



Safeguarding Adults Reviews Policy and Procedures

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INTRODUCTION

- 1.1** This document has been developed by the Royal Greenwich Safeguarding Adults Board to support the effective identification of, and response to SARs, within the Borough and to support the Board in discharging its statutory duty. It describes the process to follow and is informed by the statutory text and complements the London Multi-Agency Safeguarding Policy and Procedures
- 1.2** It is important to stress that a SAR is not a 'second stage' safeguarding process. It is a discrete process that looks at whether harm, neglect or abuse could have been prevented and there is a concern that partner agencies could have worked more effectively together, usually in the most serious of cases.
- 1.3** Section 44 of the Care Act 2014, requires that Safeguarding Adult Boards are responsible for Safeguarding Adult Reviews (SARs). Paragraphs 14.162 to 14.179 of the Care and Support Statutory Guidance sets out in more detail those factors that trigger the SAR process as well as the guiding principles and process.
- 1.4** It is most important that the SAR process is something that delivers learning and real change – the challenge can be ensuring that themes and actions aren't repeated and that expectations about what the SAR can achieve is communicated.

2 PURPOSE OF A SAFEGUARDING ADULTS REVIEW

- 2.1** The purpose of a SAR is to determine what the relevant agencies and individuals involved in the case might have done differently that might have prevented harm or death. It is not an enquiry into how a vulnerable adult died nor is it to apportion blame, but to learn from such situations to prevent similar harm occurring again.
- 2.2** Its purpose is not to hold any individual or organisation to account. Other processes exist for that, including criminal proceedings, disciplinary procedures, employment law and systems of service and professional regulation, such as the Care Quality Commission and the Nursing and Midwifery Council, the Health and Care Professions Council, Social Work England and the General Medical Council.
- 2.3** It will be highly likely that a safeguarding process will have been followed in relation to the circumstances being explored by the review. A SAR is not an alternative to a safeguarding enquiry, investigation or process.
- 2.4** The purpose of conducting a SAR is to:
 - establish whether there are lessons to be learnt from the circumstances of the case about, for example, the way in which local professionals and agencies work together to safeguard vulnerable adults
 - review the effectiveness of procedures and their application (both multi-agency and those of individual organisations)
 - inform and improve local inter-agency practice by acting on learning (developing best practice) to reduce the likelihood of similar harm occurring again

- prepare or commission a report which brings together and analyses the findings of the various reports from agencies to make recommendations for future action

2.5 It is acknowledged that there may be processes such as the Learning Disability Mortality Review Programme (LeDeR) or internal and/or statutory review procedures to investigate serious incidents. This policy and procedure is not intended to duplicate or replace these, but it remains a statutory requirement in its own right and will be complemented by other such processes.

2.6 There may be cases where other legal and non-legal review processes are also activated (e.g. Domestic Homicide Review, a Child Protection Serious Case Review, Mental Health Homicide Review). Where it is possible a joint review/investigation should be considered (see draft Memorandum of Understanding with NHS England). The Royal Greenwich Safeguarding Adults Board will liaise with the relevant Boards/NHS England and agencies to ensure that a joint decision is made with regards to who is responsible for leading the review. Where a joint review/investigation is undertaken there should be agreement on the following:

- How the legal elements from each review will be incorporated in the review
- How the review will be conducted and who will Chair the process
- What is contained in the terms of reference
- The final report and its findings and recommendations

3 CRITERIA FOR CONDUCTING A SAFEGUARDING ADULTS REVIEW OR OTHER TYPE OF REVIEW

3.1 **Section 44** of the Care Act 2014 (and the Care and Support Statutory Guidance 2016) states that a SAR must be arranged in the following circumstances:

- When an adult in its area dies because of abuse or neglect, whether known or suspected, and there is concern that partner agencies could have worked more effectively to protect the adult
- If an adult in its area has not died, but the Safeguarding Adults Board knows or suspects that the adult has experienced serious abuse or neglect

3.2 The threshold for a SAR in relation to the second criteria above is further explained and “serious abuse or neglect” is defined as being where an individual would have been likely to have died but for an intervention, or has suffered permanent harm or has reduced capacity or quality of life (whether because of physical or psychological effects) as a result of the abuse or neglect.

3.3 Safeguarding Adults Boards **may** consider conducting a SAR in other circumstances outside the statutory requirements in other situations where it believes that there will be value in doing so, including where:

- there are multiple victims, the abuse occurred in an institutional setting and a culture of abuse was identified

- a case featuring repetitive or new concerns or issues which the Safeguarding Adults Board wants proactively to review to pre-emptively tackle practice areas or issues before serious abuse or neglect arises
- a case that can provide useful insights into the way organisations are working together to prevent and reduce abuse and neglect of adults
- a case featuring good practice in how agencies worked together to safeguard an adult with care and support needs, from which learning can be identified and applied to improve practice and outcomes for adults

In all these circumstances, a SAR should be considered where there are concerns about the way local professionals and services worked together. This will include cases where professionals and relevant agencies should have but did not work together.

- 3.4** The adult who is the subject of the SAR need not have been in receipt of care and support services for the Safeguarding Adults Board to arrange a review. The review may need to explore whether they should have been in receipt of care and support services. If the subject of the review can and chooses to, they should be fully involved throughout the process.
- 3.5** The Royal Greenwich Safeguarding Adults Board will consider conducting a Lessons Learned Review when it has been decided not to commission a SAR and there can be useful insights into the way organisations are working together to prevent and reduce the abuse and neglect of adults at risk.

4 PROCESS FOR REFERRALS SAFEGUARDING ADULTS REVIEWS

- 4.1** Any agency or professional body, the Coroner, professional or member of the public may refer a case to the Royal Greenwich Safeguarding Adults Board, requesting a SAR to establish if there are important lessons for inter-agency work to be learnt. The prospective referrer is encouraged, where possible, to discuss the concern with Council's Head of Safeguarding, or South East London Clinical Commissioning Group's Director of Quality/Safeguarding Lead to assess whether the criteria for a SAR as set out in Section 44 Care Act, referred to above, have been fully considered before making any referral.
- 4.2** Referrals for consideration for a SAR should be made to the Royal Greenwich Safeguarding Adults Board Manager, Safeguarding Adults Team at the Royal Borough of Greenwich Council. The SAR referral form (*Appendix A*) must be emailed to safeguarding-adults-board@royalgreenwich.gov.uk, and should include details of the case, agencies involved and reasons for making the referral.
- 4.3** Where a case triggers a mandatory investigation or review within an organisation (e.g. NHS serious incident investigation) this should take place as a matter of priority, but a referral for a SAR (if appropriate) should not be delayed and should be made at the same time. Internal governance processes and multi-agency reviews are not mutually exclusive. In all such cases, legal advice may be appropriate to guide the decision-making.

4.4 IT IS IMPERATIVE THAT A REFERRAL FOR A SAR IS MADE FOR ALL DEATHS IN THE BOROUGH INVOLVING AN ADULT AT-RISK WHERE ABUSE OR NEGLECT IS KNOWN OR SUSPECTED TO HAVE TAKEN PLACE

- 4.5** An adult at risk is someone who has needs for care and support (whether or not the local authority is meeting any of those needs) and; 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.- The Care Act 2014
- 4.6** It is important to note the Royal Greenwich Safeguarding Adults Board will only consider cases “in its area” as per Section 44 of the Care Act. In practice this means it will consider cases which relate to people residing within the Royal Borough of Greenwich (which includes people who have been placed by other Boroughs or Clinical Commissioning Groups into the area). Should a person placed by the South East London Clinical Commissioning Group, or Royal Borough of Greenwich Council in another area be the subject of circumstances that would trigger a SAR, then it would be for the Safeguarding Adults Board of that locality to carry out and oversee the SAR for that individual.
- 4.7** Following receipt of the SAR Referral Form, the Royal Greenwich Safeguarding Adults Board Manager will inform the Head of Adult Safeguarding, Royal Borough of Greenwich Council.
- 4.8** In all instances a scanned copy of the form must be uploaded into the service user’s records on the Royal Borough of Greenwich Council’s recording system (Framework-I).

5 DECISION MAKING PROCESS FOR SAFEGUARDING ADULTS REVIEWS

- 5.1** The Royal Greenwich Safeguarding Adults Board has delegated the responsibility for consideration and overseeing of the process for SARs to the Safeguarding Adults Review Evaluation Sub-Group (hereafter referred to as the “SEG”). This group has a rotating chair between Royal Borough of Greenwich, NHS South East London CCG and Met Police. The chair will rotate on a 6-monthly basis, which will mean they will chair a maximum of 3 panels before handing over to another chair. The chair needs to be of a senior designation with the ability to make a recommendation regarding whether a case meets the criteria for a SAR.
- 5.2** The SEG membership is made up of the three statutory members of the Royal Greenwich Safeguarding Adults Board (Royal Borough of Greenwich Council, South East Clinical Commissioning Group and the Metropolitan Police) and in addition Oxleas NHS Foundation Trust, Lewisham and Greenwich NHS Trust and a legal representative from the Royal Borough of Greenwich Council. The SEG may also invite other organisations who may have specific expertise in relation to the case e.g. carer/user organisations, London Fire Brigade and London Ambulance Service. Members of the SEG will have appropriate levels of experience of safeguarding adults work and inter-agency working and will have suitable qualifications and seniority within their agencies.

- 5.3 The SEG has a specific Terms of Reference (to be regularly reviewed) and it reports to the Royal Greenwich Safeguarding Adults Board.
- 5.4 The SEG will aim to meet bi monthly with meetings convened as required as soon as is practical upon receipt of a referral or as appropriate. The SEG also acts as a co-ordinating group for all SARs in progress. The SEG may manage the business virtually as required and do not need to meet if there is no outstanding business or no new referrals to discuss.
- 5.5 In deciding whether a referral should progress to a SAR, the SEG will invite the referrer to the SEG to present their referral, allowing the SEG to clarify matters as required. Where a referrer is a member of the public the Royal Greenwich Safeguarding Adults Board Manager will present the referrer's documentation on their behalf. They should ensure that they invite the referrer to disclose any additional submissions they wish to make. There should be consideration given to offering the referrer any additional support as required.
- 5.6 The Royal Greenwich Safeguarding Adults Board Manager and Administrator will organise and administer the SEG Meetings and arrange minute taking for the meeting.
- 5.7 In all cases the SEG should seek to establish whether the matter is also the subject of a police investigation, Criminal Justice or Coroner's investigation. If the case is, the SEG chair should speak to the relevant persons to ensure that it appropriate for the SEG to proceed with a SAR at that stage.
- 5.8 The SEG will decide if, from the information provided, the case meets the criteria outlined in Section 2 of this policy and procedures document or, identify additional information required to aid the decision and agree timescales for its receipt.
- 5.9 If the SEG consider the criteria for conducting a SAR are met they will make a recommendation to Independent Chair, Safeguarding Adults Board, who has delegated decision making responsibility on behalf of the board. The independent chair will either make a decision to conduct a SAR based on the SEGs recommendation or if they disagree with the recommendation they may ask the SEG to review the case or seek advice from the Royal Borough of Greenwich Council's legal representative or Senior Assistant Director for Health and Adults Services or Director of Health Adult Services. The independent chair will report decisions to the next Safeguarding Adults Board. If a decision is unable to be made the case will be presented at the Safeguarding Adults Board who will make a final decision.
- 5.10 In circumstances where a case meets the criteria for a SAR and the theme(s) of the SAR have been identified as similar to a previous SAR, the SEG can recommend that a review of these actions is undertaken and reported back to the SEG – The SAR should then ensure a focus on new areas of learning.
- 5.11 If the decision of the SEG **is not to proceed to a SAR**, it may decide to request an alternative review or a smaller-scale audit of agency involvement. In these situations, the Chair of the SEG should discuss this with the Independent Chair of

Royal Greenwich Safeguarding Adults Board. The Independent Chair may request further information, or in some circumstances may seek advice from the Royal Borough of Greenwich Council's legal representative or Senior Assistant Director for Health and Adults Services or Director of Health Adult Services, or ask the SEG to review the case. In such cases, arrangements should be made for the agency to share relevant findings with the SEG and Royal Greenwich Safeguarding Adults Board.

- 5.12** A written record of the referral, decision and the reasons for the decision by the SEG will be kept by the Royal Greenwich Safeguarding Adults Board Manager.
- 5.13** The Independent Chair, Royal Greenwich Safeguarding Adults Board will provide evidence of their decision in writing to the Royal Greenwich Safeguarding Adults Board Manager.
- 5.14** The Chair of the SEG will subsequently give the decision in writing to the person or agency making the referral, within a reasonable timescale. If the SAR is not to proceed, then the letter will outline the reasons for the decision.
- 5.15** Where applicable, the Independent Chair, Royal Greenwich Safeguarding Adults Board will notify the Coroner when the decision is made to conduct a SAR. Where the Coroner has decided that an inquest should be held on a case, a copy of the final report will be shared with the Coroner.
- 5.16** If a referrer does not agree with the decision of the SEG, they can appeal this decision in writing to the Independent Chair, Royal Greenwich Safeguarding Adults Board, within 28 days. Alternatively, the referrer can be supported by Safeguarding Adults Board Manager to do this. The Independent Chair will respond to the referrer within 28 days. The referrer should be notified in writing of the outcome of their appeal. If the appeal is not successful, the referrer should be notified that they can make a complaint to the Local Government Ombudsmen. Further details can be found: <https://www.adass.org.uk/media/4104/cpf-26-150203-safeguarding-adults-boards.pdf>
- 5.17** Conducting a SAR for cases that meet the criteria is a statutory responsibility. As such, adults who are the subject of a SAR, their families, and their friends have no right to prevent a SAR from taking place. Conversely, where a case does not meet the criteria for a SAR under the terms of the Care Act 2014, the Royal Greenwich Safeguarding Adults Board cannot be required to conduct a SAR by a third party.
- 5.18** If there are multi-agency lessons to be learnt based on the information already shared, the Chair of the SEG will ensure a multi-agency lessons learnt session is convened.
- 5.19** All recommendations and actions that are taken by the SEG must be based upon the six principles of safeguarding (Empowerment, Prevention, Proportionality, Protection, Partnership and Accountability). For more details see the Care Act Statutory Guidance and London Multi-Agency Safeguarding Adults Policy and Procedures.

6 COMMISSIONING SAFEGUARDING ADULTS REVIEWS

- 6.1** The Royal Greenwich Safeguarding Adults Board has the legal responsibility to commission a SAR where the criteria are met.
- 6.2** Clear Terms of Reference, setting out the focus and scope of the SAR (and where appropriate, what is not within scope) including timeframe within which the SAR will focus, roles and expectations and outcomes required will be drafted prior to commissioning a reviewer to undertake the work.
- 6.3** The Independent Chair of the Royal Greenwich Safeguarding Adults Board will have early discussions with the family/carers (or the Adult where they have survived) to provide information about the SAR. They will be provided with a copy of the leaflet for family members. The Chair will also seek to establish to what extent and how they wish to be involved in the process whilst also being clear about what they can reasonably expect from the process. This also can include providing access to independent advocacy if required. Where an independent advocate has already been arranged under S67 of the Care Act or under the Mental Capacity Act 2005 then, unless inappropriate, the same advocate should be used.
- 6.4** The Royal Greenwich Safeguarding Adults Board will commission/appoint a person to act as the lead reviewer/report writer. The lead reviewer/report writer must be sufficiently skilled and experienced in adult safeguarding matters and must be independent of all the agencies involved in the case. Where there is a joint review is being commissioned with another organisation this will be done in equal partnership.
- 6.5** In commissioning a SAR, the Royal Greenwich Safeguarding Adults Board will follow Royal Greenwich council's procurement policies and procedures to ensure that the review represents value for money. The board will adopt the SAR Quality Markers Checklist as a framework to ensure the delivery of high quality SARs. The Board Manager, Royal Greenwich Safeguarding Adults Board will also be responsible for ensuring that the SEG and SAR Panels comply with this.

7 ESTABLISHING GOVERNANCE ARRANGEMENTS

- 7.1** The Care and Support Statutory guidance states that there should a number of elements put in place to deliver a Safeguarding Adults Review; a SAR panel of relevant and nominated people which is chaired by someone with the appropriate knowledge, skills and experience; clear terms of reference for the SAR; early discussions with family members/carers; appropriate involvement of professionals and organisations that were working with the adult and a final report with recommendations.
- 7.2** A panel will be arranged to manage, oversee and scrutinise the work in relation to the SAR. The panel will be chaired either by a Senior Officer from the Royal Borough of Greenwich Council or the Metropolitan Police representative on the Royal Greenwich Safeguarding Adults Board. Panel members will be Senior Officers from organisations who members of the Royal Greenwich Safeguarding

Adults Board and the panel size will be proportionate to the nature and complexity of the review.

- 7.3** Where a SAR is conducted jointly or in parallel with another review e.g. a Domestic Homicide Review, the SAR Panel will be co-chaired by the chair of that review/lead from the other organisation.

8 MANAGING, OVERSEEING AND SCRUTINISING THE SAFEGUARDING ADULTS REVIEW PROCESS

- 8.1** The Board Manager, Royal Greenwich Safeguarding Adults Board will convene an initial panel to meet with the reviewer commissioned to undertake the work and agree the terms of reference. The Independent Chair, Royal Greenwich Safeguarding Adults Board will attend the first panel meeting. At this meeting the panel members will be agreed. The Chair of the SAR panel will be responsible for ensuring that the SAR is compliant with the terms of reference drawn up. The terms of reference must include the following:

- The period for which the SAR will focus
- Confirm the relatives, family or friends that will be involved in the SAR
- Confirm arrangements for any on-going support (e.g. legal support)
- Agree the methodology and timeline for completion of the SAR
- Agree which agencies will be involved
- Agree the outline communication plan that will be necessary during the SAR process and at the conclusion of the SAR, ensuring that a communication strategy is in place, with clear leadership and co-ordination
- Agree the final product that will be produced and how it will be presented to the Royal Greenwich Safeguarding Adults Board
- Propose how any learning from the SAR should be implemented
- Propose how the SAR should be published, taking account of factors that may emerge throughout the process
- Consider any other risk elements that may factor in the SAR and agree how the Chair of the SAR panel raises any issues that arise as part of the process and with whom

- 8.2** As part of completing the terms of reference for the SAR, the most appropriate methodology to use should be considered. Different methodologies will suit different types of circumstances. These can range from facilitated learning events over a day or two, through to formal enquiries/investigations carried out over a period. The choice of methodology is therefore significant and must be appropriate and proportionate to the case under review.

- 8.3** Whatever methodology is used it must be proportionate to the specific circumstances of the individual case. It should however, provide the most effective learning mechanism and best enable the involvement of key agencies and staff as well as those who are connected to the person (e.g. family etc.). It must however, be balanced against the cost, resources and length of time required to conduct the review and the subsequent outcome required.

- 8.4** The Board Manager, Royal Greenwich Safeguarding Adults Board will support the SAR Panel Chair in the facilitation and delivery of the SAR Panel process.
- 8.5** Where appropriate, the Chair of the SAR Panel will formally request the Chief Officers of involved agencies to conduct an Internal Management Review (IMR) of their involvement with the adult (including a chronology), the service and/or the family and submit a report to the SAR Panel within given timescales. The nominated IMR authors from each agency will be invited to attend the SAR panel meeting in order for the IMR to be scrutinised, and to provide clarification on any matters relating to the report.
- 8.6** The Internal Management Review (IMR) report plus any other information identified as necessary by the SAR panel will be received by the Chair of the SAR panel and passed to the members of the panel and the lead reviewer/report writer, for their scrutiny. The Chair of the SAR panel will convene a meeting of the SAR panel and lead reviewer/report writer to discuss the IMRs and any other information. The IMR Authors will be invited to present their IMR to the panel at this meeting. Questions may be put to the IMR writers by members of the panel at that meeting to clarify the content of the IMR.
- 8.7** The SAR panel Chair must ensure that there is sufficient discursive analysis and scrutiny and evaluation of evidence by the SAR panel throughout the process. The SAR panel will scrutinise drafts of the report, produced by the lead reviewer/report writer, which bring together all the information, an analysis of findings and recommendations for future action.
- 8.8** The Chair of the SAR Panel must ensure that all contributing agencies that have taken part in the review are satisfied that their information is fully and fairly represented in the overview report.
- 8.9** The SAR process should be completed within six months of the Royal Greenwich Safeguarding Adults Board's decision to conduct the SAR unless an alternative time-scale has been agreed. If this is not possible (for example, because of potential prejudice to related court proceedings or other reasons) every effort should be made while the SAR is in progress to (i) identify any urgent necessary improvements that may be required and (ii) take corrective action.
- 8.10** For all cases where a regulated service is involved, the regulating authority (e.g. Care Quality Commission) will be informed of the review by the Independent Chair, Royal Greenwich Safeguarding Adults Board.
- 8.11** In order to protect the duty of candor within the SAR process it is necessary to protect confidentiality in relation to reports prepared. All reports and documentation must be treated as confidential and no items should be shared with the prior consent of the report author following discussion with the Chair of the SAR and the SAR panel.
- 8.12** With the exception of the final report, documentation will not be disclosed to the family, individuals or agencies external to the SAR process. This approach is consistent with the principles established by the High Court in Worcestershire

Safeguarding Children's Board v HM Coroner [2013] and in accordance with Internal Information sharing Protocols.

- 8.13** Any request for access to documents or information will be considered in accordance with the principles of the Freedom of Information Act 200 and the General Data Protection Regulations. Decisions will be made by individual agencies in relation to requests for disclosure of their documents, including the reports for which they are authors.
- 8.14** All such decisions and actions taken by the SAR Panel must be based upon the six principles of safeguarding (Empowerment, Prevention, Proportionality, Protection, Partnership and Accountability). For more details see the Care Act Statutory Guidance and London Multi-Agency Safeguarding Adults Policy and Procedures.

9 SAFEGUARDING ADULTS REVIEW REPORTS

9.1 The SAR report must:

- Be written in plain English
- Provide a sound analysis of what happened and why
- Identify what action must be taken to prevent a reoccurrence
- Contain findings of practical value to organisations and professionals.

9.2 The SAR panel should receive and agree the draft report and be satisfied with the analysis and conclusions and that these have been fully and fairly represented. However, it should be understood the lead reviewer/report writer should have final editorial oversight. If there are issues arising that are contentious, and full agreement to the final report is an issue, then the SEG Chair should be engaged to enable an appropriate way forward. The SAR panel members will approve the report on behalf of their agency.

9.3 Once the draft report is agreed it should be sent for independent legal advice as to whether: the terms of reference have been met; the conclusions are supported by evidence; the report is discriminatory and there are any issues regarding data protection and confidentiality. The legal advice will be considered by the SAR panel and the lead reviewer/report writer and amendments made as appropriate.

9.4 The lead reviewer/report writer should then arrange to meet with the person and or family members, provide them with a copy of the draft report and identify/discuss any amendments that the person and/or family request. A final panel meeting should then be held to agree the final report.

9.5 The SAR panel will be responsible for quality assuring the final SAR Report and will use the SAR Quality Markers checklist as an aid to help them with this process.

9.6 The Independent Chair, Royal Greenwich Safeguarding Adults Board and the lead reviewer/report writer will meet with the family to discuss the content of the report and the publication of the report.

- 9.7** The final SAR report and action plan will be presented to the Leadership Executive Group ahead of any Safeguarding Adults Board meeting, to consider the issues and resulting recommendations seeking clarification on any issues as required. Any outstanding issues or resolution will be confirmed. The final agreed report will then be presented to the next Safeguarding Adults Board.
- 9.8** The SAR Report will be subject to redaction as required by the General Data Protection Regulations and will be provided to the family and other external bodies as deemed appropriate following full consideration of all issues.
- 9.9** Consideration should be given to having the SAR report translated into an appropriate language in circumstances where the adult who has experienced the abuse or neglect or family members first language is not English
- 9.10** An Executive Summary, should be produced, which summarises the issues and highlights the recommendations.

10 PUBLISHING SAFEGUARDING ADULTS REVIEW REPORTS

- 10.1** The Royal Greenwich Safeguarding Adults Board will publish all SAR reports unless a good reason not to do so is identified. Reports will be published on the Royal Greenwich Safeguarding Adults Board website. It may be necessary for each agency's media department to agree a joint strategy, prior to publication.
- 10.2** Any reports to be published will be fully anonymised. In doing so, sensitivity must be given to the wishes and views of any family, relative or the person who is the focus of the SAR about the use of anonymized nomenclature. ... The final SAR panel will decide in consultation with all agencies involved regarding the anonymisation of organisations in the report.
- 10.3** The Royal Greenwich Safeguarding Adults Board Manager will make appropriate arrangements for the SAR report and other records collected or created as part of the SAR process to be held securely and confidentially for an appropriate period of seven years in line with prevailing Information Sharing Agreements, the Data Protection Act, Information Governance arrangements and other legal requirements. This can be reviewed if there is an overriding public interest or business need to do so.
- 10.4** All SAR reports should be submitted to the SAR library within a suitable timeframe once published. The SAR Report should be appropriately coded to allow it to be effectively used within the library.
- 10.5** If Where a SAR report has been completed without the judicial or coronial process being finalised, the Independent Chair, Royal Greenwich Safeguarding Adults Board should speak to the relevant persons before the report is published in the event that there is a risk publication might prejudice the outcome of those proceedings the report will not be published until any proceedings are concluded

11 IMPLEMENTING THE SAFEGUARDING ADULTS REVIEW RECOMMENDATIONS AND LEARNING LESSONS

- 11.1** The Leadership Executive Group and the Royal Greenwich Safeguarding Adults Board will review the SAR report and accept the report and endorse the recommendations if it is satisfied that the recommendations address the issues highlighted in the report's findings.
- 11.2** The recommendations will be translated into an action plan that will identify:
- who will be responsible for actions and timescales for completion of actions
 - the intended outcomes of the various actions and recommendations
 - monitoring and reviewing of the recommendations by the Royal Greenwich Safeguarding Adults Board and reporting progress to the Leadership Executive Group
- 11.3** The Independent Chair, Royal Greenwich Safeguarding Adults Board will ensure dissemination of the SAR Report, or key findings, to interested parties as agreed and ensure that the subject of the SAR or the family of the adult at risk receives feedback so that the outcome of the findings can be shared.
- 11.4** The Independent Chair, Royal Greenwich Safeguarding Adults Board will send a copy of the SAR Report to the Director for Health and Adult Services Social Care and to the Coroner (where a death has occurred).
- 11.5** Each agency is responsible for disseminating the SAR report and implementing relevant recommendations contained in their action plans within the timescales agreed, and for updating the Royal Greenwich Safeguarding Adults Board of progress. Each agency is responsible for embedding learning resulted from SARs and reporting back to the Royal Greenwich Safeguarding Adults Board.
- 11.6** The Royal Greenwich Safeguarding Adults Board will monitor the delivery of the recommendations on a quarterly basis and report findings to the Leadership Executive Group. A review of the Action Plan will take place one year after the publication of the SAR and the Safeguarding Adults Board will monitor any outstanding or ongoing actions.
- 11.7** The Royal Greenwich Safeguarding Adults Board will ensure a summary learning brief is disseminated to staff and learning is embedded across organisations.

12 LESSONS LEARNT PROCESS FOR CASES NOT MEETING THE CRITERIA FOR A SAFEGUARDING ADULTS REVIEW

- 12.1** The SEG may have identified from the information submitted areas of multi-agency learning that while not meeting the criteria for a SAR would still be useful to share. In these cases, the learning will be documented in a simple template and disseminated by the Royal Greenwich Safeguarding Adults Board Manager to relevant partner agencies.

- 12.2** For those cases that do not meet the criteria for a SAR, but there is multi-agency complexity which would benefit from further consultation and information sharing, a one-off multi-agency Lessons Learnt Review meeting should be convened. The SEG Chair will indicate the relevant agencies to be involved and who should chair. The subsequent Lessons Learnt report will be produced by the chair of the Lessons Learnt Review Meeting and signed off by the SEG. The report will be disseminated by the Royal Greenwich Safeguarding Adults Board Manager to relevant partner agencies, and full feedback will be provided to the Royal Greenwich Safeguarding Adults Board.

13 PROFESSIONAL CONDUCT ISSUES

- 13.1** This section must be read in conjunction with the London Multi-Agency Safeguarding Adults Policy and Procedures.
- 13.2** The purpose of a SAR is not to apportion blame to an individual or an agency but to learn lessons for future practice. It is important that this message is conveyed to staff and any volunteers. Issues of professional conduct may become apparent during a SAR, but it is not within the remit of the SAR panel to deal with these.
- 13.3** Where concerns about an individual's practice or professional conduct are raised through the SAR process, they must be reported back to the relevant agency through the SAR Panel chair. It then remains the responsibility of the individual agency to trigger any action in proportion with the concerns passed on by the SAR Panel.

14 ARRANGEMENTS FOR OUT OF AREA SAFEGUARDING ADULTS REVIEWS

- 14.1** Please read this in conjunction with ***Care Act: Care and Support Statutory guidance 2014 and ADASS Safeguarding Adults Policy Network Guidance, June 2016, Out-of-Area Safeguarding Adults Arrangements.***
- 14.2** As stated in the Care Act: Care and Support statutory Guidance (updated 27 October 2016): "SABs must arrange a SAR when an adult in its area dies as a result of abuse or neglect, whether known or suspected, and there is concern that partner agencies could have worked more effectively to protect the adult ... SABs must also arrange a SAR if an adult in its area has not died, but the SAB knows or suspects that the adult has experienced serious abuse or neglect" (14.163 *Care and statutory Guidance*). In Greenwich a Safeguarding Adults Review (SAR) will be considered for those who fall under this category and whose abuse or neglect occurred within the Borough.
- 14.3** In circumstances where an adult has been placed by the Royal Borough of Greenwich (or Greenwich Council) in another borough and is being considered as the subject of a SAR, the RBG (or the Council) will provide representation from the Safeguarding Adults Team to attend all SAR panel meetings and associated meetings as requested. Any requests for information will be responded to as a priority. In all instances, the Director for Adult Social Care, the Senior Assistant Director for Adult Social Care, the Head of Adult Safeguarding and the Safeguarding Adults Board Manager must all be informed of the SAR.

- 14.4** Where an adult has been placed by the Royal Borough of Greenwich in another area and is involved in a SAR but not the subject, the Safeguarding Adults Team will ensure close liaison with the hosting authority and attend panel meetings when deemed necessary. Any concerns regarding timeframes, quality or process of the SAR and/or final report will be escalated as appropriate by a Royal Borough of Greenwich representative to senior management i.e. Director, Senior Assistant Director for Social Care and Head of Adult Safeguarding. In all instances, the Director for Adult Social Care, The Senior Assistant Director for Adult Social Care, the Head of Adult Safeguarding and the Safeguarding Adults Board Manager must all be informed of the SAR.
- 14.5** The Royal Borough of Greenwich agrees to draw up an action plan in response to any recommendations made by the hosting authority, whether in relation to the subject of the SAR or an adult involved in the SAR. The Royal; Borough of Greenwich Council representative will review the action plan produced by the hosting authority and give the necessary consideration to any learning which may be adopted in the Royal Borough of Greenwich.
- 14.6** In circumstances where an individual from another placing authority may be subject to a SAR in Greenwich, the Royal Borough of Greenwich Safeguarding Adults Board will liaise directly with the Safeguarding Adults Board of that placing authority and request information and representation as required.

15 ANNUAL REPORT

- 15.1** The Royal Greenwich Safeguarding Adults Board will include the findings from any SAR in its Annual Report and what actions it has taken or intends to take in relation to those findings. Where the Royal Greenwich Safeguarding Adults, Board decides not to implement an action then it **must** state the reason for that decision in the Annual Report.

16 ENDORSEMENT OT THE SAFEGUARDING ADULTS REVIEWS POLICY AND PROCEDURESNNUAL REPORT

- 16.1** This Safeguarding Adults Review Policy was considered by the Royal Greenwich Safeguarding Adults Board on (17th December 2020) and endorsed by the Safeguarding Adults Board Leadership Executive on tbc

17 FURTHER DOCUMENTS TO SUPPORT THE DELIVEY OF THE POLICY AND PROCEDURES

- 17.1** The following guidance documents are retained by the Board Manager and will be made available when required in support of the process:
- Terms of Reference for the Safeguarding Adults Review Evaluation Group
 - Safeguarding Adults Review: implementation support
 - Internal Management Review request and reporting templates and related guidance
 - Chronology template