

## Safeguarding in Supported Living - Policy

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<b>Policy Owner</b>	<b>Policy Director Lead</b>
Policy and Regulation Manager	Director of Adult Services

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Printed on: \_\_\_\_\_ (Date) By: \_\_\_\_\_ (Name)

Signature: \_\_\_\_\_

## **1 Introduction to Safeguarding Policy and Guidance**

hg Supported Living offers a person centred culture which aims to develop independence and create a safe environment to maximise individual potential. The philosophy includes warmth, security, consistency, understanding and trust. This is the purpose for the service and safeguarding arrangements sit in this context. hg Supported Living is part of Hesley Group. Hesley Group values are “person centred, outcome focused and quality driven”. We treat every person using our services as an individual, and we work hard to ensure each person receives care that is safe, effective, caring, responsive and well led.

As a provider of Supported Living to adults with learning disabilities, hg Supported Living has a key role in keeping people safe, preventing abuse and ensuring early intervention. Sound safeguarding arrangements balanced with promoting independence, good person centred care and health planning and positive behaviour support will actively ensure the support needed to keep people safe is in place.

Robust and comprehensive safeguarding and protection processes, which include listening to people supported by the hg Supported Living service and ensuring employees and others are able to speak up, and their concerns are acted upon, will demonstrate standards that are supported by law and national guidance.

Abuse is a violation of an individual’s human and civil rights by any other person or persons. Effective safeguarding systems are person centred.

This is why hg Supported Living makes safeguarding a priority and will maintain an open and transparent approach to reporting and learn from concerns and incidents in order to increase quality of practice, taking account of feedback from people who use our services on feeling safe. These procedures fit with those of the Local Safeguarding Adults Boards. They exist to demonstrate to hg Supported Living employees their responsibilities and explain the correct processes they must follow if they are concerned about a person’s safety and wellbeing.

**Chris McSharry**  
**Chief Executive Officer**



## 1.1 Scope of Policy

Please also see the procedures document situated at [P&S 2.1.2SL](#) and your Safeguarding Booklet, [ReS 2.1.1](#). This policy refers to people we support in our registered Supported Living services for adults.

This policy applies to all employees, individuals we support, visitors, volunteers and contractors, without exception.

hg Supported Living will ensure that this policy and guidance is provided to employees on commencement and that training given to them and refreshed regularly.

All employees, therefore, have responsibility for ensuring they work within the remit of this policy and in the manner in which they have been trained.

hg Supported Living employees have a duty to provide people using the service with the best possible care at all times, never to engage in any action or activity that could be construed as abusive and to report any suspicions they have that abuse is occurring.

All actions taken to support people must demonstrably be taken either with their consent or, if they are unable to consent, in their best interests and in line with all relevant aspects of the Mental Capacity Act 2005.

Failure by hg Supported Living employees to fulfil these responsibilities and undertake any of these duties may result in disciplinary proceedings and possible dismissal.

This policy links to a number of other Hesley Group policies, including the Hesley Group Code of Conduct for Employees [Per 4.9.1](#). Please see the final page of this document for references/links.

Each service must always:

- follow this hg Supported Living policy and procedures for managing alerts, and
- refer alerts to the relevant authority using the locally agreed procedures for doing so.

South Yorkshire (Barnsley and Doncaster) and North Yorkshire Safeguarding Adults Procedures are an integral part of this policy. Links to their procedures are situated in Section 2 paragraph 1 of this policy.

## 1.2 Outcome

People will receive services that are safe, effective, caring, responsive and well led. This includes protecting everyone we support from abuse and harm, or the risk of abuse and harm.

## 1.3 Why we need a Policy

Social care services providers play an important role in the protection of people from harm and are responsible for ensuring that services and support are delivered in ways that are high quality and safe.

At hg Supported Living we support people who may be at a higher risk than most in society. Many individuals have difficulty or are unable to express their concerns and fears



verbally, or report things that have had a negative impact on their lives.

This could include episodes of physical abuse (including inappropriate use of restraint, medication or restriction/deprivation of liberty), sexual or emotional abuse (including discriminatory, psychological abuse) by individuals. But it could also include neglecting to support someone in the way they should be supported, for example not giving people the right support and care with their health or personal care needs, failing to give people their medication, the right food and drink, etc., or financial and material abuse.

If hg Supported Living did not have proper procedures in place to check out new employees or have proper policies in place or did not manage the service properly and this resulted in people coming to harm, this could be considered to be organisational (previously referred to as institutional) abuse.

In addition to the moral responsibility for protecting people, we are also required by law to do our utmost to protect people from harm and abuse. This includes having a working policy and guidance for employees in relation to Safeguarding Adults in our care.

## **2 Safeguarding Adults at Risk**

### **2.1 The Care Act 2014 and Safeguarding**

Until October 2015 safeguarding adults was not set out in law. There was guidance in a document called "No Secrets" which authorities and providers of care services were expected to comply. "No Secrets" has now been withdrawn and is replaced by guidance within Chapter 14 of the Care Act 2014 (The Care Act). This is replicated within the South Yorkshire Safeguarding Adults Procedures, which should be considered an integral part of this policy: <https://www.doncaster.gov.uk/services/adult-social-care/safeguarding-adults-policy-and-procedures>

The Care Act places responsibility for the management of safeguarding adults with the local authority (Sections 42-47). It also places a duty on other agencies to participate and cooperate with enquiries.

The Act sets out clear criteria for what would constitute the need for a safeguarding enquiry. These are:

- The person has needs for care and support (whether or not the local authority is meeting any of those needs); and
- The person is experiencing, or at risk of, abuse or neglect; and
- As a result of those care and support needs the person is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

Safeguarding in this context means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent or unconcerned about their personal circumstances.



## 2.2 Key Principles

The six key principles that underpin all adult safeguarding work as set out in Section 42-46 of the Care Act 2014 are:

- *Empowerment*  
Personalisation and the presumption of person-led decisions and informed consent.
- *Prevention*  
It is better to take action before harm occurs.
- *Proportionality*  
Proportionate and least intrusive response appropriate to the risk presented.
- *Protection*  
Support and representation for those in greatest need.
- *Partnership*  
Providing local solutions through services working with their communities.  
Communities have a part to play in preventing, detecting and reporting neglect and abuse.
- *Accountability*  
Accountability and transparency in delivering safeguarding.

The voice of the person must guide our actions and the person's wishes and feelings remain at the centre of what we do. Please also see our policy and guidance on Communication ReS 5.5, Capacity and Consent ReS 6.4A, and People's Rights and Having a Say P&S 5.8.

## 2.3 Categories of Adult Abuse

The Main Categories of Adult Abuse are as follows:

- Physical
- Psychological
- Neglect and Acts of Omission
- Sexual
- Financial
- Organisational (previously Institutional)

Discriminatory abuse is motivated by discriminatory and oppressive attitudes towards people on the grounds of disability, gender and gender identity and reassignment, age, race, religion or belief, sexual orientation, and political beliefs. It includes verbal abuse and racist, sexist, homophobic or ageist comments, or jokes or any other form of harassment. It also includes not responding to dietary needs and not providing appropriate spiritual support. Discriminatory abuse can manifest itself in any or all of the above.

Other areas of concern may include any or all of the above and include Domestic Violence, Female Genital Mutilation, Self-Neglect, Sexual Exploitation and Modern Slavery. Please see South Yorkshire Procedures at:

<https://www.doncaster.gov.uk/services/adult-social-care/safeguarding-adults>

## 2.4 PREVENT

The PREVENT strategy was set up by the Government to try and identify children and young people at risk from extremism and radicalisation. It may be that we identify such risks in adult services because of the vulnerability of people we support. Please see the



additional guidance - Hesley Group Guidance on Extremism and Radicalisation – PREVENT, ReS 2.1.12.

## 2.5 County Lines

County Lines is the criminal exploitation of children, young people and potentially vulnerable Adults. Like other forms of abuse and exploitation, county lines exploitation:

- can affect any child or young person (male or female) under the age of 18 years;
- can affect any vulnerable adult over the age of 18 years;
- can still be exploitation even if the activity appears consensual;
- can involve force and/or enticement-based methods of compliance and is often accompanied by violence or threats of violence;
- can be perpetrated by individuals or groups, males or females, and young people or adults; and
- is typified by some form of power imbalance in favour of those perpetrating the exploitation.

Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, cognitive ability, physical strength, status, and access to economic or other resources.

One of the key factors found in most cases of county lines exploitation is the presence of some form of exchange (e.g. carrying drugs in return for something). Where it is the victim who is offered, promised or given something they need or want, the exchange can include both tangible (such as money, drugs or clothes) and intangible rewards (such as status, protection or perceived friendship or affection). It is important to remember the unequal power dynamic within which this exchange occurs and to remember that the receipt of something by a young person or vulnerable adult does not make them any less of a victim. It is also important to note that the prevention of something negative can also fulfil the requirement for exchange, for example a young person who engages in county lines activity to stop someone carrying out a threat to harm his/her family. Please see Criminal Exploitation of children and vulnerable adults: County Lines guidance, Home Office, September 2018: <https://assets.publishing.service.gov.uk/government/uploads>

## 2.6 Responsibilities

Everyone has a responsibility to ensure that a concern about the alleged abuse of an Adult at Risk is addressed. The Care Act 2014 placed the lead responsibility for *managing* adult safeguarding within the 'Local Authority' working with the police who will lead on any criminal concerns relating to an Adult at Risk.

## 2.7 Safeguarding Enquiries

A Safeguarding Adults Enquiry is known as a Section 42 enquiry. In order to protect people, prevent abuse and harm and empower the people using our services we must provide safe and effective services that meet a whole range of needs for individuals. People need to be supported appropriately to take positive risks. We also must make sure our employees are safely recruited and properly trained, supervised and managed. Enquiries may be carried out by a representative of the local authority or CCG; alternatively the enquiry may be passed back to managers in hg Supported Living to investigate and report back.



## 2.8 Information Sharing

Information will only be shared on a 'need to know' basis when it is in the interests of the adult. Confidentiality must not be confused with secrecy. Informed consent should be obtained but, if this is not possible and other adults are at risk of Abuse or Neglect, it may be necessary to override the requirement; and it is inappropriate for Hesley Group employees to give assurances of absolute confidentiality in cases where there are concerns about abuse, particularly in those situations when other adults may be at risk. See also Information Sharing and Confidentiality Policy [ReS 2.4](#), Information Governance Policy [Corp 2.1](#); Being Open – Duty of Candour [Corp 8.1](#); and Speaking Up Policy and Guidance [Corp 5.1](#).

## 2.9 Mental Capacity

*Mental Capacity and Safeguarding* - Does the Adult at Risk lack specific capacity to make a decision – is there a Best Interest Decision required? The Mental Capacity Act 2005 (MCA 2005) is designed to protect and restore power to adults who may lack or have reduced Capacity to make certain decisions at certain times. One of the ways it does this is by putting adults at the heart of the decision-making process.

Capacity describes a person's ability to make a specific decision at a specific time. An individual is deemed to lack Capacity if at the time, a decision is required, and he/she is unable to make that decision because of an impairment or disturbance in the functioning of the mind or brain. This may be temporary or permanent.

Mental capacity is frequently raised in relation to adult safeguarding. The requirement to apply the MCA in adult safeguarding enquiries challenges many professionals and requires utmost care, particularly where it appears an adult has capacity for making specific decisions that nevertheless places them at risk of being abused or neglected.

For people living within Supported Living services, DoLS do not apply. Contact, therefore, will need to be made with the person's funding authority with a view to seeking authorisation from the Court of Protection where required.

## 2.10 Offences of Treatment and Willful Neglect

Offences of Treatment and Willful Neglect – Section 44 of the MCA created the criminal offences of ill treatment and willful neglect in respect of people who lack the ability to make decisions, however this legislation was amended to include people who have capacity to make decisions. The offences can be committed by anyone responsible for that adult's care and support - paid employees but also family carers as well as people who have the legal authority to act on that adult's behalf (i.e. persons with power of attorney or Court-appointed deputies). These offences are punishable by fines or imprisonment. Ill treatment covers both deliberate acts of ill treatment and also those acts that are reckless which results in ill treatment. Willful neglect requires a serious departure from the required standards of treatment and usually means that a person has deliberately failed to carry out an act that they knew they were under a duty to perform.

## 2.11 Responsibilities for all Employees

Everyone working for Hesley Group and hg Supported Living has a responsibility to safeguard the adults who use our services. hg Supported Living will be fully compliant with



the law and guidance in relation to safeguarding people using our services. This includes the CQC Fundamental Standards and the Health and Social Care Act (HSCA) 2008 (Regulated Activities) Regulations 2014 and HSCA Registration Regulations 2009 and all other relevant legislative requirements such as the Health and Safety at Work Act.

hg Supported Living will operate sound recruitment procedures that are designed to exclude people who are not fit to be placed in a position of trust and responsibility in relation to people who use our services. We expect as part of this process potential employees will disclose information as requested and undertake a DBS criminal records and Vetting and Barring check as required for their post. These will be renewed three-yearly.

We should always aim for a culture of openness, honesty and awareness among employees, people we support, their relatives and other stakeholders. This should enable people supported, our staff and others to raise concerns about behaviour that they suspect is abusive. People raising concerns will be reassured they will not be victimised for speaking out. Please see Speaking Up Policy [Corp 5.1](#), and Being Open – Duty of Candour Policy [Corp 8.1](#). Managers will maintain an open and transparent approach when reporting and sharing appropriate information with others.

hg Supported Living will work to ensure everyone using our services will be supported to express concerns and will have access to an advocate or other skilled professional, appropriate communication tools and support with these, in order to assist them in alerting people to distress, or describing what happened in a safe and supportive environment.

All hg Supported Living employees are expected to follow the local Safeguarding Adults procedures.

All hg Supported Living employees will be made aware that the Guidance in 'Safeguarding Adults – South Yorkshire Adult Protection Procedures' and Guidance are regarded as integral parts of this policy. Please see Flowchart [P&S 2.1.2aSL](#), for incidents that occur in our Supported Living services.

All hg Supported Living employees will have and keep safe a personal copy of the latest edition of the Safeguarding Booklet [ReS 2.1.1](#), and should understand that failure to follow the correct procedures on protection, prevention and safeguarding matters may lead to disciplinary action and possible dismissal. Any revised versions will be distributed individually to all staff and must be signed for. New employees will receive a copy as part of their Induction.

All hg Supported Living employees will receive and keep safe a copy of the latest edition of the Hesley Group Code of Conduct for Employees [Per 4.9.1](#), which sets out clearly the standards of practice we expect. Any revised versions will be distributed to all staff and be signed for. New employees will receive a copy as part of their Induction.

All hg Supported Living employees will receive training, instructions and guidance in this Safeguarding policy, procedures and guidance and, where relevant to their role, such training and knowledge required to achieve the Care Certificate and Level 2 or Level 3 Diploma in Social Care

All hg Supported Living employees will understand the procedures for reporting suspicions or allegations to management and if necessary to external bodies.



hg Supported Living expects our employees and managers will work closely with other agencies as required.

## 2.12 Responsibilities of Registered Managers

Registered Managers will ensure there is a Designated Person available on duty or on call for their service at all times. A Designated Person in respect of adult safeguarding should be an appropriate manager with the right skills and training to receive and deal with a concern about someone's safety and wellbeing. This will be someone with responsibility for the deployment and supervision of the staff team and the running of the service. The Assistant Director for Supported Living (Nominated Individual) should agree with the Director of Adult services the local arrangements for Designated Persons.

Registered Managers will ensure that any member of their staff who raises concerns will be supported to discuss these by a designated person in line with our Speaking Up Charter [Corp 5.1.1](#), and Speaking up Debrief [Corp 5.1.2](#).

## 2.13 Responsibilities of the Nominated Individual (NI) for Supported Living

The NI will line manage the Registered Manager and have oversight of the Supported Living service including monitoring the progress and actions in relation to any concerns that are raised.

The NI will ensure that the Registered Manager has the appropriate skills, knowledge and experience for the role and is appropriately trained in relation to safeguarding.

The NI must work with the Registered Manager to ensure that the service appropriately deploys its resources to ensure that this policy is implemented.

The NI must ensure that the Registered Manager has put appropriate safeguarding

## 2.14 Responsibilities for the Hesley Group Board

The Hesley Group Board must ensure that adequate and appropriate resources are made available for the implementation of this policy. This includes the costs of training and materials. The Chief Executive or Director of Adult Services will act on behalf of the Board to ensure that sufficient qualified and experienced managers are appointed and rostered as designated persons in each service.

## 2.15 Responsibilities for Employee Training & Development

The Hesley Group Workforce Development Team will ensure all hg Supported Living employees receive training in safeguarding children and adults during their induction and receive their personal copy of the safeguarding booklet ([ReS 2.1.1](#)).

Safeguarding Adults is covered as a part of the Care Certificate and Level 2 Diploma in Social Care. Refreshers are also provided as a part of individual mandatory CPD.

The training covers identifying abuse and types of abuse, people at risk, signs and symptoms, Speaking Up, Mental Capacity and hg Supported Living procedures.

Safeguarding booklets and Code of Conduct Booklets are issued at the induction and are



updated and redistributed where there are major changes.

hg Supported Living employees will receive training/undertake learning as appropriate in the delivery of safe care and support (please see Staff Learning and Development Policy, Per 3.1).

Designated persons will receive training appropriate to their role, which will be refreshed every two years. This training will ideally be undertaken face to face alongside practitioners of a similar level of responsibility.

## 2.15 Safe and Effective Care and Support

Delivering safe and effective care and support is fundamental to this policy. This includes:

- Consultation involvement and consideration of the wishes of people we support.
- Respecting people's dignity and privacy.
- Involvement of parents, family carers and legal representatives where appropriate.
- Each person's Support Plans must be followed and regularly reviewed. This includes the person's individual risk assessment and their behaviour support plans.
- People must live in an environment that reflects their personal style and preferences that is safe and meets their needs.

All managers and their employees must follow Hesley Group and relevant hg Supported Living policies, procedures and guidance that enable them to give safe and appropriate support. Our policies are there to help. (See policy and guidance section at the end of this document.)

Application of the HELP programme and the principles of Positive Behaviour Support outlined in Positive and Proactive Care.

## 2.17 Sign off and Completion and Notification of Alerts

All reports of concern including safeguarding concerns are recorded using the Ulysses system. Once made reports are seen and can be monitored by senior managers and members of the Hesley Group Executive.

Please see also the Statutory Notifications in Adult Services Policy & Procedures [P&S 2.6](#).

The Ulysses system captures all stages of a safeguarding report and must fully describe the rationale and the decision making process as well as stating any lessons learned and changes or actions required within the service or centrally. This is our evidence that we have carefully considered the matters and taken or agreed appropriate action to put things right and avoid recurrence wherever we can. Alerts and their outcomes are required by law to be notified to CQC.

## 2.18 DBS Referral

Referral to the DBS Barring List must be undertaken by the Registered Manager or their Deputy (or an appropriate member of the Executive Team or HR department if necessary) when someone is dismissed or leaves before they could be dismissed when an allegation of abuse is considered to be upheld.

Please note that a Flowchart has been appended to the Safeguarding Adults policy at [P&S 2.1.8SL](#), in order to provide easier access than having to navigate the DBS website.



This makes clear the DBS process and our responsibilities as an employer and referrer to undertake investigations and as much of a disciplinary process as is feasible when someone resigns before due process is complete. The DBS do not conduct investigations, they base their decisions on evidence that is provided by us as a referrer.

A senior member of the Quality Team will counter-check each referral before it is sent to the DBS. A central record is kept by the Administrator, HR of all DBS referral documentation and stored securely on the server. Should mail come direct to the referrer as a result of making a referral they should scan and send a copy to the Administrator, for the central record. People who are being referred must be informed by Hesley Group of the intention to refer at the time of their dismissal or resignation, either by letter or in person and followed up in writing. For further information please see the link to the DBS Guidance at <https://www.gov.uk/government/publications/dbs-referrals-form-and-guidance>.

### **3 Associated Documents**

- 3.1 Safeguarding Booklet – Summary for Employees, ReS 2.1.1
- 3.2 Procedures for Managing Allegations of Abuse, P&S 2.1SL.2
- 3.3 Flow Chart for Reporting and Managing Adults’ Safeguarding Alerts and Referrals, P&S 2.1SL.2a
- 3.4 Body Map for Recording Injuries, H&S 1.2.4 (in Accidents Policy)
- 3.5 DBS Referrals: Form and Guidance, ReS 2.1.7  
<https://www.gov.uk/government/publications/dbs-referrals-form-and-guidance>
- 3.6 DBS Referrals Flowchart, ReS 2.1.8
- 3.7 Easy Read Summary of Policy, ReS 2.1SL.11
- 3.8 Hesley Group Guidance on Extremism and Radicalisation – PREVENT, ReS 2.1.12
- 3.9 Doncaster Safeguarding Adults Board – Safeguarding Adults Decision Support Guidance, ReS 2.1.13

### **4 Appendices**

- 4.1 Speaking Up - Policy, Corp 5.1
- 4.2 Being Open – Hesley Group Duty of Candour Policy, Corp 8.1
- 4.3 Compliments, Concerns and Complaints – Policy, Corp 10.1
- 4.4 Health and Safety – Policy, H&S 1.1
- 4.5 Accidents – Policy, H&S 1.2
- 4.5 Near Miss Reporting – Policy, H&S 1.3
- 4.6 Appointment and Management of Contractors – Policy, H&S 1.5
- 4.7 Fire Safety – Policy, H&S 1.14



- 4.8 First Aid – Policy, H&S 1.15
- 4.9 Infection Control – Policy, H&S 1.17
- 4.10 Moving and Handling of People – Policy, H&S 1.22B
- 4.11 Working Practice for Health & Safety Checks – Policy, H&S 1.23
- 4.12 Personal Protective Equipment (PPE) – Policy, H&S 1.24
- 4.13 Risk Assessment – Policy, H&S 1.27
- 4.14 Emergency and Service Continuity Planning – Policy, H&S 1.37
- 4.15 Recruitment, Selection and Appointment of Support Workers and APS Workers using CARES Values Based Recruitment - Policy, Per 2.1SL
- 4.16 All other Employees – Recruitment, Selection and Appointment - Policy, Per 2.1A
- 4.17 Disclosure and Barring Service (DBS) Checks on Potential and Current Employees - Policy, Per 2.5
- 4.18 Statutory Notifications in Adult Services - Policy, P&S 2.6
- 4.19 People’s Rights and Having a Say – Policy, P&S 5.8
- 4.20 Positive Behaviour Support – Adult Services - Policy, ReS 5.1A
- 4.21 Hesley Group Restrictive Intervention Reduction - Policy, ReS 5.2
- 4.22 Planning and delivery of Health and Care Support - Policy ReS 5.3
- 4.23 Individual Risk Assessment and Management, Policy ReS 6.11
- 4.24 E-Safety and Media Policy and Guidance, Policy ReS 6.17
- 4.25 Doncaster Safeguarding Adults procedures:  
<https://www.doncaster.gov.uk/services/adult-social-care/safeguarding-adults>
- 4.26 County Lines Guidance, Home Office, September 2018:  
<https://assets.publishing.service.gov.uk/government/uploads>
- 4.27 CQC Notification Guidance and Form, (Allegations of Abuse):  
<https://www.cqc.org.uk/guidance-providers/notifications>
- 4.28 Positive and Proactive Care; reducing the need for restrictive interventions (DH 2014)  
<https://www.gov.uk/government/uploads/system/uploads/attachment>
- 4.29 Fundamental Standards and HSCA Regulated Activities Regulations 2015  
<https://www.cqc.org.uk/sites>

