

## **SCHEDULE 12 –SAFEGUARDING SPECIFICATION**

1. The Provider is expected to demonstrate compliance with CQC Essential Standards of Quality and Safety, Outcome 7: ‘Safeguarding people who use services from abuse’, and Regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.
2. Where applicable, the Provider is expected to demonstrate compliance with the ‘Safeguarding Adults: Multi-agency policy and procedures for the West Midlands’  
<http://www.bsab.org/publications/policy-procedures-and-guidance/>
3. Where applicable, the Provider will have in place Child Protection Procedures that are consistent with the Statement of Principles found in Sections 1 and 2 of the Birmingham’s Safeguarding Children Board Child Protection Procedures. Guidance for external organisations is provided in “Good Practice in Child Protection: A Framework for Voluntary and Independent Organisations” which should be used as a template, or to inform a Provider’s own Procedures (see [www.lscbbirmingham.org.uk](http://www.lscbbirmingham.org.uk)).
3. Providers will:
  - Have a clearly stated policy commitment to work to the West Midlands guidelines/vision for the implementation of safeguarding systems across the city.
  - Raise multi-agency alerts promptly in cases where abuse is suspected and:
    - Attend/contribute to Safeguarding meetings as required;
    - Share relevant information in line with West Midlands procedures guidance;
    - Contribute to any safeguarding plans drawn up to protect children, young people and adults at risk; and
    - Co-operate and engage fully with the Safeguarding process and document involvement as required.
  - Have a clearly stated policy commitment to deliver on the ‘Dignity and Respect’ agenda, covering how staffs interact with users of their service.

- Where applicable, have a policy statement on the application of the Mental Capacity Act 2005 principles. In cases where adults at risk lack mental capacity, the Provider must demonstrably work within the framework of the Mental Capacity Act 2005 at all times - evidencing how capacity has been assessed and how best interests decisions have been reached, and demonstrating that the Provider has made every effort to maximise the adults at risk ability to make decisions for themselves wherever possible.
- Where applicable, the Provider should have a policy statement on the application of the Deprivation of Liberty Safeguards (DoLS) and must evidence full compliance with statutory requirements around DoLS in cases where occasional restraint has become an ongoing deprivation of liberty.
- The Provider must have a policy statement on the use of restraint, recognising the many different forms restraint can take. This will include a commitment to minimum intervention and best interests where there is any intervention of restraint and:
  - The Provider should record each occasion in which any form of restraint has needed to be used, and evidence that any such use of restraint has been appropriate and proportionate.
  - Where the use of restraint is ongoing, clear guidelines, risk assessment and management plans should be made explicit in individual care plans.
  - Provide evidence of reflection and learning following incidents, of consultation with relevant professionals, and of adopting preventative strategies wherever possible.
- The Provider must comply with the Birmingham Safeguarding Adult's Board's *Protocol for responding to concerns about a person in a position of trust*.
- The Provider must comply with the requirements and principles of the *Multi-agency policy & procedures for the protection of adults with care & support needs in the West Midlands*
- The Provider must nominate a safeguarding adults lead and a Mental Capacity and Deprivation of Liberty Lead to develop and oversee best practice in relation to adult safeguarding and the application of the principles of the Mental Capacity Act within the service.

4. The Provider must promote a culture of awareness around safeguarding issues, dignity and respect, and Mental Capacity. This not solely within the staff group but also with Service Users, carers and visitors; making reference to Safeguarding processes and to it's commitment to a multi agency response to suspected abuse in its promotional literature, complaints procedures, and Service User guides and so on.
5. The Provider will demonstrate commitment to training leading to informed and improved practice. The Provider will have a comprehensive Safeguarding training programme which should include elements of: Restraint, Mental Capacity Act, DoLS, and 'Dignity and Respect', and whistle-blowing are covered in. This programme should be delivered as part as:
  - the Employee training programme;
  - induction programme for all new Employees;
  - ensure Employees receive more enhanced Safeguarding training within the first year of employment; and
  - ensure all Employees undertake refresher training at least once every three years thereafter.
6. Providers can access further information, reference documents and materials relating to Safeguarding via Birmingham Safeguarding Adults Board (<http://www.bsab.org/> and [www.lscbbirmingham.org.uk](http://www.lscbbirmingham.org.uk) )

### **Measures**

The Provider shall ensure the following when performing the Services:

- Appropriate referrals;
- Employee knowledge of Safeguarding and Safeguarding process;
- Employee knowledge of restraint, DoLS, MCA and appropriate implementation;
- Training and implementation of training records; etc

**Handling Service User Finances**  
**(Home Support Services for Children and Young People with Disabilities)**

The Service Provider shall have a clear policy and procedure in relation to its Employees handling money on behalf of Service User's and their families whilst providing the Service. In particular this may occur during activities, day trips, residentials and holidays. The Service Provider's policy and procedures shall be in accordance with the Council's policies and procedures and will include:

- child's liability for payments;
- roles and processes to be followed by the Service Provider's Employees;
- procedures on completing written records;
- resolving disputes between the Service User the Service Provider;
- financial investigations/misappropriation of funds;
- process of internal/external investigations;
- inform the Council of any concerns;
- The policy must also state that the receipt of gifts and hospitality by Employees is prohibited; and
- Providers or their Employees shall not accept financial inducements, be made the beneficiary of a will or obtain any other financial benefits from the user

**All Employees must be given written notification of the policy**