

## **Changes have been made to the procedures and guidance to:**

- **Clarify the issue of consent and information sharing**

The Data Protection Act 2018 allows the sharing of information when the Care Act 2014 requires you to do so without obtaining the consent from the adult or their representative; if it is in the legitimate interests of the person at risk and your organisation or to protect the vital interests of the people at risk against immediate danger.

The Care Act states that consent to make a referral is not necessary if other people, could be at risk from the person causing harm; It is necessary to prevent crime or a serious crime has been committed; there is reason to believe that the adult's health and/or well-being will be adversely affected by ongoing harm or abuse; the person posing a risk has care and support needs and may also be at risk; or you believe that the adult is being coerced or fearful of repercussions.

Where none of these apply you should seek consent from the adult (or their representative) to make a referral and provide them with information about how they can withdraw their consent by contacting the relevant local authority. It should be noted however, that the legal basis for making a safeguarding referral in the paragraph above should be followed wherever it is appropriate to do so.

Unless it would jeopardise their or other's safety you should have a discussion with the adult or their representative informing them of the decision and the reasons for the referral. You need to ask what they want to achieve and explain what is or may be required to undertake a section 42 enquiry including the need to share appropriate information with partners.

When information is gathered from non-professionals such as witnesses or relatives, it is important that, if their personal data (e.g.name and address) will be included in the referral, those people are informed that their details may be shared with other bodies. Unless, to do so would jeopardise the safety of the adult at risk or others.

- **Strengthen 'Making Safeguarding Personal' in the documents**

Adopting a person centred approach, reflecting the six principles of the Care Act - Empowerment; Prevention; Proportionality; Protection ; Partnership and Accountability, has been given more prominence and emphasis in the referral procedures.

- **Clarify and update non-recent abuse guidance**

The section on non-recent abuse (previously referred to as historical abuse) has been updated to clarify that, when an allegation relates to non-recent abuse that happened when an adult was under 18, it should be dealt with under the Children's' Safeguarding Procedures and if the allegation relates to abuse that happened when the adult at risk was aged over 18, then the Safeguarding Adult procedures should be followed.

### **What's been added?**

#### **Early intervention and prevention section**

The guidance now has advice on early intervention and prevention which provides tips for front line staff visiting adults in their own home or in care settings. There is also a section on reducing the potential risk of financial exploitation. There are also sections on promoting well-being and independence; tackling social isolation and support for carers.

#### **Pressure ulcer damage section**

Before considering whether to make a Safeguarding Adults Referral in respect of Pressure Ulcer damage you must first complete the forms in the Department of Health's Pressure Ulcer Protocol which will help to determine the appropriate action including whether a safeguarding referral is required.