



# OLDHAM SAFEGUARDING ADULTS BOARD

## Safeguarding Adult Review Policy and Procedure



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Produced by: Safeguarding Review, Audit and Quality Assurance Subgroup

Version: 3.0

Adopted: July 2022

Reviewed: October 2025

Next Review Date: October 2027



## Contents

1.	Introduction.....	3
1.1	Statutory Context .....	3
1.2	Purpose of Policy .....	3
2.	Purpose of a Safeguarding Adult Review .....	3
3.	Safeguarding Principles .....	4
4.	Safeguarding Adult Review Criteria .....	4
5.	Referral for a Safeguarding Adult Review .....	5
5.1	Making a Referral .....	5
5.2	Where it is Thought that More than One Review Process Criteria are Met .....	5
6.	Safeguarding Adult Review Referral Decision Procedure .....	5
6.1	Decision Procedure.....	5
6.2	Approximate Decision Procedure Timeframes.....	6
7.	Safeguarding Adult Review Procedures .....	7
7.1	Good Practice .....	7
7.2	Timescales .....	7
7.3	Methodologies.....	7
7.4	Traditional Methodology Procedure .....	7
7.5	Approximate Traditional Methodology Procedure Timeframes .....	8
8.	Information Sharing and Retention.....	8
8.1	Sharing of Relevant Information and Retention.....	8
8.2	Disclosure during Criminal and/or Inquest Proceedings .....	9
9.	Appointment and Role of An Independent Author.....	9
9.1	Required Skills and Expertise.....	9
9.2	Responsibilities .....	9
10.	Involvement of Individuals, Family Members, Friends and other Support Networks.....	10
11.	Agency Representatives on the Review Panel .....	10
12.	Involvement of Practitioners/Frontline Staff.....	11
13.	Parallel Processes.....	11
13.1	Principles .....	11
13.2	Concurrent Police Investigations or Judicial Proceedings .....	12
13.3	HM Coroner .....	12
14.	Joint Area Safeguarding Adult Reviews .....	12
15.	Resolving Disagreements .....	13
16.	The Final Overview Report.....	13
17.	Presentation of Overview Report to OSAB Board .....	13
17.1	Presentation Procedure.....	13
17.2	OSAB Board Responsibilities.....	13
18.	Media and Communications Strategy.....	14
18.1	Agency Involvement .....	14
18.2	Publication Procedures.....	14
18.3	Media and Communications Strategy in Preparation for an Inquest.....	14
19.	Action Plans.....	14
20.	Safeguarding Adult Reviews and the OSAB Annual Report .....	15
21.	Complaints and Escalation Procedure .....	15
	Appendices.....	15
	Appendix 1 - OSAB Safeguarding Adult Review Referral Form.....	15
	Appendix 2 - OSAB Safeguarding Adult Review Referral Screening Report Template .....	15
	Appendix 3 - OSAB Decision Flowchart: Reviews Under the Care Act 2014.....	15
	Appendix 4 - Guidance Leaflet for Family Members, Friends and Carers .....	15

# 1. Introduction

## 1.1 Statutory Context

The Department of Health and Social Care, [Care and Support Statutory Guidance](#) states that in order to achieve the aims of safeguarding, it is important to ‘*support the development of a positive learning environment across partnerships and at all levels within them to help break down cultures that are risk-averse and seek to scapegoat or blame practitioners*’.

One of the statutory duties of Safeguarding Adults Boards (SABs) is to review cases, where an adult with needs for care and support has died and the death resulted from abuse and neglect or is alive and the SAB knows or suspects that they have experienced serious abuse or neglect.

Importantly, Safeguarding Adult Reviews (SARs) are about how agencies worked together to safeguard adults; they are in their nature multi-agency reviews. For a review to be mandatory in legislation, there must be reasonable cause for concern about how the SAB members (or others with relevant functions) worked together to safeguard the adult.

## 1.2 Purpose of Policy

This policy outlines the process for the management of SARs in Oldham under [Section 44 of the Care Act 2014](#). This policy and procedure clarifies the local process by:

- providing an overview of how to notify serious incidents which may be suitable for a SAR
- enabling a consistent approach to SAR decision making and practice
- demonstrating how local processes comply with legal requirements and best practice
- clarifying SAR timeliness in line with legislation and statutory guidance
- providing a resource to enable those involved in reviews to answer common questions
- clarifying local roles and responsibilities including the decision making and publication responsibilities of the SAB
- providing transparency about the review process
- supporting practical planning and preparation of reviews.

# 2. Purpose of a Safeguarding Adult Review

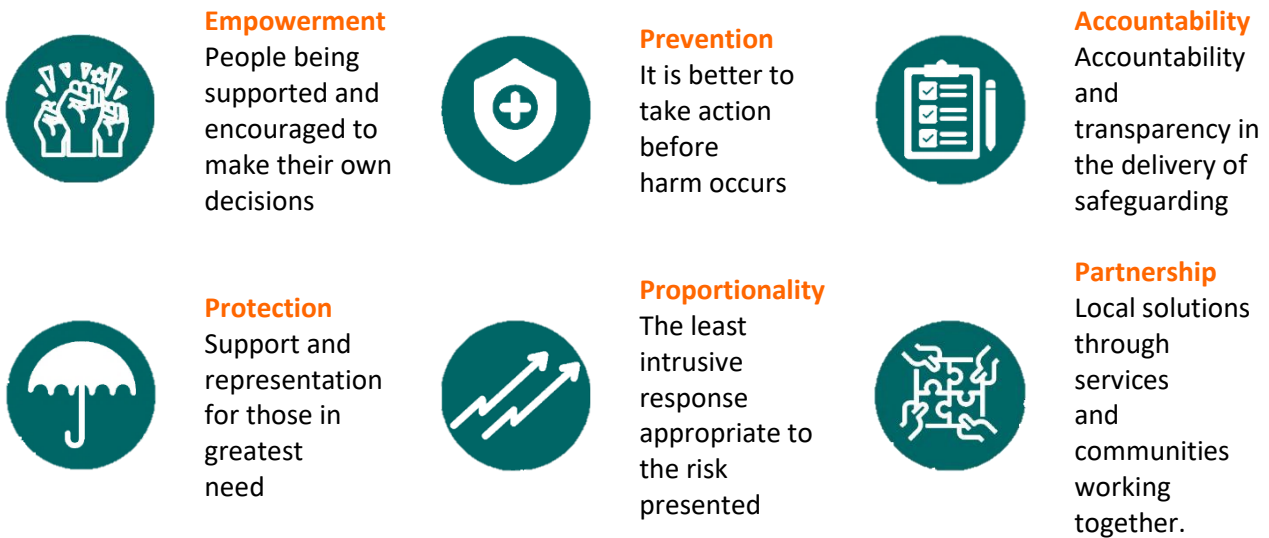
2.1 The Statutory Guidance notes that the purpose of a SAR is to: ‘*promote effective learning and improvement action to prevent future deaths or serious harm occurring again. This may be where a case can provide useful insights into the way organisations are working together to prevent and reduce abuse and neglect of adults. SARs may also be used to explore examples of good practice where this is likely to identify lessons that can be applied to future cases. SARs should seek to determine what the relevant agencies and individuals involved in the case might have done differently that could have prevented harm or death. This is so that lessons can be learned from the case and those lessons applied to future cases to prevent similar harm occurring again. Its purpose is not to hold any individual or organisation to account*’.

2.2 SARs are not disciplinary proceedings and should be conducted in a manner which facilitates learning, and appropriate arrangements must be made to support staff. SARs are not enquiries into why an adult has died (or has been significantly injured), or who is culpable. These are matters for criminal courts and Coroner’s courts.

2.3 It should also be noted that OSAB are concerned with reviews of significant cases, some of which will become SARs and others may become reviews that will not meet the threshold but will be commissioned by the SAB when considered necessary. The learning and recommendations from all reviews will be treated in the same way as a formal SAR.

### 3. Safeguarding Principles

3.1 The Care Act 2014 states SARs should reflect the six safeguarding principles:



3.2 In the context of these principles, OSAB will conduct SARs ensuring:

- leadership by individuals who are independent of the case under review and of the agencies whose actions are being reviewed.
- a culture of continuous learning and improvement, promoting the wellbeing and empowerment of adults, promoting good practice and focusing on opportunities to apply what works.
- a culture of transparency is created that identifies a flexible and proportionate environment for learning.
- a proportionate response that identifies timely action is taken to respond to the need for systematic or professional changes.
- involvement of professionals to contribute their perspective without fear of being blamed for actions they took in good faith.
- individuals and/or their families are invited to contribute to the reviews and understand how they are going to be involved.
- contribution to processes that explore the broad issues and learning in a wider multi-agency setting rather than limiting the potential to develop solutions to those agencies involved in the case.

### 4. Safeguarding Adult Review Criteria

4.1 The SAB **must** arrange for there to be 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: there is reasonable cause for concern about how effectively the SAB, members of it or other persons with relevant functions, worked together to protect the adult, and either:

- the adult has died, and the SAB knows or suspects that the death resulted from abuse or neglect (whether or not it knew about or suspected the abuse or neglect before the adult died) or;
- the adult is still alive, and the SAB knows or suspects that the adult has experienced serious abuse or neglect.

4.2 The SAB **can** also arrange for a SAR in any other situations involving an adult in its area with needs for care and support. There are two types of SAR undertaken by OSAB. Mandatory SARs are those where there is an absolute duty to carry out a SAR as all statutory criteria have been met. Discretionary SARs are those where the absolute duty does not apply. Both are statutory in nature.

## 5. Referral for a Safeguarding Adult Review

### 5.1 Making a Referral

Any practitioner can make a referral for a SAR if they believe the case meets the criteria for consideration. HM Coroner, Members of Parliament and Elected Members of Oldham Council can also make a referral for a SAR. Practitioners will usually find it helpful to discuss their concerns with their manager or agency's safeguarding lead prior to making a referral. To ensure appropriate oversight and single-agency escalation the local referral form requires approval by a Senior Manager or Safeguarding Lead.

The SAR referral should be made as soon as it is recognised the SAR criteria could be met. A referral can be made at any stage of a Safeguarding Enquiry, even if the enquiry remains ongoing. This referral does not replace Safeguarding Enquiries, which would be concerned with immediate safeguarding and protection for adults at risk. Discussions regarding the appropriateness of referring a case are welcomed by the OSAB Business Manager.

### 5.2 Where it is Thought that More than One Review Process Criteria are Met

Where a case meets the criteria for more than one review process, such as a Domestic Abuse Related Death Review (DARDR), or a Local Child Safeguarding Practice Review (LCSPR), a referral should be made to both review processes so that the relevant boards/partnerships can work together to identify the most appropriate method to conduct the review, and OSAB will explore the possibility of commissioning the review jointly. This will ensure that all aspects of the review are addressed and that the identified process dovetails with any other investigations that are ongoing.

### 5.3 See Appendix 1 for the 'OSAB SAR Referral Form'. Referral Forms should be sent by email to [OldhamSafeguardingAdultsBoard@oldham.gov.uk](mailto:OldhamSafeguardingAdultsBoard@oldham.gov.uk)

## 6. Safeguarding Adult Review Referral Decision Procedure

### 6.1 Decision Procedure

Upon receipt of a referral, the OSAB Business Coordinator will send an email to the referrer confirming receipt and will also notify the OSAB Independent Chair, Business Manager and Chair of the Safeguarding Review, Audit and Quality Assurance Subgroup that the referral has been received. Where the SAR referral is in relation to an individual who has died, the Business Coordinator will also inform HM Coroner and include expected timeframes for a decision to be made.

The Business Coordinator will circulate the SAR Referral and the Case Screening Report Template (Appendix 2) to OSAB partner agencies and request that agencies provide all relevant information. Screening Reports should be completed by managers who have not had operational responsibility for the case but understand the service. The Business Coordinator will schedule an Extraordinary Meeting of the Safeguarding Review, Audit and Quality Assurance in order to screen the case. Additional representatives from agencies involved in the case but not represented on the subgroup membership may be asked to attend. The attendees at this meeting form a SAR Referral Screening Panel. The screening meeting must take place as soon as possible following the submission of agency information. This meeting requires a minimum of one representative from each of the Statutory Partners as defined in the Care Act: Greater Manchester Police, Oldham; Adult Social Care, Oldham Council; and NHS Greater Manchester Integrated Care, Oldham.

Having considered the SAR referral and the relevant agency information and through use of the locally agreed SAR Decision Flowchart (see Appendix 3), the Screening Panel will be responsible for making a recommendation to the Independent Chair about whether to commission a SAR. It will be the responsibility of each agency representative attending a screening meeting to feedback the outcome of the screening and

any identified learning within their agency, particularly when cases involve a subject that agencies are currently working with.

If the Screening Panel conclude that a SAR should be undertaken then consideration will be given to draft Terms of Reference, the methodology to be used, the scoping period, and the membership of a Review Panel. If the Screening Panel conclude that a SAR should not be undertaken, then consideration will be given to other types of reviews. If the Screening Panel conclude that additional information is required prior to making a recommendation, then the Business Coordinator will coordinate the actions as agreed by the attendees and collate and share all additional information with the Screening Panel. A further Extraordinary Meeting will be scheduled in order to reach an agreed recommendation.

The Business Coordinator will share the minutes of the meeting with the Independent Chair, who will notify the Business Coordinator of their decision. If the Independent Chair disagrees with the recommendation a further Extraordinary Meeting of the Screening Panel will be arranged to discuss a multi-agency response to the Independent Chair. The Business Coordinator will share the Independent Chair's decision with the referrer. If the referrer wishes to appeal against a decision not to carry out a SAR, the appeal should be put in writing to the Independent Chair, who will, if necessary, discuss and review the decision with the referrer and the Screening Panel who made the initial recommendation.

The Business Coordinator will inform the Screening Panel and the statutory OSAB members of the intention to undertake a SAR. If the SAR referral is in relation to an individual who has died, the Business Coordinator will also inform HM Coroner of the Independent Chair's decision and expected timeframes for the SAR process. If the SAR referral is in relation to an individual with Learning Disabilities and/or Autism, the Business Coordinator will also inform the Learning from Lives and Deaths – People with a learning disability and autistic people (LeDeR) Local Area Contact, NHS Greater Manchester, of the Independent Chair's decision to undertake a SAR and expected timeframes for the SAR process.

## 6.2 Approximate Decision Procedure Timeframes

Please note, the timeframes below are approximate, and timeframes and deadlines set will be determined taking account of current OSAB SAR activity and other OSAB work agency representatives are committed to undertake at any one time.

Action	Timeframe	Approximate Working Day
Referral received.	As soon as is reasonable after case has been identified.	0
Confirmation of receipt of referral sent; SAR Referral and Screening Report Templates issued; Independent Chair, Business Manager and Chair of the Subgroup notified; Screening Panel meeting scheduled, and invitations sent.	Within 1 working day of the referral being received.	1
Completed Screening Reports returned.	Usually within 20 working days of request being sent.	21
All Screening Reports combined and distributed to the Screening Panel.	Usually 5 working days prior to the Screening Panel Meeting.	21-26
Screening Panel meeting.	Usually within 10 working days of all Screening Reports being submitted.	26-31
Screening Panel recommendation sent to Independent Chair.	Within 5 working days of the Screening Panel meeting.	31-36
Independent Chair decision received.	Within 10 working days of the Screening Panel meeting.	36-41
Decision shared with the referrer.	Within 15 working days of the Screening Panel meeting.	41-46

## 7. Safeguarding Adult Review Procedures

### 7.1 Good Practice

A SAR will be conducted in a way which:

- recognises the complex circumstances in which professionals work together to safeguard adults
- seeks to understand precisely who did what and the underlying reasons that led individuals and organisations to act as they did
- seeks to understand practice from the viewpoint of the individuals and agencies involved at the time rather than using hindsight
- is transparent about the way data is collected and analysed
- makes use of relevant research and case evidence to inform the findings.

### 7.2 Timescales

The Statutory Guidance states that *‘the SAB should aim for completion of a SAR within a reasonable period of time and in any event within six months of initiating it, unless there are good reasons for a longer period being required; for example, because of potential prejudice to related court proceedings’*.

OSAB will aim to complete a SAR within six months of the Independent Chair’s decision being made.

### 7.3 Methodologies

A methodology for undertaking SARs is not prescribed in the Care Act 2014, and this enables flexibility to consider a range of options. No one model or methodology will be applicable for all cases, OSAB will determine the type of review process which is proportionate to the case and will promote effective learning and improvement action to prevent future deaths or serious harm occurring again. Options include, but are not limited to Thematic Reviews, Rapid Reviews, Systems Analysis, Significant Event Analysis, and Tabletop Exercises.

The information in sections 7.4 and 7.5 provides an overview of the methodology traditionally utilised by OSAB however alternative methodologies may be followed.

### 7.4 Traditional Methodology Procedure

The Business Manager, in conjunction with the Chair of the Screening Panel, and the Business Coordinator will commission an Independent Author for the SAR (see section 9: Appointment and Role of the Independent Author). The Referral, Screening Reports and Screening Panel Meeting Minutes will be shared with the Independent Author. An initial Panel Meeting will be held to finalise the Terms of Reference, the methodology to be used and the scoping period. The type of Individual Management Report (IMR)/Agency Report partner agencies will provide will also be determined. The IMR/Agency Report template will be approved by the Independent Author before being distributed.

IMRs/Agency Reports should be completed by managers who have not had operational responsibility for the case but understand the service. Agency representatives will inform the Business Coordinator if a briefing session, offering guidance to complete the IMR/Agency Report, is required. Once received, the Business Coordinator will share all IMRs/Agency Reports with the Independent Author and the Review Panel.

The Independent Author will progress work to extract the learning. This part of the process will be facilitated by the Business Coordinator and will be dependent on the methodology chosen. For instance, this may involve a one-day learning event, a series of Panel meetings, a desktop review or a multi-agency audit. This period will include the opportunity for the individual or their families to meet with the Independent Author.



A first draft of the Overview Report will be written by the Independent Author and shared with the Review Panel members for their feedback.

Review Panel members will discuss the issue of using the real name of the individual or a pseudonym in the Overview Report. Whilst the views of the individual and/or their family members will be taken into account, ultimately this is for OSAB Board to decide based on the recommendation of the Review Panel.

A final Review Panel meeting will include discussion about any communication issues and decisions made about what information needs to be communicated and to who (see section 18).

Amendments and subsequent drafts of the Overview Report will be shared with the Review Panel before the final version is presented to OSAB Board for reflection on the review process, quality assurance and sign off as well as discussion concerning publication.

## 7.5 Approximate Traditional Methodology Procedure Timeframes

Please note, the timeframes below are approximate, and timeframes and deadlines set will be determined taking account of current OSAB SAR activity and other OSAB work agency representatives are committed to undertake at any one time.

Action	Timeframe	Approximate Working Day	Month
Independent Chair decision received.	Within 5 working days of receiving the recommendation from the Screening Panel.	0	1
Decision shared with Screening Panel, lead member, and the statutory OSAB members.	Within 1 working day of the decision being received.	1	1
Independent Author commissioned and sent relevant documentation.	Usually within 20 working days of the decision being received.	20	2
Initial Panel Meeting held.	Allowing sufficient notice for Panel Members and Independent Author.	45	2
Request for IMRs/Agency Reports completion sent (including a deadline for Report/Summary submission).	Once template approved by Independent Author.	50	2
IMRs/Agency Reports returned and shared with Independent Author and Review Panel members.	Usually within 20 working days of the Request for IMRs/Agency Reports being sent.	70-75	3
Learning extracted and first draft of the Overview Report shared with Review Panel members.	Following sharing of the IMRs/Agency Reports.	80-85	4
Amendments and subsequent drafts of the Overview Report shared with Panel members.		85-115	3-5
Final Overview Report presented to the SAB for sign off.		120	6

## 8. Information Sharing and Retention

### 8.1 Sharing of Relevant Information and Retention

Section 44 of the Care Act 2014 states that *‘each member of the SAB must co-operate in and contribute to the carrying out of a review with a view to identifying the lessons to be learnt from the case and applying*



*those lessons to future cases'*. Section 45 of the Care Act 2014 outlines compliance in relation to supply of information.

Information received for the purpose of SARs must not be stored for longer than necessary and must not be used or shared in any way without the prior consent of OSAB members.

## 8.2 Disclosure during Criminal and/or Inquest Proceedings

It is important to note that any records or information provided for a SAR process which are deemed to be of relevance to any criminal proceedings may be subject to disclosure in accordance with the provisions of the Criminal Procedure Rules (2010). HM Coroner is also entitled to request, and must be provided with upon such request, any information considered through the SAR process. Therefore, senior management oversight should be sought prior to records or information being submitted. Should records or information be deemed relevant to any criminal and/or Inquest proceedings, the agency who supplied the information in the first instance would be approached by the OSAB Business Unit.

# 9. Appointment and Role of An Independent Author

## 9.1 Required Skills and Expertise

Should an Independent Author be commissioned, they should be an experienced individual who is not directly associated with any of the agencies involved in the SAR. Consideration should be given to the skills and expertise required to effectively lead a SAR including:

- Strong leadership and ability to motivate others
- Expert facilitation skills and ability to handle multiple perspectives and potentially sensitive and complex group dynamics
- Collaborative problem-solving experience and knowledge of participative approaches
- Ability to find and evaluate best practice
- Good analytic skills and ability to manage quantitative and qualitative data
- Knowledge of safeguarding adults and an understanding of the complexity of the health and social care system
- Ability to write for a wide audience.

## 9.2 Responsibilities

An Independent Author will be responsible for chairing Review Panel meetings, effectively leading and coordinating the Review Panel and for quality assurance of the final Overview Report based on the IMRs/Agency Reports and any further evidence deemed relevant.

An Independent Author will be responsible for the final decision on the suitability of the Terms of Reference, agreed with the Review Panel at the initial Review Panel meeting. The Terms of Reference may, however, need to be revisited as the review progresses and as new information is identified; an Independent Author will agree any amendments with the Review Panel.

An Independent Author will establish an agreed timetable of key dates in accordance with the required timescales of the review to include, for example, Review Panel meetings and Learning Events.

An Independent Author will be responsible for engagement with the individual and/or their family. This will be facilitated by the OSAB Business Unit. An Independent Author will direct any media interest about the SAR to the OSAB Business Unit who will respond following consultation with the Council Communications team/Public Relations and Communications Subgroup, as appropriate. An Independent Author will ensure that regular updates are obtained regarding agencies providing services to meet the safeguarding or other needs of individuals who are subject of the SAR. An Independent Author will maintain contact with the lead

personnel of all parallel reviews or investigation processes, to ensure that any coordination and joint commissioning arrangements are effective (see Section 13).

An Independent Author will produce a final Overview Report ensuring that the review is of a sufficiently high standard and that wherever possible, multi-agency recommendations are succinct. An Independent Author will, as far as possible, ensure that the review process is a learning exercise in itself for all those involved in the case.

## 10. Involvement of Individuals, Family Members, Friends and other Support Networks

- 10.1 Individuals who are the subject of a SAR and/or their family members, friends or carers can offer a unique perspective into how the delivery of services and involvement of agencies were viewed. It is essential that an Independent Author and/or the Review Panel have opportunities to hear these experiences and perspectives and that these contribute meaningfully to the final Overview Report.
- 10.2 Engagement of the individual who is subject of a SAR and/or their family members will be discussed initially by the Review Panel and facilitated by the Business Coordinator. The individual and/or their family members will be notified of the intention to complete a SAR. Information will be provided outlining what a SAR is (See Appendix 4: Guidance Leaflet for Family Members, Friends and Carers), and an opportunity will be offered to give the individual and/or family members time to discuss the process in more detail with an Independent Author and/or Review Panel member. The individual and/or their family members will also have the opportunity to contribute to the Terms of Reference should they choose to.
- 10.3 An Independent Author or Review Panel member, via the OSAB Business Unit, will be the main point of contact for the individual and/or their family throughout the review. The Business Manager will arrange an independent advocate should this be required. Where such services exist, consideration should be given to signposting the individual and/or their family members to support services independent of the review. For example, [AAFDA](#), in certain circumstances would be able to offer independent guidance and support throughout the review.
- 10.4 As a minimum, individuals and/or their family members will:
  - be notified of the review process, what that means for them and how they can access support, including impact of media coverage.
  - agree the level and frequency of contact to ensure they are kept informed.
  - be supported to contribute to the review process, either in writing, by meeting with the Independent Author or Review Panel member, sharing views via a third party or by other means identified by the Review Panel.
  - be informed of the publication of the Overview Report in a timely manner, including the likelihood of media interest.
  - be provided with the final draft of the Overview Report which they can review and comment on prior to publication but not retain, where possible any relevant comments should be incorporated into the final version. A 'hard' copy of the report should not be provided until the report is in the public domain.

## 11. Agency Representatives on the Review Panel

- 11.1 The agencies that will be represented on the Review Panel will be agreed by the Screening Panel and subject to final discussion at the initial Review Panel meeting. Their agencies will have been involved in the case, but the representative themselves will not have been directly involved in the case. Representatives will have sufficient knowledge of the agency and practice within it.

Representatives will:

- attend and contribute to Review Panel meetings; deputies will be permitted only in exceptional circumstances
- nominate relevant practitioners who have been directly involved in the case to attend Practitioner Learning Events; inform the practitioners about the SAR and Practitioner Learning Event; and provide their contact details to the Business Coordinator to allow invitations to be sent
- contribute agency information and/or specialist knowledge to the review
- consistently feedback any learning within their agency, as it is determined throughout the process, particularly when reviews involve a subject that agencies are currently working with
- support the development of a positive learning environment across OSAB and support an Independent Author to extract learning from the review
- analyse information provided and support an Independent Author to develop review recommendations
- have an awareness of the legislation and statutory guidance in relation to SARs and ensure that appropriate learning is developed whilst adhering to agreed timeframes and deadlines
- quality assure drafts of the Overview Report, ensuring that the review is of a sufficiently high standard and sufficiently anonymised in preparation for publication.

## 12. Involvement of Practitioners/Frontline Staff

- 12.1 An Independent Author and/or the Review Panel will determine if a Practitioner Learning Event would support the review process and provide additional multi-agency learning. If a Practitioner Learning Event is to be held this will be organised by the Business Coordinator. It is an expectation that key practitioners involved in the case and identified by agencies will attend this event. The event will be quorate if the Chair and/or Independent Author considers there is appropriate representation to conclude adequate learning without having to duplicate a further meeting.
- 12.2 The Practitioner Learning Event will seek to:
- be trusted and safe experiences for practitioners and encourage honesty and transparency.
  - determine what agencies and individuals involved in the case might have done differently that could have prevented harm or death.
  - identify lessons learned that can be applied to practice.
  - share information between agencies to obtain maximum benefit.
  - identify recommendations for consideration by the Review Panel.
  - provide practitioners with the perspective of the individual and/or their family members.
- 12.3 More than one event or meeting may be required to ensure the contribution of key practitioners to the learning process. It may be appropriate to host separate meetings for reflection and confirmation of the learning points.

## 13. Parallel Processes

### 13.1 Principles

An Independent Author and Review Panel members will consider how the SAR process is linked with other relevant investigations, such as LCSPRs, DARDs, or Learning from Lives and Deaths – People with a learning disability and autistic people (LeDeR), how duplication can be avoided, and how these can potentially dovetail at the beginning of the process. Consideration of other relevant investigations should inform the development of the Terms of Reference.

### 13.2 Concurrent Police Investigations or Judicial Proceedings

The SAR will need to take criminal investigations and HM Coroner Inquiries into account to ensure that relevant information can be shared without significant delays to the review process.

Where a concurrent ongoing criminal investigation is identified, the Review Panel will contact the Senior Investigating Officer via the police representative on the Review Panel early in the process and then regularly, to ensure no conflict exists between the two processes. This relates particularly to any planned interviews with family members, practitioners and managers and must consider that any one of these individuals may be potential witnesses or defendants in future criminal trials.

### 13.3 HM Coroner

Coroners are independent judicial office holders who are responsible for investigating violent, unnatural deaths or deaths of unknown cause, and deaths in custody, or otherwise in state detention, which are reported to them. HM Coroner may have specific questions arising from the death of an adult at risk. These questions will usually be related to a case:

- where there is an obvious and serious failing by one or more agency
- where there are no obvious failings, but the actions taken by agencies require further exploration/explanation
- where a death has occurred and there are concerns for others in the same household or other setting (such as a care home)
- where HM Coroner identifies deaths that fall outside the requirement to hold an inquest but follow up enquiries or actions.

In the above situations, the SAB should consider instigating a SAR.

OSAB has an agreed [Information Sharing Protocol](#) in place with HM Coroner's Office for Manchester North which includes notifications when OSAB SAR referrals are received and when SARs are to be undertaken. The OSAB Business Unit will maintain communication with HM Coroner's office on behalf of OSAB.

## 14. Joint Area Safeguarding Adult Reviews

- 14.1 There will be cases where adults have moved from their 'home' area and may be placed and funded by an organisation that is not in the Oldham area. If that is the case, a SAR should be carried out by the SAB that is responsible for the location where the adults care and support needs are met and/or where the serious incident took place. SABs and agencies should cooperate across borders and requests for the provision of information should be responded to as a priority. When there is an adult who has no commissioned support in place, a sensible and proportionate approach is needed, and the lead SAB should be where the adult is best known and/or where the potential learning relates to.
- 14.2 If agreement cannot be reached on the requirement for a SAR to be undertaken, in the first instance this will be discussed by the relevant Business Managers, with the ultimate decision made by the Independent Chairs of the SABs. Independent Chairs will agree on the mechanisms for presenting SARs that have cross border learning.
- 14.3 SARs held jointly with other areas will adopt the learning and improvement framework of the area hosting the review. As with SARs hosted by OSAB, learning for OSAB from these reviews will be progressed by the OSAB Safeguarding Review, Audit and Quality Assurance Subgroup.

## 15. Resolving Disagreements

- 15.1 Where disagreements occur, they are to be resolved, wherever possible, through the chosen methodology (i.e. Practitioner Learning Event and/or Review Panel meetings). However, in order for the Independent Author to maintain independence any disagreements which cannot be resolved will be noted in the Overview Report.

## 16. The Final Overview Report

- 16.1 The Overview Report brings together the learning themes identified from the review and analyses and comments on the effectiveness of practice, and the systems used to safeguard and promote the welfare of the adult and what actions need to be taken to prevent an occurrence happening in the future. The Overview Report will also contain findings and recommendations/actions of practical value to agencies and practitioners. The Overview Report will be anonymised and written concisely, in plain English.

## 17. Presentation of Overview Report to OSAB Board

### 17.1 Presentation Procedure

An Independent Author will present the Overview Report to OSAB Board. It may be necessary to arrange an Extraordinary Meeting of the SAB for this purpose. The Overview Report will be available at least five working days prior to the OSAB Board meeting.

### 17.2 OSAB Board Responsibilities

It is the responsibility of OSAB Board to approve the Overview Report including any recommendations and actions. Through the presentation of the Overview Report, the Independent Chair and Review Panel will make their recommendation to OSAB Board concerning the use of the real name of the individual or a pseudonym. Ultimately, OSAB Board will make the final decision. Similarly, the Independent Chair and Review Panel will make recommendations to the SAB in relation to information that should be anonymised or redacted within the Overview Report, such as the name of a Care Home or GP practice. Ultimately, OSAB Board will formally agree the format of what is to be published.

Primarily, OSAB Board will be concerned with what needs to be learnt, where agencies and practice require improvement and how any programme of action will lead to sustainable improvements. OSAB Board may identify additional learning to inform strategic direction for individual agencies.

Through the presentation of the Overview Report, the Independent Chair and Review Panel will make their recommendation to OSAB Board concerning publication. It will be the responsibility of OSAB Board to determine whether the Overview Report will be published. There is no requirement for OSAB to publish a SAR that it has undertaken. However, Statutory Guidance identifies that, *'In the interest of transparency and disseminating learning the SAB should consider publishing the reports within the legal parameters about confidentiality'*. As such, whether publication is approved, will be determined following consideration will of the specific details of each SAR. OSAB Board will make a formal decision based on the following considerations:

- Is the report accurate in terms of content?
- Is the report thorough in terms of analysis?
- Should this report to be published in full or as an Executive Summary or briefing?
- Does approval for publication need to be agreed subject to further consultation with the family?

## 18. Media and Communications Strategy

### 18.1 Agency Involvement

Issues related to media and communication issues will usually be coordinated by the Council's Communications team. This will be done in collaboration with the PR and Communications Subgroup alongside the Communications teams of the other agencies involved. Where appropriate, the Independent Chair will release a statement alongside a published report, concerning how the learning will be used to inform practice.

### 18.2 Publication Procedures

If agreed by OSAB Board, SAR Overview Reports will be published on the OSAB website.

In all cases, in preparation for the publication of a SAR Overview Report the OSAB Business Unit will:

- agree a date for publication
- inform the Independent Author
- if they have chosen to be involved in the SAR process, inform the individual and/or family members by letter
- ensure the Review Panel have received the final version of the Overview Report
- liaise with the Council Communications team if there is potential for press interest.

The Independent Chair and Business Manager will consider whether the following additional steps in preparation for publication should be taken by the OSAB Business Unit:

- inform OSAB members of the intended publication date including details of the information to be provided alongside with the report, such as the SAB Independent Chair's statement, a 7-minute briefing or an explanation about delays in publication
- inform lead member and Chief Executive and consider if an elected member statement is required
- liaise with Review Panel members so that their Communications teams can be alerted (Review Panel members to provide communication lead from their respective agency)
- circulate the final version of the Overview Report to Communication leads, as required
- ask partner agencies to have their own statements ready (liaison should take place with Council Communications team about prepared statements).

If partner agencies receive media queries, they will liaise with the OSAB Business Unit and Council Communications team before responding.

### 18.3 Media and Communications Strategy in Preparation for an Inquest

The OSAB Business Unit will liaise with the Council Communications team/Public Relations and Communications Subgroup regarding whether a statement should be made by the OSAB Independent Chair on behalf of OSAB. Any statement will be prepared in advance of an Inquest. The statement will be made available to partner agencies through Review Panel members and can be used to assist agencies with responses to media enquiries where appropriate.

## 19. Action Plans

- 19.1 Following OSAB Board approval of the Overview Report, a clear Action Plan will be developed by the Safeguarding Review, Audit and Quality Assurance Subgroup with a focus on improving outcomes for adults at risk. Actions will be Specific Measurable Achievable Realistic and Time bound (SMART) and clear action owners will be assigned.

- 19.2 Single and/or multi-agency actions developed in response to Overview Report recommendations will be delegated to relevant agency representatives, OSAB subgroups and other fora for delivery where appropriate. The Safeguarding Review, Audit and Quality Assurance Subgroup will retain oversight of these actions to ensure that they are achieved.

## 20. Safeguarding Adult Reviews and the OSAB Annual Report

- 20.1 The Care Act 2014, Schedule 2, mandates that the findings from all completed and ongoing SARs will be reported in the SAB Annual Report alongside actions taken, or actions the SAB intends to take, in relation to those findings and where it decides during that year not to implement a finding of a SAR, the reasons for its decision.

## 21. Complaints and Escalation Procedure

- 21.1 When a complaint is received about a SAR, the Business Manager, following consultation with the Independent Chair, will initially respond in writing within 28 days of receipt. If the complainant is dissatisfied with the response, they should contact the Business Manager who will arrange for their complaint to be considered by the Independent Chair. The Independent Chair will provide a further written response within 28 days of the complainant contacting the Business Manager.
- 21.2 All written complaint responses will include details of how to contact the Local Government Ombudsman. The Business Manager will ensure that a record is kept of complaints received, responded to, and those referred to partner agencies. Complaints and copies of responses will be securely retained in accordance with the principles of data protection legislation.

## Appendices

Appendix 1 - OSAB Safeguarding Adult Review Referral Form	<a href="#">Available Online</a>
Appendix 2 - OSAB Safeguarding Adult Review Referral Screening Report Template	<a href="#">Available Online</a>
Appendix 3 - OSAB Decision Flowchart: Reviews Under the Care Act 2014	<a href="#">Available Online</a>
Appendix 4 - Guidance Leaflet for Family Members, Friends and Carers	<a href="#">Available Online</a>