**Bradford Safeguarding Adults Board**



**Multi-Agency Organisational Safeguarding Enquiry (OSE) Policy and Procedure**

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**Contents**

[1. Introduction 3](#_Toc21834)

[2. Organisational safeguarding Enquiries 3](#_Toc21835)

[2.1 Relationship with other safeguarding enquiries 4](#_Toc21836)

[3. Practice considerations 5](#_Toc21837)

[3.1 Who to involve within Organisational safeguarding Enquiries 5](#_Toc21838)

 [3.2 Involvement of adults at risk and their representatives 6](#_Toc21839)

 3.3 [Involvement of the service provider 6](#_Toc21840)

 3.4 [Involvement and responsibilities of non-CBMDC placing authorities 7](#_Toc21841)

[4. Enquiry planning 7](#_Toc21842)

[4.1 The Organisational Safeguarding Enquiry Process 8](#_Toc21843)

[4.2 Safeguarding plans 9](#_Toc21844)

[4.3 Outcome meetings 9](#_Toc21845)

[5. Additional Issues 10](#_Toc21846)

[5.1 Informing wider service users/patients 10](#_Toc21847)

[5.2 Wider service user/patient reviews 10](#_Toc21848)

[5.3 Media Interest 10](#_Toc21849)

[5.4 Police Involvement 10](#_Toc21850)

[6. Related Information 11](#_Toc21851)

[6.1 Identifying organisational abuse 11](#_Toc21852)

[6.2 Out of area placements 11](#_Toc21853)

[6.3 The role of Care Quality Commission (CQC) 12](#_Toc21854)

[6.4 The role of commissioning organisations 13](#_Toc21855)

# Introduction

Organisational Safeguarding Enquiries have an important role in understanding and responding to concerns about organisational abuse or neglect. They provide an opportunity to review several individual safeguarding enquiries together, to identify patterns and underlying causes of abuse and neglect, and to identify the learning and measures needed to safeguard people who use that service.

Adult safeguarding occurs within the legal framework of the Care Act 2014 and the Care and Support Statutory Guidance. Chapter 14.7 of the guidance outlines what adult safeguarding is and why it matters:

 “Safeguarding means protecting an adult’s right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, whilst at the same time making sure that the adult’s wellbeing is promoted….”

This practice guidance sets out a framework for considering when an Organisational Safeguarding Enquiry might be necessary. However, the OSE Coordinator will need to apply professional judgment and take a proportionate approach depending on the specific circumstances. This is likely to include consultation with multi-agency partners.

This practice guidance must be read alongside the Joint Multi-Agency Safeguarding Adults Policy and Procedures.

# Organisational Safeguarding Enquiries

**Definition of ‘Organisational Abuse’**

The Joint Multi-Agency Safeguarding Adults Policy and Procedure defines organisational abuse as:

 “…the mistreatment, abuse or neglect of an adult at risk by a regime or individuals in a setting or service where the adult lives or that they use. Such abuse violates the person’s dignity and represents a lack of respect for their human rights.”

Chapter 14.17 of the Care and Support Statutory Guidance (CSSG) defines organisational abuse as:

“neglect and poor practices within an institution or specific care setting such as hospital or care home, for example, or in relation to care provided in one’s own home. This may range from one off incidents to ongoing ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation”

An Organisational Safeguarding Enquiry is an overarching safeguarding enquiry that should be considered when there are concerns about organisational abuse.

Chapter 14.18 CSSG states:

“Professionals and others should look beyond single incidents or individuals to identify patterns of harm”.

An Organisational Safeguarding Enquiry enables a few individual safeguarding enquiries to be considered together in a way that helps to identify organisational abuse or neglect, and the measures needed to improve practice and prevent its reoccurrence.

Where abuse or neglect arises due to underlying reasons, relating to the structure, policies, processes, and practices within an organisation it might be considered organisational abuse. The Care Act 2014 sought to clearly differentiate between quality-of-service issues and abuse or neglect, with quality issues like mistakes and errors to be treated as such, and only actual abuse triggering an enquiry. Responding to quality-of-service issues is an important preventative measure to help ensure mistakes do not develop into abusive situations. For resources and tools to assist with decision making and intervention, please see [www.saferbradford.co.uk/adults](http://www.saferbradford.co.uk/adults)

Across the district there are various multi-agency quality-of-service forums, which review and consider intelligence held on the quality of providers’ services with the aim of intervening early to prevent quality issues becoming more serious.

Chapter 14.9 CSSG states that safeguarding is not a substitute for:

* providers’ responsibilities to provide safe and high quality care and support
* commissioners regularly assuring themselves of the safety and effectiveness of commissioned services
* the Care Quality Commission (CQC) ensuring that regulated providers comply with the fundamental standards of care or by taking enforcement action
* the core duties of the police to prevent and detect crime and protect life and property

Chapter 14.221 CSSG states:

“Commissioners from the local authority, NHS and CCGs are all vital to promoting adult safeguarding. Commissioners have a responsibility to assure themselves of the quality and safety of the organisations they place contracts with and ensure that those contracts have explicit clauses that holds the providers to account for preventing and dealing promptly and appropriately with any example of abuse and neglect.”

The Joint Multi-Agency Safeguarding Adults Policy and Procedures state in para 6.5:

“Where a commissioner or the Care Quality Commission are taking their own action in relation to a concern, the local authority must consider if these actions already form an appropriate and proportionate response to the concerns raised. If the local authority identifies possible abuse, including organisational abuse it will lead on those aspects of the concerns, but performance and quality issues will continue to be addressed by Commissioners and/or the Care Quality Commission.”

## Relationship with other safeguarding enquiries

When there is a safeguarding concern about an individual, the focus of a safeguarding enquiry will be on what has happened to that person, their safety and wellbeing, on their desired outcomes and what actions will be needed to support that person to be safe.

If there are concerns that more than one person is experiencing abuse or neglect within the same service or setting, then this process should be followed for each person.

As such each individual safeguarding enquiry will require its own safeguarding planning and outcome discussion / meeting. This is important to ensure that each individual person’s needs, desired outcomes, circumstances, and personal safety are considered.

Where there are safeguarding concerns for more than one person within the same service or setting, then an Organisational Safeguarding Enquiry may also be required. However, this will only be appropriate where the nature of the various individual enquiries, when considered together, potentially indicate organisational abuse.

As an Organisational Safeguarding Enquiry is an additional enquiry, it should only be followed where there is a potential benefit to safeguarding people within that service or setting. The setting must be one which provides healthcare and/or social care services. The need for an Organisational Safeguarding Enquiry may be identified at any time, for example, whilst other enquiries are being undertaken or at their conclusion.

The Organisational Safeguarding Enquiry will need to draw upon the findings of each individual safeguarding enquiry undertaken, and undertake additional enquiries and actions as required to respond to the concerns of organisational abuse.

# Practice considerations

The Organisational Safeguarding Enquiry will require its own Formal Report and Outcome Meeting to evaluate the findings and understand any safeguarding arrangements required.

Organisational Safeguarding Enquiries will often be complex. This section sets out additional practice considerations that are particularly relevant when an Organisational Safeguarding Enquiry is being planned and undertaken.

## Who to involve within Organisational Safeguarding Enquiries

Involvement at the Planning Meeting/Outcome Meeting should be limited to those stakeholders who need to be involved and can contribute to the decision-making process. This may include an appropriate representative of any organisation that has a specific role in:

* undertaking enquiries in relation to abuse or neglect
* assessing the risk
* developing or carrying out the safeguarding plan
* undertaking related enquiries e.g. criminal, regulatory
* taking other actions in relation to the organisation alleged to have caused harm

In all cases where the Organisational Safeguarding Enquiry being considered involves a regulated service provider, the following must be informed and invited to Planning Meetings and Outcome Meetings (and be offered copies of minutes irrespective of attendance):

* Care Quality Commission
* Contracting/Commissioning organisations

Where an Organisational Safeguarding Enquiry is undertaken in relation to an NHS Trust, the Trust should ensure its Chief Executive Officer and the Integrated Care Board Executive Lead for Safeguarding within the Bradford District and Craven Health and Care Partnership are notified and involved/kept informed as requested. Similarly, where the Organisational Safeguarding Enquiry involves a Bradford Council ‘in-house’ service, the Director of Adult Social Care must be notified, and involved/kept informed as requested.

There will be occasions where invitations to attend meetings are extended to local authority or NHS operational teams. The need for this will be decided upon by the Chair of the Organisational Safeguarding Enquiry.

### 3.2 Involvement of adults at risk and their representatives

The Adult at Risk, and their representatives as appropriate, should be fully involved within individual safeguarding enquiries relating to them as is set out in the Joint Multi-Agency Safeguarding Adults Policy and Procedures.

The focus of the Organisational Safeguarding Enquiry will be on the collective issues and themes from several individual enquiries. For reasons of privacy and confidentiality, or the need to plan an enquiry, it will not usually be appropriate for any adults at risk or their relatives to attend an Organisational Safeguarding Enquiry Planning Meeting/Outcome Meeting.

The Organisational Safeguarding Enquiry should, however, be informed by the views of those at risk and their representatives. As such the OSE Coordinator will need to consider how the views of the adult at risk and their representatives can be most appropriately included. These will often have already been raised within individual enquiries and some adults may wish to offer further views in relation to the Organisational Safeguarding Enquiry being undertaken.

## Involvement of the service provider

It is important that the service provider is involved as fully as possible in safeguarding concerns involving their service. Non-attendance is likely to be treated as a breach of the contracting terms and addressed jointly with the Contract and Quality Team.

Depending on the size of the organisation and the nature of the concerns, or the individuals implicated, the people appropriate to attend the Planning

Meetings/Outcome Meetings might be for example, the manager, the owner or the joint/company director or the Nominated Individual registered with CQC. It is important that the representative is appropriately senior and can act and respond on behalf of the organisation to help address the concerns raised.

Where the given representative is directly implicated, or their attendance may prejudice the planning of an enquiry, it may not be appropriate for them to be present at the Planning Meeting. If this is the case, an alternative manager should be provided with an opportunity to attend to represent the service. Communication with and involvement of the organisation must be maintained as fully as possible.

The service provider's organisation should have the opportunity to respond to any concerns raised by the Organisational Safeguarding Enquiry and be able to review the Formal Report and comment on its findings, as set out within the Joint Multi-Agency Safeguarding Adults Policy and Procedures.

The Service Provider may be required to develop an action plan and evidence their progress towards goals. If the organisation is also subject to regulatory action and has an action plan in place with a regulatory body, it may be necessary to consider combining both safeguarding and regulatory body action plans. If so, this will be discussed and agreed by the relevant agencies. Monitoring arrangements will be agreed by all stakeholders. Post-Organisational Safeguarding Enquiry monitoring will be carried out in accordance with standard contract monitoring procedures.

An appropriate representative of the service provider must be invited to attend the Outcome Meeting.

## Involvement and responsibilities of non-CBMDC placing authorities

Where an Adult at risk is placed in a service by non-CBMDC placing authorities, then those placing authorities should also be invited to the Planning Meeting/Outcome Meeting.

The ADASS (2016) Out-of-Area Safeguarding Adults Arrangements: Guidance for Inter-Authority Safeguarding Adults Enquiry and Protection Arrangements indicates how authorities should work together in these circumstances. Key principles of this guidance are summarised in Section 6.2 below.

# Enquiry planning

The purpose of individual safeguarding enquiries is set out within the Joint Multi-Agency Safeguarding Adults Policy and Procedure.

The decision to undertake an Organisational Safeguarding Enquiry will need to be made by the local authority. An Organisational Safeguarding Enquiry is separate from an individual s42 safeguarding enquiry and will require a separate Formal Report. Consideration should be given as to whether the OSE Coordinator for the Organisational Safeguarding Enquiry should be the same person who has overseen any individual safeguarding enquiries. This will often be advantageous, but it may not always be necessary or appropriate.

When undertaking an Organisational Safeguarding Enquiry, it will be necessary to:

* draw upon and summarise the relevant aspects and conclusions of any individual enquiries.
* focus on the service wide concerns and/or common themes of individual enquiries and the underlying causes of the alleged abuse or neglect.
* consider the need for additional enquiries, as required, to understand the presenting issues such as relevant policies, procedures, training, and staff practices.
* provide opportunity for the service provider to respond to organisational abuse concerns and Organisational Safeguarding Enquiry findings.

Organisational Safeguarding Enquiries should be given suitable attention and priority by all involved. This is to ensure identified issues and concerns are addressed promptly. Once the Organisational Safeguarding Enquiry has commenced, the need for any further individual safeguarding enquiries must be considered.

##  The Organisational Safeguarding Enquiry Process

The local authority is responsible for chairing and co-ordinating Organisational Safeguarding Enquiries. The OSE Coordinator will chair the process.

Any person or organisation can submit a request for an Organisational Safeguarding Enquiry. The Safeguarding Adults Service will screen the referral and make the decision as to whether an Organisational Safeguarding Enquiry will be carried out.

The referral form can be accessed here: [www.saferbradford.co.uk/adults](http://www.saferbradford.co.uk/adults)

On receipt of an Organisational Safeguarding Enquiry referral a decision will be made within 48 hours as to whether initial enquiries will be undertaken. The outcome of the decision will be shared and discussed with the reporter.

Initial Enquiries at stage 2 will commence immediately and aim to conclude within 4 weeks. The primary focus of stage 2 enquiries is to gather information and assess the level of risk. If an Organisational Safeguarding Enquiry cannot be concluded at stage 2, it will be progressed to stage 3. Once progressed to stage 3 all placing commissioners will be informed that an Organisational Safeguarding Enquiry has commenced and will be invited to take part in the process.

Stage 3 enquiries will aim to be concluded within 6 months. Successful closure of the Organisational Safeguarding Enquiry will depend on several different factors including evidence of progress against actions by the provider, increased safety of individuals within the organisation, and timely actions being completed by multi agency partners.

The process will be concluded at stage 4 with an outcomes and closure meeting.

## Safeguarding plans

Individual safeguarding enquiries will focus on the Adult at Risk’s safeguarding needs. Where there are proposed changes to individual service user or patient care plans they will need to be consulted with and appropriately informed before changes are made.

The Organisational Safeguarding Enquiry will need to assess the risk to individuals within the service and consider the need for arrangements in relation to service users more generally. Service-wide actions may include staff guidance, reviews of policies and procedures, reviews of staffing numbers, immediate training needs, reviewing documentation, reviewing risk assessments, and reviewing of care plans. This list is not exhaustive and other actions may be required.

Additional service improvements may be separately required by contracting/ commissioning organisations and the Care Quality Commission which continue outside of the Organisational Safeguarding Enquiry procedures. Following evidence of improvements being made within the organisation and a multi-agency decision being made to exit, all involved parties will be notified and invited to an Outcomes Meeting.

## Outcome meetings

Where an Organisational Safeguarding Enquiry has been undertaken, an Outcomes Meeting, chaired by the OSE Coordinator will always be required. Evidence to support the decision to exit the Organisational Safeguarding Enquiry is likely to come from partner agency feedback, monitoring visits, views of service users and carers, and records and reports.

All parties and organisations involved with the Organisational Safeguarding Enquiry will have the opportunity to feedback on their experience of the process to support continued learning and development across the multi-agency and system-wide partnerships.

# Additional Issues

## Informing wider service users/patients

There may be circumstances where there is a need to inform wider service users or patients of the nature of the concerns and the actions being taken to respond to these. This will be particularly relevant where there are widespread concerns, and where clear communication will help to reassure wider service users or patients and their representatives of the action being taken. It is suggested that such communications will be undertaken by the service provider, who will be best placed to respond to individual questions or queries from service users or patients.

## Wider service user/patient reviews

As part of undertaking an Organisational Safeguarding Enquiry it may become apparent that there are service users or patients, who do not require the support of the multi-agency safeguarding procedures, but who nonetheless would benefit from a review of their needs.

The need for such reviews of individual service users or patients' needs and provision may therefore also be required, alongside or after the Organisational Safeguarding Enquiry. It is important that the service user or patient and their relatives or representatives are appropriately involved in such reviews.

Where placements are commissioned by non-CBMDC Commissioning organisations, the undertaking of reviews will be the responsibility of the relevant commissioning authority.

## Media Interest

Safeguarding Team Managers, and their line management, the Director of Adult Social Care and the relevant communications/media team must be informed of any media interest as soon as possible. Under no circumstances should the OSE Coordinator or those undertaking enquiries give a comment or interview to the press. It may also be necessary to advise multi-agency partners of the media interest.

## Police Involvement

There may be circumstances where the findings from individual enquiries and Organisational Safeguarding Enquiries, indicate potential criminal offences. Whilst concerns may relate to offences committed by individuals, they may also be committed by services or organisations, because of how they are managed or organised. For example:

* [Ill treatment and Wilful neglect: provider offence](https://www.legislation.gov.uk/ukpga/2015/2/section/21/enacted)
* [Corporate Manslaughter and Corporate Homicide Act 2007](https://www.legislation.gov.uk/ukpga/2007/19/section/1)

Where there are such concerns, the police should be contacted for advice.

# Related Information

## Identifying organisational abuse

Where an Organisational Safeguarding Enquiry is being undertaken, many different forms of abuse or neglect may be evidenced within the individual safeguarding enquiries being undertaken. The overarching Organisational Safeguarding Enquiry will be able to consider these individual enquiries together, to identify underlying factors that lead to the risk of abuse and neglect.

The following guidance will inform professional judgements and decision making as to whether organisational abuse is a presenting concern.

As organisational abuse or neglect arises because of the structure, policies, processes, and practices within an organisation, it may be evidenced by certain characteristics:

* It is **widespread** within the setting (e.g. the abusive/neglectful practice is not confined to the practice of a single staff member).
* It is evidenced by **repeated** instances of abuse or neglect.
* It is generally **accepted** that these things happen.
* It is **sanctioned** – it is encouraged or condoned by line managers or ignored.
* The **absence of effective** **monitoring or management oversight** by managers has allowed the practice to occur.
* There are **environmental factors** (e.g. unsuitable buildings, lack of equipment, many temporary staff) that adversely affect the quality of care.
* It is **systemic** e.g. factors such as a lack of training, poor operational procedures, poor supervision and management can all significantly contribute to the development of organisationally abusive practice.

It is not necessary for each of these characteristics to be present. However, the presence of one or more characteristic increases the likelihood that organisational abuse is taking place. Organisational abuse may also be indicated by a few adversely affected service users. However, it could also occur in relation to a single service user.

The assessment of possible organisational abuse will need to be based upon professional judgement with consideration given to all the individual circumstances and evidence. This should include consideration of the actual or potential impact on the wellbeing of individuals concerned, as well as the underlying causes of any abuse and neglect.

## Out of area placements

Sometimes local authorities will need to work together to respond to safeguarding concerns. This is most common when abuse or neglect occurs in one local authority area, but the person receives services funded or commissioned by another.

The [‘ADASS (2016): Out of area safeguarding arrangements’](https://www.adass.org.uk/media/5414/adass-guidance-inter-authority-safeguarding-arrangements-june-2016.pdf) highlights the need for authorities to work together and outlines respective responsibilities.

Key general principles are summarised below:

The safeguarding adults procedures of the host authority (i.e. the local authority in the area where the abuse occurred) will be followed.

This means that, the host authority:

* will fulfil the role of the OSE Coordinator
* will maintain effective communication with the placing authority
* may need to undertake action to ensure immediate safety, but wherever possible this should be in consultation with the placing authority

Placing authorities (the local authority or NHS body responsible for commissioning care and support services for that person):

* will contribute to the safeguarding response as required
* have overall responsibility for assessing and providing for the care and support needs of the person at risk
* will ensure, through contracting arrangements and in-service specifications, that the provider has arrangements in place for protecting adults at risk from harm.

If the person is a self-funder and there is no placing authority involved in commissioning care and support services, the host authority has the duty to act under the Joint multi-agency policy and procedures regardless of the area from which the person originated.

If a person experiences abuse whilst in another local authority area from where they live, for a very short period, for example whilst on holiday, the statutory duty lies with the host authority. However, there may need to be agreement between the host and placing agency as to who is the most appropriate to undertake enquiries in relation to the concerns.

The full [ADASS Guidance](https://www.adass.org.uk/media/5414/adass-guidance-inter-authority-safeguarding-arrangements-june-2016.pdf) includes more information about the arrangements required in such situations.

## The Care Quality Commission (CQC)

The Care Quality Commission is the independent regulator of all health and adult social care services in England, including those provided by the NHS, local authorities, private companies, and voluntary organisations.

The Commission makes sure health and social care services provide people with safe, effective, compassionate, high-quality care and it encourages care services to improve.

#### The role of the CQC

Includes:

* [**Registering and monitoring** o](https://www.cqc.org.uk/what-we-do/how-we-do-our-job/registering-monitoring-services)f care providers. (Link to CQC website [here)](https://www.cqc.org.uk/what-we-do/how-we-do-our-job/registering-monitoring-services)

* [**Inspecting and rating**](https://www.cqc.org.uk/what-we-do/how-we-do-our-job/five-key-questions-we-ask) services (Link to CQC website [here)](https://www.cqc.org.uk/what-we-do/how-we-do-our-job/five-key-questions-we-ask)

* [**Taking action to protect people**](https://www.cqc.org.uk/what-we-do/how-we-do-our-job/taking-action) who use services (Link to CQC website [here)](https://www.cqc.org.uk/what-we-do/how-we-do-our-job/taking-action)

#### Fundamental standards

All service providers registered with the CQC are expected to meet fundamental standards, below which care should never fall. These 17 standards include:

* Safeguarding from abuse: You must not suffer any form of abuse or improper treatment while receiving care.

* Duty of Candour: The provider of your care must be open and transparent with you about your care and treatment. Should something go wrong, they must tell you what has happened, provide support and apologise. [Regulation 20: Duty of Candour: Care Quality Commission](http://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-20-duty-candour)

For more information about all the fundamental standards see this Link to the CQC website [here](https://www.cqc.org.uk/what-we-do/how-we-do-our-job/fundamental-standards):

#### Statement on CQC’s role and responsibilities for safeguarding children and adults

The CQC sets out roles and responsibilities in relation to safeguarding. These include:

* Supporting the local authority’s lead role in conducting enquiries or investigations regarding safeguarding children and adults. We do this by cooperating with them and sharing information where appropriate from our regulatory and monitoring activity. We assist the police in a similar way.
* Holding providers to account by taking regulatory action to ensure that they rectify any shortfalls in their arrangements to safeguard children and adults, and that that they maintain improvements. This includes requiring providers to produce action plans, taking enforcement action to remedy breaches of fundamental standards, and taking action against unregistered provider

The full document is available on the CQC webpage: [here](https://www.cqc.org.uk/what-we-do/how-we-do-our-job/safeguarding-people)

## The role of commissioning organisations

Commissioning organisations will have required standards for services and systems in place for monitoring, inspection and for supporting service providers to achieve improved standards.

In the event that safeguarding concerns emerge, these roles and responsibilities will be continuous with the safeguarding process, however liaison with the OSE Coordinator will be required to ensure that responses are coordinated and information is shared appropriately.

Depending on the circumstances, commissioning organisations may support the safeguarding enquiry process by:

* Advising on past service performance issues and agreed actions to address concerns
* Advising on expected standards and identifying areas where the service provider has not met their contractual requirements
* Undertaking a review of systems or records.
* Obtaining from the service provider all relevant policies and procedures
* Inspecting, monitoring, or reviewing areas of organisational practice
* Requiring evidence of improved or acceptable practice
* Identifying the need for service improvement plans or action plans

A service improvement plan may be required by the commissioning organisations to achieve required standards of service provision. The nature of such plans will be determined by the relevant commissioning organisations.