Safeguarding Adult Review (SAR) Protocol and Practice Guidance

October 2024

Version Control

Title	**Safeguarding Adult Review (SAR) Protocol**
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Update and Approval Process			
Version	**Group/Person**	**Date**	**Comments**
DSP1	Business Unit	01/10/2019	Rebranded and updated to reflect new safeguarding partnership arrangements. Timelines and processes revised in line with Child Safeguarding Practice Review Procedure at the request of the Statutory Partners.
DSP1.2	Business Unit	13/11/2019	Further amends as highlighted by Learning and Development Group.
DSP 1.3	Safeguarding Adult Manager, DBC proposed revisions	30/01/2020	Further revisions provided.
DSP 1.3.1	Learning & Development sub-group and approved by SSP	April 2020	Update from L & D sub-group to tighten up decision making following challenge to SSP on outcome of safeguarding adult referrals. Revisions approved by SSP 9th April 2020.
DSP 1.4	Statutory Safeguarding Partners	September 2020	Revisions to protocol to reflect criteria for referral to ensure only cases that meet the criteria are referred. Responsibility for agencies to ensure information is available and decision/rationale available for referring. To be ratified by SSP.
DSP 1.5 – 1.6	Statutory Safeguarding Partners & Learning and Development Group	November 2020	18.11.20 – agreed in principle by SSP and request to share with Learning and Development Group for consultation and final sign off. Final consultation and request for virtual sign off by L&D Group February 2021.
DSP 1.7	Learning & Development Group	March 2022	Revision to the SAR referral form following learning from an adult case. Signed off by Learning and Development Group 26/04/22.
DSP 1.8	Statutory Safeguarding Partners	June 2023	Revision to protocol once initial SAR referral has been received to ensure appropriate, accurate and detailed information is provided to help and inform SSP on decision making. Initial meeting to be arranged with key leads from Statutory Organisations (Local Authority, Police and Health) to review information provided before submission to SSP. Amendments approved by Learning & Development Group 01/08/2023.
DSP1.9	Learning & Development Group	July 2024	Revisions to protocol to incorporate: • Process for communicating with Coroner • Cross Boundary process • Learning Requests process
DSP1.9.1 & 2		August 2024 October 2024	Revisions to include: • Updated processes for Interface between SARs/Discretionary SARs and Coronial Processes (para 17.5) • Inclusion of Discretionary SARs

Issue Date	**October 2024**
Review Date	**2 years from issue date unless legislative or practice changes identified**

Contents

1. INTRODUCTION

1.1 This protocol and guidance sets out the approach to the process and procedure that will be followed when a referral for a Safeguarding Adult Review (SAR) or a referral for a Learning Request is received by Darlington Safeguarding Partnership.

1.2 For the purpose of this document the term Statutory Safeguarding Partners refers to the statutory arrangements as outlined in Working Together to Safeguard Children 2023. In Darlington, the safeguarding arrangements also cover the Safeguarding Adult Board, which is a statutory requirement under the Care Act 2014.

1.3 The Statutory Safeguarding Partners have oversight of adult safeguarding across the locality including the duty to conduct any Safeguarding Adult Reviews (SARs) in accordance with Section 44 of the Care Act 2014. SARs are reviews that examine the way agencies and individuals who have been involved with an adult at risk have acted. The purpose of the SAR is to identify learning to bring about improvements, so the likelihood of harm to adults at risk is minimised.

1.4 This protocol specifies the statutory requirements and the working arrangements of the Statutory Safeguarding Partners in respect of SARs, discretionary SARs (learning from case reviews where the Statutory Safeguarding Partners agree that the criteria for a SAR are not met but that a review may highlight multi-agency learning), or through learning requests. The protocol aims to ensure that there is a consistent approach to the process and practice in undertaking SARs that follows both statutory guidance and local policy. The protocol will help in deciding when to refer a case for consideration as a SAR or a learning request.

2. STATUTORY DUTY UNDER SECTION 44 CARE ACT 2014

2.1 There are 3 broad circumstances under which the Care Act 2014 (Section 44) considers a SAR may take place. The guidance makes a distinction between those circumstances where the Statutory Safeguarding Partners are required to arrange or consider a SAR:

Statutory SARs:

A statutory SAR is a SAR that **must** be carried out because the duties set out in sections 44 (1), (2) and (3) of the Care Act 2014 apply:

a. There is a reasonable course for concern about how the SAB, its members or other persons involved worked together to safeguard the adult; and
b. The adult has died, and it is known or suspected that the death resulted from abuse or neglect; or
c. The adult is alive, but it is known or suspected that they have experienced serious abuse or neglect.

Note: It is irrelevant whether or not the adult is known to the local authority, or whether or not they are being provided with support or services to meet their care and support needs.

With regard to point c above, indicators that this condition is met could include:

- The adult would have been likely to have died but for an intervention.
- The adult has suffered permanent harm.
- The adult has reduced capacity or quality of life (whether because of physical or psychological side effects) as a result of the abuse or neglect.

Discretionary SARs:

A discretionary SAR is a SAR that is carried out when the absolute duty to do so (set out above) does not apply. Under Section 44 (4) of the Care Act SABs are free to arrange for a discretionary SAR to be carried out in any other situation involving an adult in its area with needs for care and support where it believes that there will be value in doing so. This may be where a case can provide useful insights into the way organisations are working together to prevent and reduce abuse and neglect and can include exploring examples of good practice that can be applied to future cases.

2.2 The Statutory Safeguarding Partners must arrange for a review of a case involving an adult in its area with needs for care and support (whether or not the local authority has been meeting any of those needs) if it meets any of the following criteria:

1. **there is reasonable cause for concern about how the Safeguarding Partners, members of the Darlington Safeguarding Partnership (DSP) or other persons with relevant functions worked together to safeguard the adult AND:**
2. **EITHER;**
   a) **the adult has died, and the Statutory Safeguarding Partners know or suspect the death resulted from abuse or neglect (whether or not it knew about or suspected the abuse or neglect before the adult died). OR;**
   b) **the adult is still alive, and the Statutory Safeguarding Partners know or suspect the adult has experienced serious abuse or neglect.**

2.3 The Statutory Safeguarding Partners may also arrange for a review of any other case involving an adult in its area with needs for care and support (whether or not the local authority has been meeting any of those needs). SARs may also be used to explore examples of good practice, where this is likely to identify lessons which can be applied to future cases.

2.4 Each member of the Darlington Safeguarding Partnership must co-operate in and contribute to, the carrying out of a review under this section with a view to:

a) identifying the lessons to be learnt from the adult's case, and
b) applying those lessons to future cases.

3. CRITERIA FOR SAFEGUARDING ADULT REVIEW

3.1 The **first criterion** for determining whether a SAR should be conducted is in establishing whether the adult was in need of care and support services (whether or not the local authority was meeting any of those needs).

3.2 In considering whether an adult has needs for care and support, local authorities must consider whether:

- the adult's needs arise from or are related to a physical or mental impairment or illness

- as a result of the adult's needs, the adult is unable to achieve two or more of the specified outcomes (which are described in the Care Act 2014 guidance sections 6.105 to 6.112)
- as a consequence of being unable to achieve these outcomes there is, or there is likely to be, a significant impact on the adult's wellbeing

3.3 Significant impact is not defined and should be understood to have its everyday meaning.

3.4 The **second criterion** to be met is establishing a cause for concern about how the Darlington Safeguarding Partnership, its member organisations, or other persons with relevant functions, worked together to safeguard the adult. A particular emphasis is the extent they could have worked more effectively to protect the adult from the resultant outcome and therefore the potential for learning.

3.5 The **third criterion** involves an examination of the link between the death (or other outcome) and suspected abuse or neglect.

3.6 In the context of SARs, something can be considered serious abuse or neglect where, for example, the 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 as a result of the abuse or neglect.

4. Purpose of a SAR

4.1. The purpose of a SAR is to determine whether agencies worked together effectively to safeguard the individual and identify what may have been done differently to prevent the harm or death. It is not to enquire into how a person died nor is it to apportion blame. It is to learn from situations, and to ensure that learning is applied to future cases to prevent similar harm occurring again.

4.2 It is not the purpose of a SAR to hold any organisation to account or identify how a person died. Other processes exist for this, including criminal proceedings, Coronial processes, disciplinary procedures, employment law and those of relevant service and professional regulatory bodies.

4.3 A SAR should:

- understand what happened and why
- establish lessons to be learnt from the circumstances of the case from the way professionals and agencies worked together
- identify what the agencies and individuals might have done differently which could have prevented harm or death
- prevent similar harm occurring in the future
- improve future practice by implementing the learning
- review and improve the safeguarding adults' procedures and their application
- identify good practice
- highlight any lessons which can be learned from the case and make a clear set of recommendations
- ensure relevant action is taken in order to help prevent future deaths or serious harm; this helps to improve both single and inter agency working and better safeguard and promote the wellbeing of adults at risk.

4.4. A SAR will ordinarily be considered following the conclusion of statutory or mandatory enquiries or investigations (e.g., police criminal investigation, section 42 safeguarding enquiry, serious incident review or a Learning Disability Mortality Review (LeDeR) and/or complaints processes. However, on occasion, there may be situations where enquiries or investigations have not been completed, but the circumstances of the case necessitate that a SAR should commence in parallel to the other investigatory process. Decisions as to the need for and the appropriateness of this will be made on a case-by-case basis.

4.5 It is acknowledged that all agencies will have their own internal and / or statutory review procedures to investigate serious incidents. This protocol is not intended to duplicate or replace these.

5. THE RELATIONSHIP BETWEEN SECTION 42 ENQUIRIES AND SECTION 44 SAFEGUARDING ADULTS' REVIEWS

5.1 There will be occasions where a safeguarding enquiry may be required when an individual has died, however the purpose and title of these meetings will need to be considered carefully.

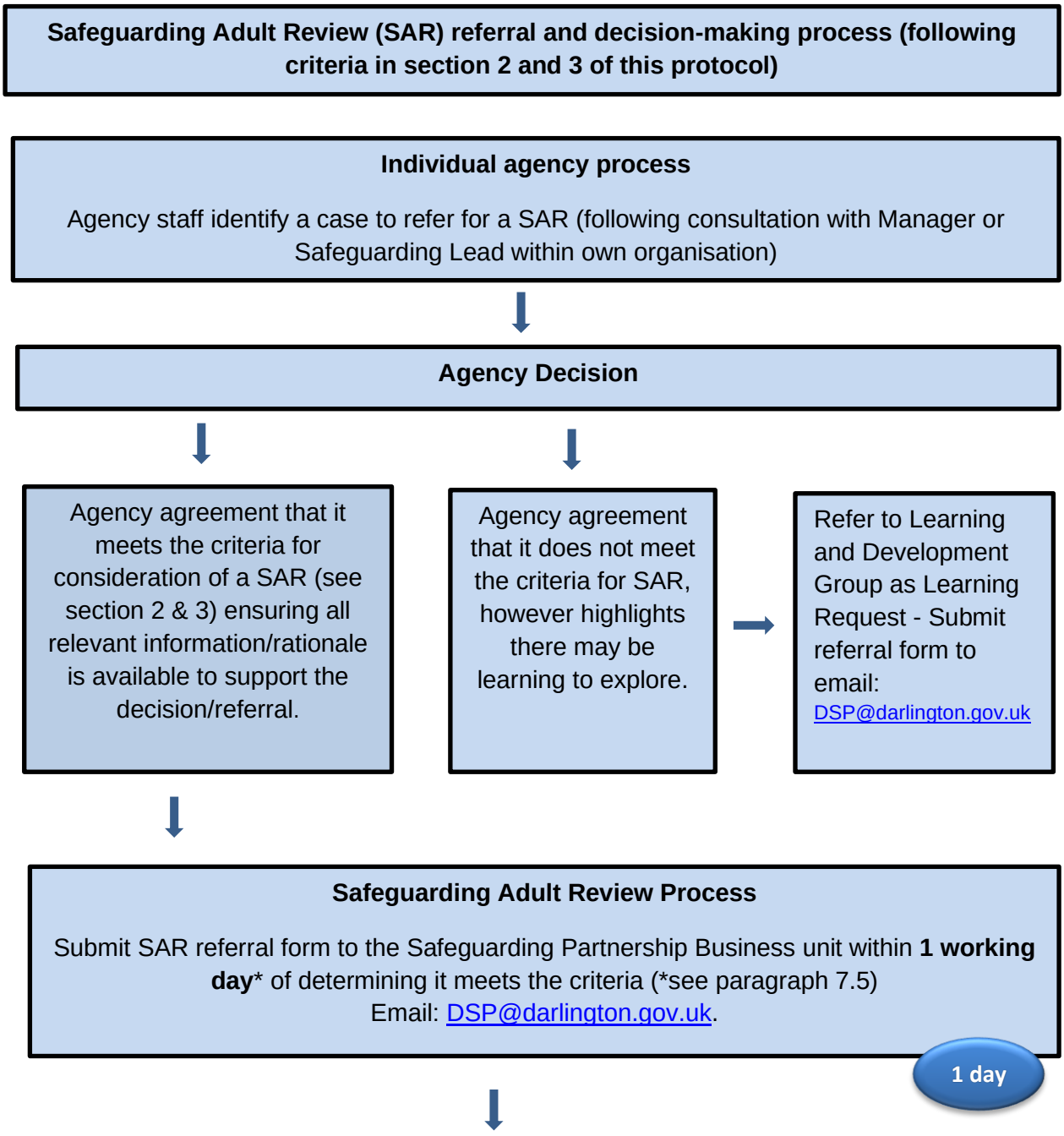
5.2 Section 42 of the Care Act 2014 places a duty on the local authority to make enquiries when it has reasonable cause to suspect an adult in its area has care and support needs, is being abused or neglected (or is at risk of being) and is unable to protect themselves because of their care and support needs. The purpose of Section 42 enquiries is to enable the Local Authority to decide what action needs to be taken to protect the person. It therefore does not apply to the situation where someone has died and may have been abused or neglected before that. Section 44 of the Act provides for Safeguarding Adult Reviews to be carried out after someone has died, if the Statutory Safeguarding Partners know or suspect the death resulted from abuse or neglect, and there is reasonable cause for concern about how agencies or other persons with relevant functions worked together to safeguard the adult.

5.3 Section 42 enquiries are those which are undertaken when an adult, with care and support needs, has been identified as suffering or being at risk of abuse and neglect. **As a matter of law, an enquiry under Section 42 cannot be undertaken in relation to a person who is deceased.** Where someone's death is suspected to be the result of abuse or neglect, a referral should be made to the Darlington Safeguarding Partnership, the Statutory Safeguarding Partners will then consider whether the criteria for a SAR are met under Section 44.

5.4 If the circumstances of the death suggest there are reasons to be concerned about risk to other adults, Section 42 enquiries may need to be made to decide whether action needs to be taken to protect them.

6. FLOWCHART OUTLINING THE PROCESS AND TIMESCALES

6.1 The following process map summarises the process and timescales for the Statutory Safeguarding Partners when considering whether a referral reaches the criteria for a Safeguarding Adult Review and the procedure which must be followed:



Partnership Business Manager to acknowledge and record submission along with details of the referral and inform the Statutory Safeguarding Partners within **1 working day** of receiving.

Partnership Business Manager to liaise with leads from key statutory agencies (Local Authority, Police and Integrated Care Board) and Chair of the Learning & Development Group and set up a meeting (if applicable) to review information provided to establish if more detailed information is required prior to submission to Statutory Safeguarding Partners.

1 day

The Statutory Safeguarding Partners must consider whether the case meets the criteria for SAR within **5 working days**. The referrer should be notified of the outcome.

5 days

If the Statutory Safeguarding Partners agree the case should be considered for a SAR (or other type of review), the Chair of the Learning and Development Group should arrange a review panel meeting and the Business Unit will request chronologies or information from all relevant agencies within **7-10 working days** of the decision.

7-10 days

The review panel will take place within **15 working days** and will involve members of the Darlington Safeguarding Partnership and other relevant agencies to share information and agree the Terms of Reference for the review.

15 days

The review panel will consider all the information and decide whether the case still reaches the criteria for a SAR and will advise the Statutory Safeguarding Partners of the decision and rationale.

The SAR should be completed within **6 months** of the decision to hold a SAR.

6 months

7. INITIATING A SAR - THE REFERRAL PROCESS

7.1 Any agency or individual (including a member of the public) can refer a case for consideration of whether it meets the criteria for a SAR/or other review if there is learning to be explored. Only the Statutory Safeguarding Partners can commission a SAR in Darlington.

7.2 Agencies should consider making a SAR referral when there are reasonable concerns that an adult with needs for care and support is known/suspected to have experienced abuse or neglect, and meets the criteria outlined in section 2 and 3 of this procedure.

7.3 If an individual within an agency considers that serious abuse or neglect is taking place or has taken place, they should discuss this with their line manager or Safeguarding adult lead in the first instance, before submitting a referral.

7.4 Managers and Safeguarding Leads should be aware of the criteria for implementing a SAR. A decision should be made as to whether the case should be referred for a SAR and agencies should ensure there is enough information to support the decision for referral for SAR. You may find it helpful to discuss the concern with your agency representative on the Safeguarding Partnership, or the Safeguarding Partnership's Business Manager (DSP@darlington.gov.uk).

7.5 Where any individual or agency believes or suspects there may have been circumstances where the criteria for holding a SAR has been met, the case must be referred to the Safeguarding Partnership's Business Unit. You should ensure your manager is aware of the submission of the referral. The referral should be made within **1 working day** ***(*NB: it is acknowledged that there may be a requirement to obtain further information to support the referral, such as clarity of information of incident or details of cause of death, and therefore may not possible to meet the 1 working day timescale, however the referral should be submitted immediately the information becomes available).***

7.6 A referral is made by submitting SAR referral form (**Appendix 2**) to the Safeguarding Partnership's Business Unit DSP@darlington.gov.uk detailing why you, as the referrer, believe the case meets the criteria for a SAR and providing as much information as possible to support the decision. The SAR referral form should be submitted within **1 working day where possible.** The referral form can also be found on the Safeguarding Partnership website www.Darlington-Safeguarding-Partnership.co.uk

7.7 On receipt of the SAR referral, the Business Manager will support the referrer with ensuring all relevant/appropriate information has been provided to ensure the referral meets the criteria. The Business Manager will then record the information and inform the Statutory Safeguarding Partners within **1 working day**.

7.8 The Business Manager will liaise with leads from key statutory agencies (Local Authority, Police and Health) and Chair of the Learning & Development Group and set up a meeting (if applicable) to review information provided to establish if more detailed information is required prior to submission to Statutory Safeguarding Partners to support their decision as to whether the criteria for a SAR are met and prevent any undue delay in processes.

7.9 The Business Manager will liaise with the Partnership's Legal Advisor (DBC) if any information is to be requested from the Coroner, i.e. to request details of death and/or inquest information. Legal advisor will liaise with the Coroner's Office on behalf of the Partnership.

7.10 The Statutory Safeguarding Partners and Independent Scrutineer/Chair will meet within **5 working days** of receipt of the notification to consider the case.

7.11 If an agency agrees that the case does not meet the criteria for SAR however highlights there may be learning to explore - the same form should be completed and submitted, with the relevant sections on the form completed and forwarded to the Safeguarding Partnership's Business Unit DSP@darlington.gov.uk, referrer will receive acknowledgement of receipt and Business Manager will refer into the Learning and Development Group.

8. CROSS BOUNDARY SARs

8.1 It is acknowledged that there will be cases where adults have moved from their 'host' area and may be placed and funded by an organisation that is not in the 'host' authority area. If that is the case, a SAR should be carried out by the Board/Partnership that is responsible for the location where the serious incident took place. The Board/Partnership where the incident took place will agree how the SAR will be undertaken.

8.2 Early consideration should be given to inviting a representative from the Board/Partnership of the funding area to participate in the SAR. The SAB representative from the funding area has the responsibility of sharing all learning and ensuring and recommendations/ actions for their area are implemented within agreed timescales.

8.3 Boards and organisations should cooperate across borders and requests for the provision of information should be responded to as a priority. If agreement cannot be reached on the requirement for a SAR to be undertaken then this will be resolved in the first instance by the relevant Board Business Managers, with ultimate decision making and discussion being resolved by the Statutory Safeguarding Partners/Independent Chair of the Safeguarding Adult Board/Partnership, they will also agree on the mechanisms for presenting SARs that have cross border learning.

Further information is available in ADASS Guidance for Out of Area Safeguarding Arrangements.

9. DECISION MAKING

9.1 The Statutory Safeguarding Partners (SSP) and the Independent Scrutineer/Chair are responsible for deciding whether the criteria meet the threshold for a SAR and must consider the referral within **5 working days** of being notified.

9.2 If the SSP agree the case fulfils the criteria for a SAR, a review panel will be convened within **15 working days**. The Business Unit will request chronologies/multi-agency information within **7-10 working days** of the decision.

9.3 The review panel will take place within **15 working days** of the decision by the SSP to hold a review and the panel should be provided with written reports or chronologies from the key agencies involved (see **Appendix 2** for chronology template). Representatives from other relevant agencies may also be asked to attend the panel, to help clarify the circumstances of the case.

9.4 If the SSP determine that a case does not meet the criteria for a SAR, the SSP should consider whether there may be the potential for a discretionary SAR or single or multi-agency learning (which falls below

the threshold required for a SAR) or whether practice issues have been highlighted. In these circumstances the SSP should refer the case to the Learning and Development Group Chair. This process will be supported and monitored by the Learning and Development Group.

9.6 If the Statutory Safeguarding Partners determine that a case does not meet the criteria for a SAR/discretionary SAR and that there are no single or multi-agency practice issues to be considered, no further action will be taken.

9.7 Whatever the decision of the Statutory Safeguarding Partners, the rationale will be recorded and shared with the Learning and Development Group and the referrer.

10. THE REVIEW PANEL

10.1 The review panel will take place within **15 working days** of receipt of the referral. The aim of the review panel is to gather further facts about the case and discuss whether there is any immediate action needed. They will also decide what steps they should take next and determine the level of review to undertake. The Review Panel Chair will provide a recommendation to the Statutory Safeguarding Partners on the level of review to undertake.

10.2 The review panel will be chaired by a representative(s) of the Statutory Safeguarding Partners and will be attended by members of the Safeguarding Partnership and/or Learning and Development Group, supplemented by additional practitioners with the necessary knowledge or expertise pertinent to the circumstances of the case. The review panel may also wish to have available specialist advisors whose role will be to advise Panel members during the process.

10.3 It is expected feedback on the outcome of the referral will be provided to the referrer within **5 working days** of the decision being made, this will be provided by the Business Unit. If the referrer is dissatisfied with this outcome, the matter should be discussed with the Statutory Safeguarding Partners. Additional guidance on decision making is available in the Professional Challenge Procedure and Guidance [PDF Document].

10.4 A SAR should be completed within **6 months** of the decision to commission a SAR, where possible.

10.5 The Statutory Safeguarding Partners will not normally review cases which are more than 12 months old, unless there is significant information which has more recently emerged, or there are good reasons why the SAR was not appropriate at an earlier stage. This is to ensure the optimum effectiveness and learning from the resources deployed.

10.6 By virtue of the criteria, in cases where a SAR may be indicated, a safeguarding concern and/or enquiry may already have been submitted/conducted. In this case, a discussion with the relevant Safeguarding Adult Manager within the Local Authority should normally take place prior to making a referral for a SAR and this should be considered as part of the safeguarding enquiry. Consideration of whether a SAR is required should never delay the raising of a safeguarding concern and the adherence to multi-agency safeguarding policy and procedures, which considers any immediate protection required.

10.7 However, to note there may be circumstances where safeguarding concerns are not obvious or evident, for example, where the individual may have died as a result of suicide and there are concerns partner

agencies could have worked more effectively to protect the adult. In such circumstances, a SAR referral should be submitted.

11. SAR METHODOLOGY

11 .1 The Care Act 2014 does not prescribe a methodology for a SAR. The methodology chosen should reflect the circumstances and scope of the individual case and enable the best possible learning outcomes. The approach should be proportionate to the scale and complexity of the issues and the potential for learning. For further information about the methodologies which are available see SCIE – Safeguarding Adult Reviews (SARs).

12. COMMISSIONING A SAR

12.1 The Care Act 2014 Statutory Guidance states the Statutory Safeguarding Partners should aim for completion of a review within a reasonable period of time and in any event within **6 months** of its initiation (this is from the point the Statutory Safeguarding Partners agree to proceed with a SAR), unless there are good reasons for a longer period being required, for example, because of the potential to prejudice related court proceedings as outlined in S14.144 Care Act 2014.

12.2 The Statutory Safeguarding Partners are responsible for commissioning reviewers for local reviews. On receipt of the Statutory Safeguarding Partner's decision to undertake a SAR, the Chair of the Learning and Development Group will liaise with the Business Manager in order to make the necessary arrangements.

12.3 If the SSP have agreed to commission an independent author for a SAR, this should be in line with the regionally agreed process for commissioning an Independent Author, through North East Procurement Organisation (NEPO).

12.4 Once the decision has been communicated, each agency will be responsible for taking appropriate actions which may be necessary in relation to the security of their records. No member agency should comment publicly upon the case without express agreement of their senior management.

13. QUALITY ASSURANCE AND SAR QUALITY MARKERS

13.1 The Statutory Safeguarding Partners have a role in the quality assurance of the SAR process, and the Social Care Institute for Excellence (SCIE) has published SAR quality markers to assist commissioners and reviewers in conducting high quality case reviews. The quality markers assume the principles of Making Safeguarding Personal (MSP) as well as the 6 principles of safeguarding. The SAR quality markers are based on the SCR quality markers developed by the NSPCC for learning from Serious Case Reviews and adapted for adult safeguarding policy and practice. The SAR quality markers can be accessed at SCIE Safeguarding Adult Review Quality Markers checklist.

14. CONSULTING WITH THE ADULT AT RISK AND OTHERS AFFECTED BY THE REVIEW

14.1 Reflecting the principles of openness, transparency and candour, the Statutory Safeguarding Partners must ensure there is appropriate involvement in the review process of people affected by the case including, where possible, the victims of abuse and their families/significant others. In accordance with the Care Act 2014, where an adult has "substantial difficulty" in participating, this should involve representation and support from an independent advocate or their family member/friend where appropriate.

14.2 The review panel must consider the degree to which the adult, advocate and/or their families will be involved in the review. They should understand how they are going to be involved and their expectations should be managed appropriately and sensitively. Consideration should also be given, if and how, a known abuser might have some input to the review process.

14.3 Where a SAR is taking place, individuals will be notified. Involvement may be by formal notification only, or by inviting them to share their views in a way which suits them. Careful consideration should be given as to who will contact the individual or their family and maintain contact throughout the SAR process. This will normally be the professional who knows the individual/family best.

14.4 The timing of such notification is crucial, particularly when there are criminal justice processes running parallel and decisions will need to be taken in consultation with relevant others.

14.5 If a decision is taken to not involve the adult at risk or their family, the reasons why not should recorded along with any legal advice provided.

14.6 If an adult affected by a notifiable patient safety incident has died, or experienced serious abuse or neglect (see section 3), then a conversation with the family/adult should be considered prior to a referral for a SAR. If a SAR is commissioned subsequently, then the family should be regularly updated on developments from the investigation into the patient safety incident and the SAR.

15. INFORMATION SHARING

15.1 The Safeguarding Adults Review Protocol should be viewed with consideration to Section 45 Care Act 2014 which outlines the expectation that organisations share information, and be fully compliant in circumstances where information is required to enable the Darlington Safeguarding Partnership to exercise its functions. Information should be shared in accordance with the Data Protection Act 2018 and General Data Protection Regulations (GDPR) and the Darlington Safeguarding Partnership Information Sharing Protocol [PDF document].

16. REFERRAL TO THE LEARNING AND DEVELOPMENT GROUP - CASES THAT DO NOT MEET CRITERIA FOR SAFEGUARDING ADULT REVIEW

16.1 Details of all Safeguarding Adult Review referrals considered by the Statutory Safeguarding Partners (SSP) should be shared with the Chair of the Learning and Development Group (L&D) in the interest of openness and transparency to enable the Group to discuss and analyse the decisions made. Details of all cases will be referred to the L&D Group on the referral template (Appendix 1).

16.2 Details of cases which an agency agrees do not meet the criteria for referral to Statutory Safeguarding Partners for consideration of SAR, however highlights learning to be explored, should also be shared with the Chair of the L&D Group for consideration.

16.3 The SSP will have determined whether the case meets the criteria for Safeguarding Adult Review (SAR). If the case meets the criteria, a Review Panel will be convened, and the process outlined in Section 9 above will be followed.

16.4 If the case does not meet the criteria for SAR, the SSP will provide the rationale and decision.

16.5 Based on the information provided in the notification, the SSP will inform the Chair of the Learning and Development Group that there is no further action to be taken, or they recognise there is the potential for single or multi-agency learning.

16.6 The Learning and Development Group will consider all information provided to determine:

1. Whether a multi-agency practice review should be undertaken.
2. Whether a multi-agency audit should be undertaken on similar cases.
3. Whether there is learning for a single agency and an internal review is undertaken.
4. Whether an issue is highlighted that needs to be explored further, through quality assurance processes.
5. No further action required.

16.7 The Learning and Development Group will provide details and rationale and outcome of their decision to the SSP for approval to progress course of action agreed.

17. INTERFACE WITH OTHER REVIEWS AND INVESTIGATIONS

17.1 The Care Act 2014 Statutory Guidance (14.176) requires the Statutory Safeguarding Partners must consider how the SAR will interface with other parallel processes or investigations. It is helpful to establish at the outset of the SAR all relevant areas which need to be addressed, to reduce the potential for duplication. Important principles in planning include ensuring adherence to any separate statutory requirements, ensuring appropriate expertise and knowledge, reduction of duplication, maximising effectiveness and learning, and minimising the impact on those affected by the case. It is the responsibility of the Chair of the review panel to ensure contact is made with the Chair of a parallel process. There are a number of types of review and investigation which may interface with a SAR, and it is important to consider any other processes which may run parallel with the SAR or which may be being considered. These may include:

- Local Child Safeguarding Practice Review (LCSPR);

- Domestic Homicide Review (DHR);
- Safeguarding Enquiry;
- Serious Untoward Incident Investigations (SUI);
- Mental Health Homicide Review;
- Disciplinary Proceedings;
- Judicial Reviews;
- Complaints;
- Criminal Justice Processes;
- Coroner's Inquest.

17.2 Where there are possible grounds for both a SAR and a SCR (or any other type of review), then a decision should be made at the outset by the Chair of the respective decision-making bodies as to how they will coordinate the reviews, engagement and report(s). This may result in some parts being jointly commissioned and overseen, or one Board leading, with the same or different reports being taken to each commissioning body. This will necessitate a discussion between the Independent Scrutineer/Chair and the Chairs of other panels involved in a review to consider how best to proceed.

17.3 **Domestic Homicide Reviews;** Where there are possible grounds for both a Safeguarding Adult Review (SAR) and a Domestic Homicide Review (DHR), a decision should be made by the Chair of the DHR and the Statutory Safeguarding Partners as to how they will coordinate the reviews, engagement and reports. This may result in some parts being jointly commissioned and overseen, or one body with the same or different reports being presented to each body.

Where either the victim or suspect/perpetrator were responsible for the care of a child under the age of 18, the Chair of the Community Safety Partnership should inform the Darlington Safeguarding Partnership's Business Unit of the homicide and the circumstances.

For further information see Home Office Guidance Dec 2016: Domestic Homicide Reviews: Statutory Guidance [external link]

17.4 **Mental Health Homicide Reviews;** NHS England commissions independent investigations into homicides (sometimes referred to as mental health homicide reviews) which are committed by patients being treated for mental illness. For further information see: www.england.nhs.uk/publications/reviews-and-reports/invest-reports

17.5 **Interface between SARs/Discretionary SARs and Coronial Processes:** All SARs need to take account of a Coroner's Inquiry and any criminal investigation, including disclosure issues, which may impact on timescales.

The National Network for the Chairs of Safeguarding Adults Boards has issued best practice guidance and templates for notification to the Coroner when a SAR has commenced.

The Business Manager will liaise with the Partnership's Legal Advisor (DBC) if any information is to be requested from the Coroner, for example to request details of death and/or inquest information. Legal advisor will liaise with the Coroner's Office on behalf of the Partnership.

The Coroner must be informed of the decision to hold a SAR and the Chair of the review panel must ensure the necessary contacts are maintained with appropriate people.

The DSP Business Unit will complete the template to the Coroner informing them that a SAR is being commenced (see Appendix 3).

Sharing Information with the Coroner: SABs/Partnerships can be instructed by the coroner to provide documents relating to an individual which are being held by the Board/Partnership for the purposes of a SAR. All requests should be discussed initially with the Local Authority legal team which will liaise with the Coroner throughout the process. In most cases, sharing a report that has been agreed by the agencies involved as accurate and has been approved by the SAB should be sufficient for the purpose of an inquest. Both SARs and inquests have learning as their purpose and approved reports represent the best evidence available.

It is recommended that the SAR is discussed with the coroner at the preinquest hearing, if possible, as expectations about information required and how this can be provided can be set out at an early stage. Requests for disclosure of agency IMRs or chronologies should be made directly to those agencies as they remain the data controllers. Depending on the methodology and timescales for the SAR, there can be a number of options for sharing:

- Sharing the information disclosed to the Partnership
- Sharing a draft of the SAR report which has been signed off by each agency as being factually accurate, even if the format, recommendations and learning have not yet been finalised
- Sharing the completed SAR in full
- Sharing the learning and recommendations
- Sharing an executive summary

Information must be shared in accordance with principles outlined in the Data Protection Act 2018 and General Data Protection Regulations and the Darlington Safeguarding Partnership Information Sharing Protocol.

Being named an Interested Party: The CJA 2009 sets out at Paragraph 47(2) those who may be identified by the Coroner as an Interested Party and this includes a Local Authority and by extension a SAB/Partnership Chair, a SAB/Partnership manager or SAR reviewer. The Coroner has discretion to call anyone they believe has sufficient interest and such a person cannot refuse to be an interested person if the Coroner has deemed that they are an interested person. If a local authority or third party is requested to give evidence before the Coroners Court, then the person providing that evidence must be the person with the first-hand knowledge. This is a common law principle but is also enshrined in statute such as the CJA 2003. SAB chairs, Managers and reviewers would fit into this category if, for example, the purpose is to provide evidence about the commissioning and completion of the SAR, and the outcomes of implementation of SAR recommendations.

Timescales: Processes can run concurrently and are not co-dependent or sequential – there is no statutory guidance instructing that one should take place before the other. In some cases, there may be benefits to an inquest going ahead first, and in others there may be benefits to a SAR going ahead first. To assist with local decision making we have included a section on factors to consider before deciding locally

(see 'Timescales') There are no rules, either in statute or guidance, on whether a SAR or a Coroner's inquest should take place before the other one.

18. MEDIA/COMMUNICATION AND PUBLICATION

18.1 The media strategy should be considered by the review panel at the beginning of the process and will be approved by the Statutory Safeguarding Partners. Media and communication issues will be coordinated by Darlington Borough Council's (DBC) Communications team, in collaboration with the Communications teams of other agencies involved to ensure consistency.

18.2 In the interests of transparency, the Statutory Safeguarding Partners should consider publishing the SAR report within legal parameters. The Statutory Safeguarding Partners/Independent Scrutineer will make the final decision on whether the SAR report will be published in full or whether to publish only the learning outcomes. Advice will be sought from the DBC Communications and Media team in respect of publication and media releases.

18.3 At the point of publication, the Statutory Safeguarding Partners will release a press statement via the Communications Team outlining the reason for the review, the key findings and the required actions. The Statutory Safeguarding Partners will retain discretion over the process and timing of publication, taking into account such factors as ongoing criminal investigations or court proceedings.

19. CONCLUSION OF A SAR

19.1 Once the review process has been completed, the Independent Reviewer will present the draft report to the Learning and Development Group, who have the governance responsibility for all reviews. The group will review the learning outcomes and suggested recommendations for improvement. Improvement actions must be clearly communicated and achievable in the timescales considered. The final report will be presented to the Statutory Safeguarding Partners and Independent Scrutineer/Chair for final sign off, before findings are shared with the wider multi-agency partnership group.

19.2 The Learning and Development Group will be responsible for determining the improvement actions which will then be recorded into an action plan. This plan will be regularly reviewed and monitored by the Learning and Development Group which will ensure learning outcomes are embedded in the respective organisations. The Chair of the Group will seek an explanation from relevant agencies in respect of outstanding actions and, in accordance with the escalation process, will inform the relevant Head of Service in cases where actions are not completed 3 months beyond the specified deadline. In cases where actions remain outstanding at 6 months beyond the original deadline, the Chair of the Group will inform the Chief Officer of the agency concerned and will seek information about what steps are being taken to complete the action. An extension to the original deadline should only be agreed in exceptional circumstances and at the request of the Chief Officer. In exceptional circumstances, there may be a requirement for the Chair of the Group to involve the Independent Scrutineer/Chair in the escalation process.

19.3 There is no statutory requirement to publish a SAR report. The Statutory Safeguarding Partners will review SAR's on a case by case basis and agree publication requirements, a rational for any agreement not to publish will be recorded. It may in some instances be appropriate to produce an anonymised

Executive Summary for certain cases. If such a document is to be produced, publication will need to be timed in accordance with the conclusion of any related court proceedings.

20 REGIONAL / NATIONAL LEARNING

20.1 The Business Manager should ensure that once the Statutory Safeguarding Partners have agreed a SAR is to be published, the report is shared with the Regional and National SAR Library to ensure learning points are shared and inform national policy, practice and procedures. The Partnership will decide upon which cases may be included within each SAR library with the agreement of the adult(s), their family and/or representative.

21. ANNUAL REPORT

21.1 The findings from SARs will be included in the Darlington Safeguarding Partnership Annual Report, along with relevant service improvements and actions and the reasons for any decisions not to implement actions.

Appendix 1

Safeguarding Adults Review Referral and Learning Request Form

Strictly Confidential

The Purpose of a Safeguarding Adult Review (SAR) is to determine what the relevant agencies and individuals involved in a case might have done differently that could have prevented harm or death and ensure maximum learning can be achieved.

As set out in the Care Act 2014, a SAR will only be considered by the Statutory Safeguarding Partners if Section 1 and either Section 2 or 3 are met.

For any case where you determine does not meet the criteria for SAR i.e. section 1 or 2 & 3 are not met yet, you believe there is learning to be explored such as the potential for a single or multi-agency review or audit or a practice issue has been highlighted then click 4 below.

In your opinion, please select all that apply.

1.	There is reasonable cause for concern about how the Safeguarding Partners, members of the Darlington Safeguarding Partnership (DSP) or other persons with relevant functions worked together to safeguard the adult	☐
2.	The adult has died and you know or suspect the death resulted from abuse or neglect (whether or not you knew about or suspected the abuse or neglect before the adult died)	☐
3.	The adult is still alive, and you know or suspect the adult has experienced serious abuse or neglect	☐
4.	Does not meet criteria for SAR but there is learning to be explored (to be referred to the Learning and Development Group)	☐

The information on this form is confidential and will only be shared in accordance with the DSP Information Sharing Protocol and in the best interests of the adult/adult's family.

Darlington Safeguarding Partnership needs as much information as possible to enable members to make a proportionate decision as to how to respond to a SAR referral, therefore it is essential that you complete as much information on this form as possible. Pease refer to the SAR Protocol for further guidance.

If you have any questions or wish to discuss the referral, please do not hesitate to contact the DSP Business Unit via email: DSP@darlington.gov.uk

SECTION 1: ABOUT THE PERSON COMPLETING THE FORM (REFERRING AGENCY)			
FULL NAME			
JOB TITLE			
ORGANISATION			
EMAIL		TELEPHONE NUMBER	
DATE SUBMITTED			
AUTHORISING OFFICER WITHIN AGENCY		JOB TITLE	
ORGANISATION AGREEMENT:			

YOU DETERMINE THE CASE MEETS THE CRITERIA FOR A SAFEGUARDING ADULT REVIEW (to be referred to Statutory Safeguarding Partners)	YES ☐	NO ☐	**YOU DETERMINE THE CASE <u>DOES NOT MEET</u> THE CRITERIA FOR A SAFEGUARDING ADULT REVIEW, HOWEVER THERE IS LEARNING TO BE EXPLORED** (to be referred to the Learning and Development Group – see section 15 SAR Protocol for further guidance)	YES ☐	NO ☐
ONCE COMPLETED PLEASE SEND SECURELY TO			**DSP@darlington.gov.uk**		

SECTION 2: ABOUT THE ADULT					
FULL NAME					
DATE OF BIRTH		GENDER	Choose an item.	ETHNICITY (if known)	
ADDRESS				POSTCODE	
DATE OF SERIOUS INCIDENT		DATE OF DEATH (if applicable)			
CAUSE OF DEATH (if applicable)					
IS A CORONER INVOLVED?	YES ☐	NO ☐	UNSURE ☐		
IF YES, RECORD DETAILS OF THE CORONER AND LOCAL AUTHORITY AREA					
DOES ADULT HAVE CARE AND SUPPORT NEEDS?	YES ☐	NO ☐			
MENTAL CAPACITY – Does/did adult have capacity to make their own decisions?	YES ☐	NO ☐			

MAIN TYPE OF ABUSE OR NEGLECT IDENTIFIED (please tick as appropriate)				
Discriminatory Abuse	Domestic Abuse	Financial Abuse	Modern Slavery	Neglect/Acts of Omission
☐	☐	☐	☐	☐
Organisational Abuse	Physical	Self-Neglect	Psychological/Emotional Abuse	Sexual Abuse
☐	☐	☐	☐	☐

SECTION 3: ADULT'S REPRESENTATIVE e.g. Family/next of kin/advocate/representative – who should be contacted if a SAR/Review is agreed			
FULL NAME		GENDER	Choose an item.
RELATIONSHIP TO ADULT			
ADDRESS		POST CODE	
TELEPHONE NUMBER		EMAIL	

SECTION 4: OTHER AGENCIES INVOLVED* (please indicate all agencies that you know are involved with this adult as this detail will be used to contact the organisations involved for further information			
FULL NAME	ORGANISATION	RELATIONSHIP TO ADULT	ADDRESS AND CONTACT DETAILS

*Please add more rows if necessary

SECTION 5: DETAILS OF THE CASE
This should include a clear factual outline of the concerns being raised with details of times, dates, people and places whenever possible. This will enable the Statutory Safeguarding Partners to make an informed decision on whether this meets the criteria for a Safeguarding Adult Review.

SECTION 6: WHY YOU BELIEVE IT MEETS THE CRITERIA FOR SAFEGUARDING ADULT REVIEW?
Please outline why you feel this case meets the criteria for a Safeguarding Adult Review. A brief overview/narrative and professional judgement is required (if not relevant, i.e. it is a learning request - insert not applicable and complete section 7 below).

SECTION 7: WHY YOU BELIEVE CASE DOES NOT MEET THE CRITERIA FOR SAFEGUARDING ADULT REVIEW HOWEVER THERE IS LEARNING TO BE EXPLORED?
Please outline why you feel this case meets the criteria for a Learning Request and referral into the Learning and Development Group (if not relevant, i.e. it is a SAR referral – insert not applicable and complete section 6 above). See section 15 SAR Protocol for further guidance

SECTION 8: AGENCY AUTHORISING OFFICER COMMENT & RECOMMENDATION

SECTION 9: ANY OTHER REVIEW PENDING OR COMPLETE?
e.g. Internal Agency Review, Disciplinary Processes, Professional Body Process, Criminal Investigation, MAPPA, MARAC, Domestic Homicide, Child Safeguarding Practice Review, LeDeR Review, Regulatory Bodies or Other (please provide details). Please provide details of any early learning or changes to practice that you may have implemented to improve or safeguard individuals going forward with your knowledge from this case. Please indicate if you are unaware of any other reviews ongoing (do not leave blank).

SECTION 10: COMMUNICATION				
Communication with the Adult/family will be considered by the Business Manager and SAR Sub-Group Chair upon receipt of this Notification				
Is the Adult aware of this Notification?	Yes	☐	No	☐
Is the Adult's Representative aware of this Notification?	Yes	☐	No	☐

SECTION 11: BUSINESS UNIT USE ONLY			
DATE REFERRAL RECEIVED BY BUSINESS UNIT		DATE ACKNOWLEDGED	
IF SAR REFERRAL - DATE STATUTORY SAFEGUARIDNG PARTNERS NOTIFIED		IF LEARNING REQUEST - DATE REFERRED TO LEARNING AND DEVELOPMENT GROUP	
STATUTORY SAFEGUARDING PARTNERS DECISION AS TO WHETHER MEETS CRITERIA FOR SAR			
DOES MEET CRITERIA	YES ☐	NO ☐	
DATE AGREED			
SUMMARY OF STATUTORY SAFEGUARDING PARTNERS DECISION			
IF IT DOES NOT MEET CRITERIA FOR SAR – DO STATUTORY SAFEGUARDING PARTNERS RECOGNISE THERE MAY BE LEARNING FROM THE CASE? *If yes, refer to chair or Learning and Development Group for consideration of next steps.* *If no, there should be no further action taken and the decision to be shared with the Chair of the Learning and Development Group for information.*			
REFERRAL TO LEARNING AND DEVELOPMENT GROUP	YES ☐	NO ☐	
FEEDBACK AND OUTCOME OF REFERRAL TO REPORTING AGENCY			
DATE		WHO NOTIFIED	

Appendix 2

CHRONOLOGY TEMPLATE FOR Safeguarding Adult Review

Multi-Agency Chronology Template

Name of Adult	
Date of Birth	
Address	
Liquid Logic Number	
NHS Number	
Agency	
Author	

Date dd/mm/yy	Time 00:00 (24hr)	Significant Event	Agency	Whose Professional/ Agency Records (Source)?	Who was involved?	Decisions/Outcome including any actions taken	Author Comments

Appendix 3

Please email to co-office@durham.gov.uk	
Mr Jeremy Chipperfield, HM Senior Coroner Durham and Darlington HM Coroner's Office, 4th Floor Civic Centre, North Terrace,	**Coroner Referral Form (Safeguarding Adult Reviews)** Darlington Safeguarding Partnership

Section 1 – Darlington Safeguarding Partnership Business Unit			
Name of person submitting:		Date submitted:	
E-mail:		Referrer Contact Number:	01325 406450/451
Referring Agency Address:	Darlington Safeguarding Partnership Town Hall, Feethams, Darlington, DL1 5QT		
Secure email contact:	DSP@darlington.gov.uk	*If no secure/encrypted email function is available please ensure you clearly indicate opposite, so alternative arrangements can be agreed in line with sharing and transferring information standards.*	

Section 2 – Adult at Risk Details:			
Family Name:		Forename(s):	
Date of Birth:		**Date of Death:**	

Did the adult at risk have capacity to make their own decisions?	**Yes**	**No**	*Note: Links to Deprivation of Liberty Safeguards*
Home Address[1]:			
Place of Death[1] (Establishment/Residing)			

Section 3 – Next of Kin Details – Please record below					
Full Name		Address & Contact Detail:		Relationship:	
Full Name		Address & Contact Detail:		Relationship:	

Section 4 – Criteria for referral to HM Coroner

Referral to the Coroner's Office should only be made if;

- A person has died *and*
- The SAR criteria has been met *and*
- Following an endorsement by the Statutory Safeguarding Partners of the decision for a SAR.

Section 5 – Police Involvement			
Is there police involvement?	**YES**	**NO**	If, yes, please record below the details of the name(s) of officer(s) in the case and the police force (if known)

Section 6 – Reasons for Referral to the Coroner

Please record your narrative, including dates, details of the incident(s), agencies involved, and the nature of the abuse and/or injuries sustained and how this is thought to be causative or possibly causative of the death. Please refer to the Safeguarding Adult Review practice guidance and specifically the Coroner Annex.
[1] *Addresses – please notify the Coroner if the person has died outside of County Durham but are usually resident in County Durham and if they died in County Durham but are from an establishment/usually resident outside County Durham and provide location/out of area detail.*

Section 7 – Safeguarding Adult Reviews					
Has a Safeguarding Adult Review been agreed?	**Yes**	**No**	**TBC**	If, yes record the date agreed:	