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| **DOCUMENT TITLE:** | **Safeguarding Adults Protocol (HMP Wymott)** |
| **CATEGORY:** | Governance and Quality |
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| **OWNED BY:** | Head of PSI and HMP Services |
| **RELATED DOCUMENTS:** | Delphi Safeguarding (Adults) Policy |

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| **OUR PRINCIPLES:** | With passion and excellence, Delphi makes a  difference to people’s lives by providing innovative and specialist addiction services that lead the way from dependence to freedom. |
| **OUR VALUES:** | We all commit to and care about: going one step further with our clients; our wellbeing as individuals and as teams; and improving and strengthening ourselves and our organisation. |

**Safeguarding Protocol (HMP Wymott)**

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| The conditions that need to be in place, or the things that need to be done BEFORE the process can run effectively | |
| Staff are qualified to perform their roles | All managers must work with the HR department to ensure that the company’s Recruitment Policy is adhered too, ensuring appropriate qualifications and experience of the workforce.    The HR department must ensure that all staff receive the appropriate employment checks, to include Disclosure and Barring (DBS), professional registration/qualifications, and references, in all instances without exception.    DBS and professional registration checks will take place upon commencement of employment, and regularly throughout. |
| Staff understand what safeguarding is, and are supported in their roles | All staff must read the Delphi Safeguarding Policy and must discuss any questions they have about the Safeguarding Policy or this protocol, with their manager.    Upon joining Delphi Medical, all staff must undertake the corporate induction, which includes safeguarding training and area specific process information.    All managers must ensure that the staff they manage have completed the above steps before they commence individual work with clients.    All managers across the company must attend the Leadership Training programme and offer staff regular support in the form of supervision, appraisal and general support.    Where safeguarding incidents occur, an additional de-Brief must occur. |

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|  | Managers must make staff aware of additional support available, including:   * LifeWorks – provides fully confidential telephone counselling on all matters from mental health, legal issues, childcare issues and much more, 24 hours a day to you and your immediate family. Contact details are available via QUIP <https://quip.calico.org.uk/> * Accredited Mental Health First Aiders across the company. Find your local Mental Health First Aider on QUIP: <https://quip.calico.org.uk/>. * Additional support is available from the wellbeing team: [wellbeing@calico.org.uk](mailto:wellbeing@calico.org.uk)     The SLT must monitor the level of support that is provided to staff, to ensure it is adequate, effective, and consistent. |
| Staff have completed safeguarding training | Annual safeguarding training is mandatory, for all staff working within the company.    Additional training is encouraged. Managers must discuss training via supervision.    All staff must undertake mandatory annual training on equality, and work within the  parameters of the company’s Equality policy.    All staff must undertake annual mandatory training on the Mental Capacity Act and work within its parameters.    All staff must undertake record keeping training and understand how to navigate the client record system.    All staff must undertake GDPR training and understand how to operate within the parameters of information sharing laws. |



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|  | The HR team monitor mandatory training, and report compliance to the Delphi management team. |
| Effective systems are in place | The Service Manager must ensure that appropriate and effective client record keeping systems are in place.    The Service Manager and named Leads must ensure that appropriate *safeguarding paperwork* is in place, and that staff know how to access.    Managers must ensure that staff have access to the Incident reporting system and client electronic record (SYS1). |
| Partnership working in place | Partnership arrangements are in place with:   * Her Majesty’s Prison (HMP) Disability   Liaison Officer,   * HMP Officers on all wings where staff work, * Discharge Board, * Assessment, Care in custody and Teamwork (ACCT), * Police Liaison via the security team, * Greater Manchester Mental Health - Healthcare Services, * Safer Custody Team.     The Service Manager must take overall responsibility for the development and the sustaining of positive relationships. All staff must assist this cause by working effectively and positively with all partners. |

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| The things that need to be done DURING the process so that is runs without friction | |
| Safeguarding information is gained proactively. | Actively listen.  Ask questions in an appropriate manner. What  can you see? Have you been professionally curious? |

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|  | Determine:   1. What are the concerns? 2. How does the adult wish for the concern to proceed? 3. What changes or support would they like because of this concern being raised? |
| Responses are appropriate and in a timely manner. | Take action to ensure the immediate safety and welfare of the person at risk.   1. Does medical attention need to be organised? (Request first response using a radio, if this is not available the next options are pressing the general alarm or calling 222.) 2. Is urgent police presence required? (The above system will trigger HMP support too if required call for police presence or the police liaison) 3. Has a crime been committed, and does it need to be reported? (Report through safer custody and the police liaison) and preserve forensic evidence (if applicable) |
| Clients are assessed to ensure they have capacity to keep themselves safe and make their own decisions. | Assess mental capacity: Sys1 paperwork    SYS1 image of MCA.zip |
| Staff discuss and/or escalate concerns appropriately. | All safeguarding concerns must be discussed with the Area lead or Service Manager.  The named responsible persons for HMP Garth and Wymott are:  Claire Illingworth 07834825408  Kate Cookson 01772 443585/ 01772 442197    Where these members of staff are unavailable staff must contact a manager, or a member of the Delphi Senior Leadership Team.    Other useful contacts for advice: |

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|  | * Prison Safer Custody 01772442115 (W) * Prison Equalities and disability- 01772442017 (W) * Prison Police Liaison- 01772442300 (W) * Domestic Abuse Helpline- Lancashire advise 101 * Care Quality Commission (03000 616161) * Safe net- 0300 3033581 * Respond (Support for people with Learning Disabilities) – 0808 8080700 * Women’s Aid England – 0808 2000247 * Victim Support – 0845 3030900 * Asian Women’s Project – 0161 455 0211 * Refuge National Crisis Line – 0990 995443 * MIND – (Mental Health) 0845 766 0163 * Adfam National – 0207 9288898 * Samaritans: National Helpline - 24 hours –   116 123 |
| Referrals are appropriate and in a timely manner.  Timescales:  How: | Information should be shared in line with Delphi’s Information Governance Policy, to ensure appropriate and legal information sharing that aligns with confidentiality and GDPR requirements.     * Refer immediately where the concern is urgent and serious * Refer within the same working day for all concerns.      1. Telephone call to safer custody     \*If the allegation is related to Domestic Abuse the following actions must be completed in addition.     1. HMP Information report 2. Report to security for police liaison   \*If the allegation is related to a social need/ welfare |

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|  | 2. Inform the Disability Liaison Officer  \*If the concern relates to self harm  2. Open an ACCT and refer to safer custody. |
| Client records are accurate and record professional decision making and actions taken. | Client records should be completed and kept consistently up to date, in line with Delphi’s Record Keeping Principles.    Where records may be seen by the alleged abuser (e.g., if they are a staff member), please refer to a named responsible person.    Document the incident and any discussions, actions or decisions taken.     1. Complete client electronic record on SYS1 and update care plan with any actions to support risks.      1. Scan and upload any referral forms to the SYS1 record      1. Complete and submit a safeguarding incident on incident reporting system      1. Attach any completed referral forms to the incident report. |
| Safeguarding concerns, allegations and incidents are appropriately reported to CQC. | A safeguarding incident is reported as above via the incident reporting system.    If the incident relates to a person who is affected by abuse, affected by alleged abuse, an abuser or an alleged abuser, Corporate Services will forward a CQC notification form to the Manager for completion.    Corporate Services will forward complete CQC notification form to CQC within 72hrs.    The Manager will support and feedback to the person who identified the safeguarding concern. |

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| Audits take place | Corporate Services, in conjunction with the Service Manager, must complete regular (announced and unannounced) audits, in line with Delphi’s audit schedule.    Corporate Services, in conjunction with the Service Manager, must complete a full case management audit relating to all CQC referrals.    The outcome of audits must be discussed at supervision, team, and management meetings. This will be checked by the Senior Leadership Team. |
| Incidents are reported and lessons are learnt. | All near misses, incidents, safeguarding incidents and death of a client must be reported in line with Delphi’s Incident Policy and Protocol using Incident reporting system.    Lessons learnt are discussed at the monthly managers meeting and cascaded to all staff via the team meeting. Discussions must be facilitated and encouraged by the management team.    Individual staff improvements required are managed via supervision and the Performance Policy where appropriate.    Operational changes will be discussed and agreed at the monthly Managers Meeting and cascaded to all staff via the team meeting. |
| Cases of best practice are shared and discussed. | Best practice examples must be discussed at the monthly Managers Meeting and cascaded to all staff via the team meeting.    Discussions must be facilitated and encouraged by the management team. |
| Safeguarding is consistently discussed. | Safeguarding is an agenda item at every supervision, team, and management meetings. |

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|  | Ideas for improvements, innovative practices should be consistently encouraged by all line  managers. |
| The Senior Leadership Team is advised of issues/ concerns. | All members of the Senior Leadership Team are advised immediately by the incident system (via email) that a Safeguarding incident has been submitted.    Additionally, at the monthly Managers Meeting, the managers must prepare any items to escalate to the monthly Senior Leadership  Team meeting. |

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| The conditions that must apply AFTER the process is finished, for us to deliver the required outcomes |
| All Delphi clients are effectively safeguarded |
| Safeguarding practice is in line with all legislation and guidance |
| Client records reflect all the work taking place |
| Staff welfare is supported |