204 463390
Bolton Local Authority Adult Safeguarding Team	Office hours, Mon-Fri for Adult safeguarding concerns	01204 337000
Bolton Multi-agency Screening & Safeguarding Service – for Children	Office hours, Mon-Fri for Childrens safeguarding concerns	01204 331500
Bolton Local Authority Emergency Duty Team	Out-of-hours and weekends (for both adult & child safeguarding concerns)	01204 337777

## 19. References and other relevant legislation and guidance

Mental Capacity Act, Deprivation of Liberty safeguards, Code of Practice to supplement the main Mental Capacity Act code of Practice (2008)

[http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_085476](http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_085476)

Human Rights Act (1998)

[http://www.legislation.gov.uk/ukpga/1998/42/pdfs/ukpga\\_19980042\\_en.pdf](http://www.legislation.gov.uk/ukpga/1998/42/pdfs/ukpga_19980042_en.pdf)

Mental Health Act (2007)

[http://www.legislation.gov.uk/ukpga/2007/12/pdfs/ukpga\\_20070012\\_en.pdf](http://www.legislation.gov.uk/ukpga/2007/12/pdfs/ukpga_20070012_en.pdf)

Criminal Justice Act (2003)

[http://www.legislation.gov.uk/ukpga/2003/44/pdfs/ukpga\\_20030044\\_en.pdf](http://www.legislation.gov.uk/ukpga/2003/44/pdfs/ukpga_20030044_en.pdf)

Criminal Justice and Courts Act 2015, section 20-25 for care workers and care providers

<http://www.legislation.gov.uk/ukpga/2015/2/contents/enacted>

Counter Terrorism and Security Act (2015)

[http://www.legislation.gov.uk/ukpga/2015/6/pdfs/ukpga\\_20150006\\_en.pdf](http://www.legislation.gov.uk/ukpga/2015/6/pdfs/ukpga_20150006_en.pdf)

Data Protection Act (1998)

[http://www.legislation.gov.uk/ukpga/1998/29/pdfs/ukpga\\_19980029\\_en.pdf](http://www.legislation.gov.uk/ukpga/1998/29/pdfs/ukpga_19980029_en.pdf)

Safeguarding children and young people: roles and competencies for health care staff. Intercollegiate document (2019)

<https://www.rcn.org.uk/professional-development/publications/pub-007366>

Adult Safeguarding: Roles and Competencies for Health Care Staff. Intercollegiate document (2018).

<https://www.rcn.org.uk/Professional-Development/publications/adult-safeguarding-roles-and-competencies-for-health-care-staff-uk-pub-007-069>

NICE CG89 Child Maltreatment Guidance (2009-11)

<https://www.nice.org.uk/guidance/cg89/evidence/full-guideline-pdf-243694625>

Relationships & Sexuality in Adult Social Care Services

<https://www.cqc.org.uk/sites/default/files/20190221-Relationships-and-sexuality-in-social-care-PUBLICATION.pdf>

MCA 2005

<https://www.legislation.gov.uk/ukpga/2005/9/contents>

MCA Code of Practice 2007

<https://www.gov.uk/government/publications/mental-capacity-act-code-of-practice>

The Care Act 2014

<http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>

The Care Act 2014 guidance

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/366104/43380\\_23902777\\_Care\\_Act\\_Book.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/366104/43380_23902777_Care_Act_Book.pdf)

Disclosure and Barring Service (DBS)

<https://www.gov.uk/disclosure-barring-service-check/overview>

Skills for Care – Codes of Practice

<https://www.skillsforcare.org.uk/resources/documents/Support-for-leaders-and-managers/Managing-people/Code-of-conduct/Guidance-on-the-Code-of-Conduct-for-employers.pdf>

<https://www.skillsforcare.org.uk/resources/documents/Support-for-leaders-and-managers/Managing-people/Code-of-conduct/Guidance-on-the-Code-of-Conduct-for-the-public.pdf>

<https://www.skillsforcare.org.uk/resources/documents/Support-for-leaders-and-managers/Managing-people/Code-of-conduct/Guidance-on-the-Code-of-Conduct-for-support-workers.pdf>

<https://www.skillsforcare.org.uk/resources/documents/Support-for-leaders-and-managers/Managing-people/Code-of-conduct/Code-of-Conduct.pdf>

The Rehabilitation of Offenders Act 1974, 1986 amendment

<http://www.legislation.gov.uk/ukpga/1974/53>

Bolton Safeguarding Children's Partnership (early help and working together)

<https://www.boltonsafeguardingchildren.org.uk/early-help-working-together>

PREVENT and Channel strategy (prevention of radicalisation against terrorism)

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/97976/prevent-strategy-review.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/97976/prevent-strategy-review.pdf)

<https://www.gov.uk/government/publications/channel-and-prevent-multi-agency-panel-pmap-guidance>

Nursing and Midwifery Council (NMC)

<http://www.nmc.org.uk/>

Working Together to Safeguard Children (2018)

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/779401/Working\\_Together\\_to\\_Safeguard-Children.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/779401/Working_Together_to_Safeguard-Children.pdf)

Equality Act (2010) [http://www.legislation.gov.uk/ukpga/2010/15/pdfs/ukpga\\_20100015\\_en.pdf](http://www.legislation.gov.uk/ukpga/2010/15/pdfs/ukpga_20100015_en.pdf)

Children Act (2004)

[http://www.legislation.gov.uk/ukpga/2004/31/pdfs/ukpga\\_20040031\\_en.pdf](http://www.legislation.gov.uk/ukpga/2004/31/pdfs/ukpga_20040031_en.pdf)

Promoting health and wellbeing of Looked After Children (LAC) (2015)

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1100188/Promoting\\_the\\_health\\_and\\_well-being\\_of\\_looked-after\\_children\\_August\\_2022\\_update.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1100188/Promoting_the_health_and_well-being_of_looked-after_children_August_2022_update.pdf)

Corporate parent principle, Young People Leaving Care

<https://www.bolton.gov.uk/downloads/file/2209/corporate-parenting-five-minute-facts>

<https://www.bolton.gov.uk/children-care/young-people-leaving-care-local-offer/6>

## 20. Appendix 1.

### Safeguarding statement for MhIST

MhIST believes that it is unacceptable for anyone to experience abuse of any kind and recognises its responsibility to safeguarding the welfare of all adults, young people and children by a commitment to practice which protects them.

Abuse may consist of a single act or repeated acts. It may be physical, verbal or psychological, it may be an act of neglect or an omission to act, or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented, or cannot consent. Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it.

Abuse of adults at risk, young people or children may be perpetrated by a wide range of people including relatives, family members, professional staff, paid care workers, volunteers, other service users, neighbours, friends and associates, people who deliberately exploit vulnerable people and strangers.

It is not always obvious when someone is being abused, there may be specific signs or your instincts may tell you something is wrong. Abuse is never acceptable in any circumstances and everyone has the right to be safe. Safeguarding adults, young people and children is everyone's business.

Working in partnership with the community and safeguarding authorities MhIST aims to make sure that adults at risk using its services are listened to and protected from abuse. MhIST staff must report all incidents or concerns they have relating to the wellbeing of an adult at risk, young person or child.

Members of the public who have concerns should follow guidance offered by their local Adult Safeguarding Board or Children's Safeguarding Board.

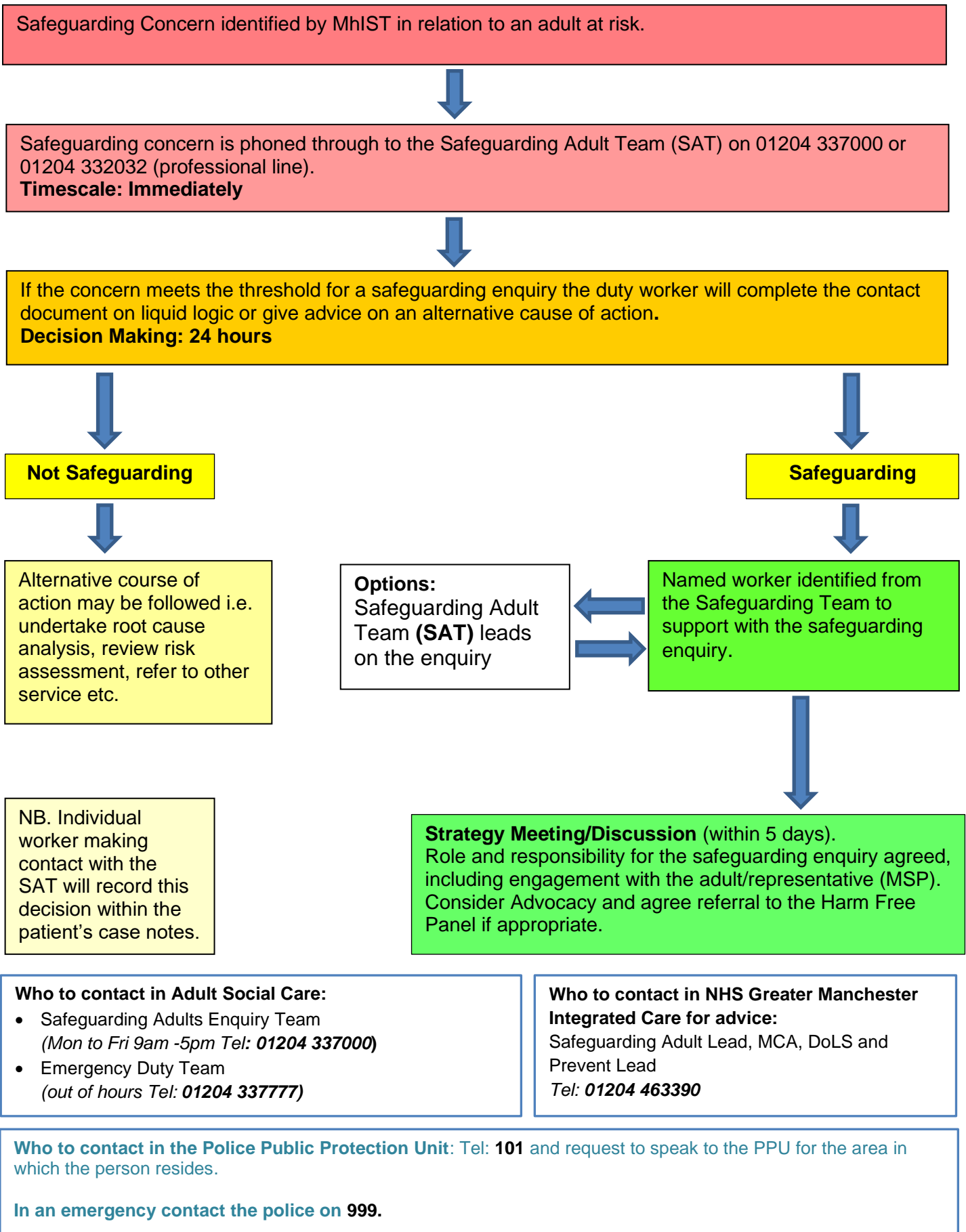
If you wish to notify or log a safeguarding concern about an adult at risk, young person or child accessing MhIST you can contact the Local Safeguarding Teams as follows:

If anyone is in immediate danger of being harmed, call the police on 999.

Otherwise, for concerns about a child or young person ring **01204 331500** between 9.00am and 5.00pm, or **01204 337777** out of hours.

For concerns about an adult ring **01204 337000** between 9am and 5pm, or **01204 337777** out of hours.

## 21. Appendix 2 – Safeguarding Adult Process



Staff should update their knowledge by accessing regular training and be familiar with local safeguarding policies, including those of Bolton Safeguarding Adults Board.

## 22. Appendix 3 – What to do if you are concerned about a child.

<b>WHAT TO DO IF YOU ARE CONCERNED ABOUT A CHILD</b>	
<p>If a child is at imminent risk of death or has significant injuries.</p> <ul style="list-style-type: none"> <li>• Medical treatment and police involvement via 999 should be sought immediately.</li> <li>• A telephone referral should be made to Childrens Social Care (see below).</li> </ul>	
<p>If there are concerns that a child is at risk of significant harm or is in need of protection.</p> <ul style="list-style-type: none"> <li>• A telephone referral may be made to Childrens Social Care via the Integrated Front Door (IFD). Tel: 01204 331500.</li> <li>• For out of hours concerns contact the emergency duty team. Tel: 01204 337777.</li> <li>• Consent is not required but it is good practice to tell the family that a referral is being made unless that puts the child at increased danger.</li> <li>• Record your discussions clearly including clear rationale as to why you have made the referral and the risk factors involved.</li> <li>• Telephone referrals must be followed up with the online referral form within 1 working day via this link <a href="https://www.boltonsafeguardingchildren.org.uk/worried-child">https://www.boltonsafeguardingchildren.org.uk/worried-child</a>.</li> </ul>	
<p>For requests for Childrens Services support including child in need and targeted early help that are not immediate safeguarding or significant harm concerns.</p> <ul style="list-style-type: none"> <li>• An online referral form must be completed via this link <a href="https://www.boltonsafeguardingchildren.org.uk/worried-child">https://www.boltonsafeguardingchildren.org.uk/worried-child</a></li> <li>• Consent will usually be required unless a clear and justifiable rationale is provided in the referral</li> <li>• Record your referral information clearly in your records as you do not receive a copy of this referral form</li> </ul>	
<p>If you require advice, guidance or support around early help you may call 01204 331501 or email <a href="mailto:earlyhelp@bolton.gov.uk">earlyhelp@bolton.gov.uk</a></p>	
<p>If you wish to access specific information about a child from Children's service.</p> <ul style="list-style-type: none"> <li>• An online request form must be completed via this link <a href="https://www.bolton.gov.uk/safeguarding-protecting-children/reporting-child-abuse/1">https://www.bolton.gov.uk/safeguarding-protecting-children/reporting-child-abuse/1</a></li> </ul>	
<p><u>If you need advice or guidance on a safeguarding matter you may contact:</u></p> <ul style="list-style-type: none"> <li>• Your practice safeguarding lead.</li> <li>• The Health Practitioner within the IFD. Tel: 01204 331824</li> <li>• The IFD advice line. Tel: 01204 331500 and select 'option 3'.</li> <li>• The safeguarding Team at GMICB, Bolton Locality. Tel: 01204 463390 (answer machine).</li> </ul>	

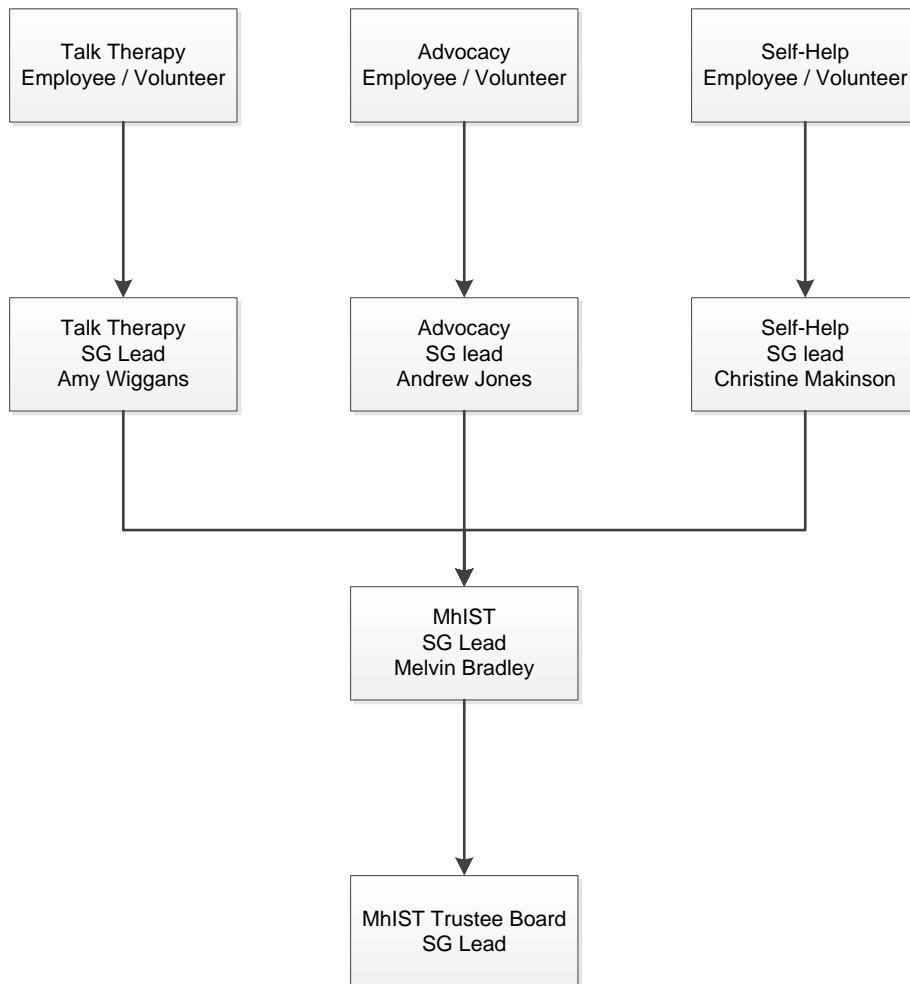
### CONTACT DETAILS

Bolton's Integrated front Door (IFD) (Childrens Social Care) Office hours only – 09:00am – 5:00pm	01204 331500
Integrated front Door (Out of hours)	01204 337777
Local authority designated officer (LADO)	01204 337474 Email: <a href="mailto:Boltonsafeguardingchildren@bolton.gov.uk">Boltonsafeguardingchildren@bolton.gov.uk</a>
Advice re Early Help	01204 331501 Email <a href="mailto:earlyhelp@bolton.gov.uk">earlyhelp@bolton.gov.uk</a>
Health Practitioner in IFD	01204 331824
GMICB Safeguarding team	01204 463390 Email <a href="mailto:gmicb-bol.safeguardingandlac@nhs.net">gmicb-bol.safeguardingandlac@nhs.net</a>
Fortalice (IRIS)	01204 365677 – 24 hour line (quote IRIS)
Forced Marriage Unit	020 7008 0151
GM Chancel Support Team	0161 856 1013



## 23. Appendix 4 – Organisational Safeguarding Structure

# MhIST – Organisational Safeguarding Structure



## 24. Appendix 5 – Internal escalation procedure for concerns

This document outlines the procedure for escalation of concerns within MhIST. The equivalent procedure outside of MhIST can be found in appendices 2 (adults) and 3 (children/Young people). This is an embedded document. Double click on it to open.



Traffic Light-  
Appendix 5.pdf

## 25. Appendix 6 – Safeguarding and Incident tracking

MhIST uses an online system to record, track and report on all incidents and safeguarding concerns.

All employees and volunteers are provided with a web link to our secure tracking system via their computer desktop.

The questions which the system asks are as follows:

### Concern / Incident Form

This is the form used to capture information about a concern, incident or worry you have about someone you are working with.

Required \*

1. This form will record your name, please fill your name. \*

2. Who is your team leader? \*

- Elaine [Administration]
- Andrew [Advocacy]
- Amy [Talk Therapy]
- Christine [Self Help]
- Other

3. What is today's date? \*

4. What is the date of the concern / incident you are reporting? \*

5. Why are you completing this form? \*

- Concerns for safety of an individual. – As agreed or Emergency contact to police
- Concerns for safety of others – Police
- Adult protection – Adult safeguarding team
- Child protection – Children's safeguarding team
- Terrorism - Police
- Treason - Police
- Other

6. What is the concern / incident and why are you worried? (Give all the details and be specific) \*

7. What is this person's relationship to MhIST? \*

- Service user / Client / Member / Patient
- Volunteer
- Employee
- Contractor
- Other

8. Who else have you contacted [police, safeguarding, CMHT, GP, etc] include names where possible?

9. Does this report concern suicide? \*

- Yes
- No

10. Risk level identified / STORM assessment

- None
- Low
- Medium
- High
- Very high
- Not applicable

11. Planned method

- Yes
- No
- Not applicable

12. Lethal means available

- Yes
- No
- Not applicable

13. Lethal means secured and signed for, if appropriate?

- Yes
- No
- Not applicable

14. What was the outcome, if known? (if contacting emergency services ask them for a follow up call)