

# **Interim FWI Safeguarding Guidance for Care Act Compliance April 2015**

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## The Care Act: S42 Responsibilities - WORK FLOW

**NB: Timeframes for response to safeguarding concerns are: 24 hrs where significant risk, in all other cases within 3 working days**

### INFORMATION GATHERING

Complete basic checks of existing information, clarify the concerns. Assess Risk, History checks. Consider whether concerns relate to named person and/or service.

Are others at risk? Consider need for immediate Safeguarding Plan.

Duty Manager decides whether meets criteria for S.42 Enquiry.

3 Criteria for S.42:

Where a Local Authority has 'reasonable cause' to suspect that an adult in its area (whether or not ordinarily resident) has:

- a. care & support needs, (whether or not the LA is meeting those needs)
- b. is experiencing or at risk of abuse or neglect AND
- c. as a result of those needs is unable to protect him/herself against the abuse/neglect/risk of it.).

#### NAMED PERSON No Enquiry Needed

Does not meet criteria for S.42. Issues resolved or redirected to other support. Advice and Information.

#### NAMED PERSON – S.42 Enquiry Enquiry Manager (EM) identified;

**EM decides what is the most appropriate process to make enquiries, or cause enquiries to be made, to achieve MSP outcomes, and who is the most appropriate professional/s.**

Appropriate & Proportionate response varies from informal conversation to multi-agency meeting. (Consider: seriousness, impact on well-being, frequency, harm/serious injury, intent).

Enquiry Officer (LA)/Appropriate professional identified if necessary (SW, OT, Health, GP, APT, Housing). Where quality concerns identified liaise with appropriate Contracts/Commissioning Dept.

**NB: Capacity/Consent, Advocacy, desired outcomes adult/rep/advocate wants to achieve (MSP), immediate safeguarding plan: what has been considered and rationale.**

#### CONCERNS RELATE TO QUALITY OF PROVIDER/SERVICE Quality issues but S42 criteria not met:

Pass information to Contract or Commissioning team. During Quality Assurance process, if concerns of abuse/neglect raised for individual/s: complete concern form and forward to Adult Care Point (ACP).

**S.42 Enquiry (MSP) completed. Have person-centre outcomes been achieved?**

Yes

Agree safeguarding plan with person, process for review.

**Duties met under S.42**

No

#### Enquiries continue under S.42:

Who needs to be involved?

Which professional/s or process most appropriate?

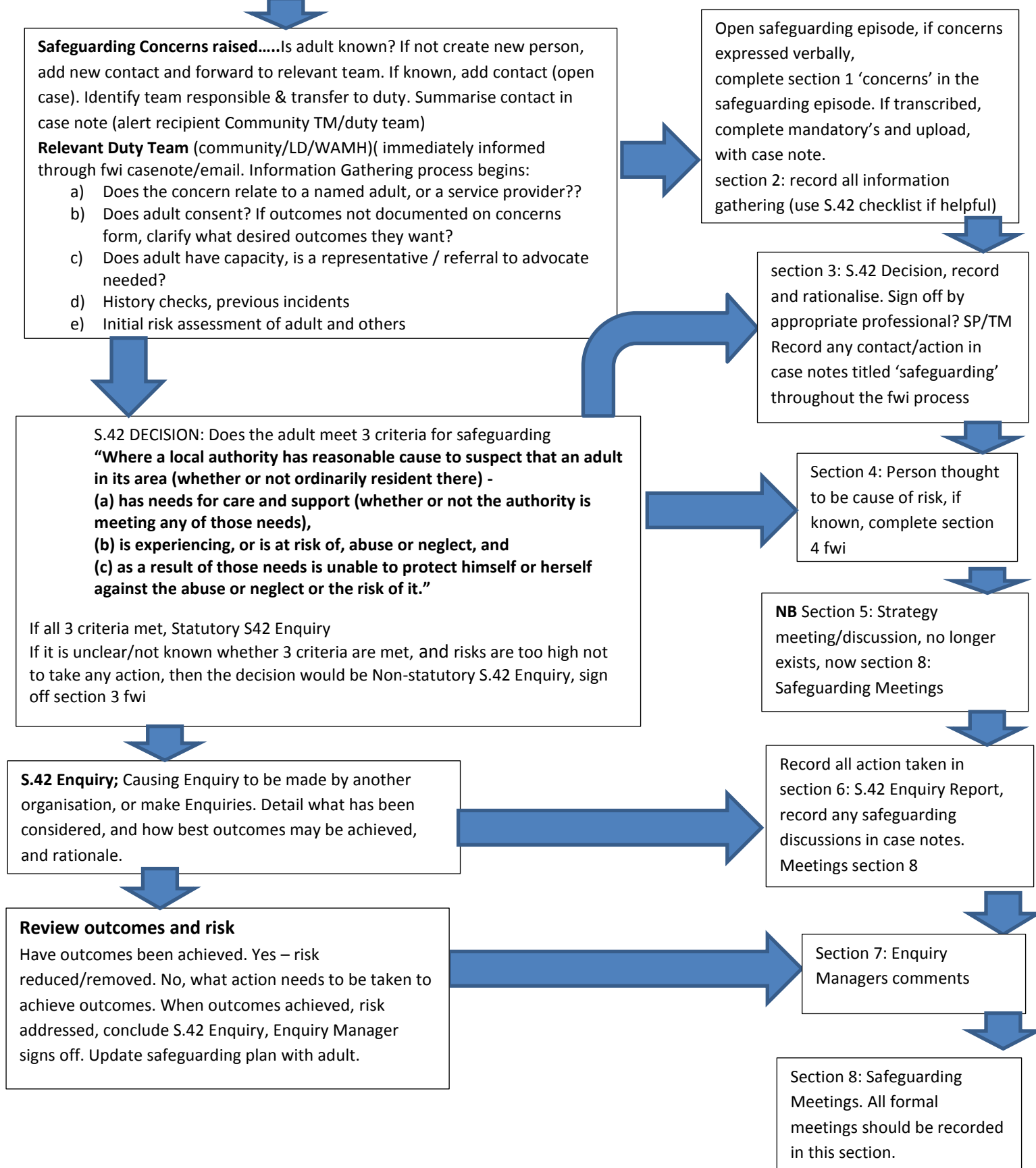
How will on-going risks be managed/monitored?

What further action is necessary to achieve person centred outcomes?

Others at risk abuse/neglect,

## FWI : SAFEGUARDING WORKFLOW

### SAFEGUARDING CONCERNS RAISED



## **FWI Section 1: Safeguarding Concerns**

### **Completing the safeguarding concerns document**

The first box requires the date when concerns were raised. One form is required per named adult. If the concerns are general and relate to a service, record the name of the service.

**Adult's Details:** If the concern relates to a named adult, complete this section providing as much detailed information as possible.

**Communication Needs:** Consider if an interpreter is needed to communicate or if there are specific communication issues eg: if the adult has a hearing loss do they understand British Sign Language or is there a family member that is able to communicate through BSL? Does the adult have cognitive impairment, or a learning disability? do they understand MAKATON/Flash-Cards?

**Next of Kin:** NOK details if there is no next of kin, record details of their representative/person supporting them. If their next of Kin is also their informal carer, please give details. Where possible provide details of the GP.

**Does the adult live alone:** If other people live with the adult, give details of their names and relationship to the adult, so their family network can be understood.

**Consent:** Whenever possible seek consent from the adult to share information and raise the concerns. If the adult declines, and you represent care and support services, you should inform them that you have a duty of care, and are bound by the codes of practice within your organisation (this does not apply if you are a member of the public), and you must inform the local authority, and where a crime is suspected, the Police/Adult Protection Team. Where there is a current Mental Capacity Assessment in relation to sharing information, discuss this with their representative. If it has been difficult to seek the adult's consent, give a brief explanation why.

**Capacity:** Does the adult have a diagnosis, such as Dementia, or significant mental health issues, are they able to have a conversation with you, and recall what you had discussed at a later point, if not, there may be issues around their capacity.

**Person/Service thought to be the cause of risks:** There are times when the person/service thought to be the cause of risk, should be informed, and other times they should not.

**Person should be informed,** if you are an employer/home manager, and the person is your employee, you should inform the person or service that you are

raising the concerns with adult services if you know who they are. This gives the opportunity for them to provide an initial response (initial statement they could write down independently with their version of events, do not interview them at this point). Community Services visiting a home, or CQC/Contracts should inform the manager of the service that they intend to raise concerns, advising what immediate action needs to be taken in the interim, in order to ensure people are safe, and not continuing to be at risk. If you are raising concerns as the employer, give details of the employee, name, job title, responsibilities, and historical concerns. If they are a registered professional, ie: Nurse – record Pin Number, social worker – HCPC Number.

**Person should not be informed/approached**, if they are not an employee that you directly manage, or if they live with the adult whom you suspect is being abused/neglected, as this could increase risk as soon as you leave, or place you at risk.

**Details of concern:** Record the date and time of the incident to which the concerns relate and where it happened. If the situation is on-going please state this to be the case. Record in as much detail as possible what happened, whether the incident was witnessed or not, who was present/involved, seriousness/injuries sustained, immediate action taken and any measures in place to reduce risks, or prevent it happening again.

**If Police/Adult Protection Team** have been informed, please record the Crime Reference Number given when reported, or if you have a Police contact name, please provide this information.

**Relevant Person/professionals involved:** Please record whether any other professionals/teams/services are involved with the adult or service. Provide name and contact details if you know them, and the organisation they work for, this is to enable us to immediately make contact as part of our information gathering. Names recorded here could be, community nurse, occupational therapist, speech and language.

**Risks:** Please advise if you know there are risks and give brief details for:

**The Adult**

Record what the risks are, and how these may impact on the adults  
Well-being and quality of life

**Others**

This refers to other adults who have care and support needs and may be at risk of suffering abuse/neglect, e.g.: if the adult lives in a care home with other people, and the abuse could impact on everyone living there, please detail risks to everyone.

**Children**

Do any children live with the adult, or visit them, and may experience or witness abuse/neglect, provide brief details. Contact Children's services if a child may be affected.

**Professionals**

Will risks be evident for professionals visiting the adult? eg; an adult living in their own home, with a person who is known to be aggressive- by informing us of this, plans can be made to speak to the adult in a safe way.

**Environment or Organisation** -Fire risks/lack of hot water/trip hazards/lack of heating/infection control issues /staffing

**Person/Professional raising concerns:** Record your own details, or if you are completing the form on someone else's behalf, record their details, including job role. Record your employer's details, if you are an employee that remains working in the location of abuse, or has recently resigned, state whether you want to remain anonymous, or that you are a whistle-blower, and provide contact details, either phone or email, so adult services can confidentially contact you should they require clarification or further information. If you are raising concerns and are a family member, please state your relationship to the adult, and provide contact details to enable us to acknowledge receipt of your concerns, and discuss possible further action. Always keep an accurate record of your conversations and actions

**Person-centred outcomes:** When you seek consent from the adult or their representative, where possible ask them what they want to happen, establish whether they feel safe, and whether they know how to keep themselves safe. Outcomes identified must be realistic and achievable. Things to think about when discussing the adult's desired outcomes;

- I want the abuse to stop and to feel safe
- I want to be involved in what happens next
- I want the Police to take further action
- I don't want that carer to support me anymore
- I want to prevent this from happening to anyone else
- I don't want any action taken
- I love my husband I just want him to stop hitting me

As a general question, ask the adult what the most important thing in their life is. If you are able to discuss outcomes with the adult, discuss ways they think their outcomes can be achieved, eg: an adult punched by another resident may think that moving to an alternative room, and put distance between the two residents, may achieve their desired outcome.

## **FWI-Section 2: Information Gathering**

(A useful tool to support information gathering and initial risk assessment is 'checklist for responding to concerns and S.42 Decisions')

**Location of incident:** select outcome/s relevant to adult's situation

**Mental Capacity:** this section asks whether the adult has an impairment of the brain, and whether a Mental Capacity Act (MCA) assessment is necessary. It further asks about circumstances which may require an Independent Mental Capacity Advocate (IMCA), and requests details if an IMCA already involved.

**Supported Decision Making:** Does the adult have substantial difficulty, and is there someone they would like support from? If the adult has substantial difficulty and no-one to represent them, refer for independent advocate (Practice

Instructions regarding Advocacy is available in the 'Connect to support' professionals' zone).

**Adult views/wishes:** Does the adult agree to the concerns being taken into safeguarding. Record what is important to the adult: Document outcomes detailed on the concerns form, if you do not know at this time, you will need to find out and complete later.

**Does the adult/rep feel that they have suffered abuse/neglect:** Record the adults views about the concerns raised.

**Initial Risk Assessment:** prompts given, checklist available. Detail risks that may impact on the adults desired outcomes.

## **FWI-Section 3: S.42 Decision**

### **3 Criteria – when considering whether an Enquiry is a duty or power:**

"Where a local authority has reasonable cause to suspect that an adult in its area (whether or not ordinarily resident there) -

(a) has needs for care and support (whether or not the authority is meeting any of those needs),

(b) is experiencing, or is at risk of, abuse or neglect, and

(c) as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it."

### **S.42 Decision: (4 options)**

1. **S.42 Enquiry not needed**- choose this option if concerns are not safeguarding, the adult has not consented and other adults are not at risk, the concerns can be dealt with as an incident, or criteria for safeguarding not met, and risks are minimal. Also use this outcome when concerns regarding a service/team/organisation are received relating to Quality, and no named adults.  
**Choose outcome 'safeguarding ended'**

2. **S.42 responsibility transferred to other Local Authority**- choose this option when criteria for safeguarding met, however funding is the responsibility of another local authority, or the adult is located in another local authority.  
**Choose outcome 'safeguarding ended'**

3. **S.42 Statutory Enquiry – criteria met** –choose this option when it is clear that criteria has been met for safeguarding;

All 3 must be met to undertake a 'Statutory' Enquiry, placing a DUTY on the local authority to make enquiries.

**Choose outcome 'S.42 Enquiry'**

4. **S.42 Enquiry – criteria not met/high risk** – choose this option in two circumstances, 1) if you do not know whether criteria is met, or 2) you know criteria is not met, however risks are too high to take no action.

#### **Choose outcome 'S.42 Enquiry'**

If the safeguarding is ending as no enquiry needed, confirm that the referrer and the adult have been informed of the decision, and a rationale given.

**Rationale for S.42 Decision:** Record reasons for decision whether an Enquiry will be undertaken or not, consider information already collated, including risks, choice, benefits, and Mental Capacity. If S.42 Enquiry is to take place, record a brief plan of actions needed, and by whom. Detail if you are causing enquiries to be made, and by whom. Ensure that the response to concerns is proportionate.

**Enquiry manager's decision of abuse category:** list all relevant categories in relation to the adult's situation.

**Does the safeguarding concern/s relate to a particular service, or establishment:** Give details of service, and who has been informed of concerns, in relation to Quality issues, contact Contracts/Commissioning, CQC, and CCG, or whoever commissions the service.

**Concern Stage Decision:** record date decision was made, and Enquiry Manager sign off, providing name and details

### **FWI Section 4: person(s)/Provider(s) thought to be the cause of risk**

Only complete this section if the person/provider thought to be the cause of risk is known.

### **FWI Section 5: Guidance – s.42 enquiry summary**

#### **Adult's Details:**

Complete basic information relating to the adult to whom concerns relate.

#### **Enquiry Team's Details:**

**Enquiry Manager:** record name, team, and contact details

**Enquiry Officer/s:** record name/s, team, and contact details of all EO's involved in the Enquiry.

**Details of concern:** brief summary of concerns as detailed when raised.

#### **SUMMARY OF S.42 ENQUIRY:**

#### **Adult's/Representative's view of s.42 Enquiry:**

Detail what happened according to the adult, what outcomes the adult wanted to achieve at the beginning of the process, and risk they felt exposed to, and how the adult thinks the outcomes can be achieved. Complete the section by commenting on the adult's perspective

### **WHICH ORGANISATIONS (IF ANY) WERE CAUSED TO MAKE ENQUIRIES:**

Detail which organisation, name, designation, and date report provided (where more than one Enquiry) - each organisation/professional involved, should be listed. *If you are not aware of any other enquiries that have been undertaken, please complete you own organisation's details here only.*

### **Relevant information about the adult:**

This information should include: health conditions, level of care/support needs, lifestyle, family networks, routines, likes and dislikes. How the abuse has impacted on their well-being, whether this is enduring, and to what extent, summarise the changes resulting from the abuse.

### **Was there a need to assess the adult under the Mental Capacity Act in relation to this safeguarding S.42 Enquiry:**

Was a MCA assessment needed, does it form part of the enquiry paperwork. If yes detail who supported them, IMCA, advocate, family member, or friend. If a formal advocate was needed (other than an IMCA), please include their details and the reasons for their needing to be involved.

### **DESIRED OUTCOMES:**

Have the outcomes stated by the adult at the outset of the S.42 Enquiry been achieved? (Where these may have changed as the enquiry progressed, also include information regarding these, and whether these outcomes were met as below).

List each outcome stating whether they were 'achieved', partially achieved' or 'not achieved'. Ask their view on risk, and whether the S.42 Enquiry has 'removed', or 'reduced' risk, or risk 'remains'. Record positive risks. View should be sought and recorded regarding the Enquiry, and the impact it has had on the adult, and whether they feel safer as a result of safeguarding.

### **View of the Person/s thought to be the cause of risk:**

Include what opportunities were given to ensure right of reply to abuse/neglect. Any mitigating circumstances that affected the situation, reasons for abuse happening, and what they would do differently in the future, and what they have learnt from the S.42 Enquiry.

### **Enquiry Officer's comments:**

Summarise the actions taken through the S.42 Enquiry in response to the safeguarding concern, other processes that provided information, risks to the adult/others, and the outcome of these. Summarise action taken with regard to the cause of risk, to prevent further incidents. Cross reference any documents that inform the summary of the Enquiry, and ensure they are uploaded.

### **Safeguarding plan (and Protection Plan):**

The plan should be generated with, and agreed by the adult/relevant others responsible for taking action, or monitoring effectiveness. Include the action, who will undertake the action, and the timescale for each action. Include adult's agreement with the plan, and how the adult can safeguard themselves now and in the future.

### Protection Plan:

Where there are on-going actions for organisations / agencies not linked specifically with the individual adult (eg: wider / more general actions that might apply to adults generally / other issues that require addressing) this should be recorded as a Protection Plan. Arrangements should be in place to monitor and review the Protection Plan's effectiveness, that include which organisation and who will be responsible for this.

### Where risk remains what further action is needed:

Where the adult continues to remain at risk this should be recorded. This should include where this is the decision / choice of the adult, any other the reasons for this; and what other actions / support have been considered / offered regarding this. This should include other further action that will be taken / is included in the adult's Safeguarding Plan or a wider Protection Plan. Where the adult has chosen not to take action in relation to risks, detail what information has been provided to them, and ways of identifying if risks increase in the future, and what action has been agreed with the adult regarding this. The Enquiry officer must be satisfied that the adult is aware of the possible impact on themselves of existing risks.

### Section 42 Duties met - rationale:

Give clear rationale outlining how the enquiry has addressed the safeguarding concerns it was in response to (reference the Checklist for completing enquiries (p115) Sussex Safeguarding Adults Policy & Procedures in doing this). Always include information regarding whether the adult's outcomes have been achieved/partly/ not met, and if risk is reduced/removed/remains.

### Enquiry Officer sign off:

The Enquiry officer should sign if they are the only professional involved in generating the summary of Enquiry. Information contained in other Enquiry summaries / relevant documents should be referred to and cross referenced. If there is more than one Enquiry Officer, the lead Enquiry Officer should sign this off.

*NB: the decision regarding whether the Local Authority's S42. Duty has been discharged is that of the Enquiry Manager.*

## Fwi section 6: Enquiry manager's comments

This section captures important information that WSCC need to report on regarding performance, this should be the view of the adult, not the Enquiry Officer or Manager, which includes:

- whether each outcome have been achieved, to what degree; not achieved, achieved, partially achieved
- In the view of the adult, document whether risks have reduced, removed, or remain
- Key action taken to support adult
- Key action taken in relation to the person thought to have caused the risk

Section 7 also provides evidence that the Enquiry manager has had oversight, the Enquiry has been robust, and duties under S.42 have been discharged, and the legal duty will now conclude. Manager sign off.

**AS008 Incident/Service Quality Reporting form:** Isolated low level concerns that do not meet the threshold for S.42 Enquiry, and relate to quality assurance – are sent to contracts/commissioning when relating to a service.

**OSAR RECORD** – The interface between quality and operational safeguarding practice needs further discussion and agreement. During transition as an interim measure the OSAR Record (Example, Person Record in the name of 'OSAR Sunnyside Care Home') can be used to upload documents that relate to the service but not to a named individual.

The OSAR Safeguarding Episode will also remain available. This should only be opened when it is decided that a S.42 Enquiry is needed in relation to the provider and there are **no** named individuals. The OSAR Adult Safeguarding form within the episode will be removed (AS010) as no longer fit for purpose. The 'off system' S.42 Enquiry Form can be completed and uploaded into the episode. The chronology will also still be available within the episode.

Continue to use case notes for any discussions or decisions relating to the service.

### **DASM**

The referral process and how this will be captured on FWI needs to be developed

## **FWI Section 7– Safeguarding Meetings**

**(See Appendix 5)**

## Appendix 1 Confidential Adult Safeguarding Concerns

**The Local Authority has a duty to begin an enquiry into safeguarding concerns;** (3 criteria)

**Where the local authority has reasonable cause to suspect that an adult in its area (whether or not ordinarily resident there) –**

- 1. Is experiencing or is at risk of abuse/neglect**
- 2. Has care and support needs**
- 3. Is unable to protect themselves**

Date concerns raised:	
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### **ADULT'S DETAILS:**

Fwi Number:	
Named adult:	
Date of Birth:	
Gender:	
Ethnicity/Sub:	
NHS ID:	
Current address:	
Is the adult at above address: If not where are they at present:	
Contact Details for adult: Email address:	
Brief overview of the adult's care and support needs, health conditions and care being provided.  Are there any communication issues:	
Next of kin/main person in their life:	
Next of kin address and contact details:	

Details of GP surgery:	
Name of GP	
GP address and contact details:	
Does the adult live alone: if no, provide details.	
Has the adult given consent for the concerns to be raised: (Adult must consent to information being shared and further action taken, unless other adults are at risk).	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not known Provide details:
Are there any capacity issues: if so, is there a Mental Capacity Assessment relating to the issues: give details.	
Has the person and/or service thought to be the cause of risk been informed that concerns are being raised: (Include who they are and how they responded)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not known Provide details:
Details of any carer/s: (formal or informal)	

### **DETAILS OF CONCERN:**

Date and time incident happened: Is the concern on-going:	
Details of the incident/concerns:	Detail any action taken immediately:
Have Police been informed (crime evident)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not known  Crime Ref No:

### **RELEVANT PEOPLE/PROFESSIONALS INVOLVED:**

Person/professional name:	
Organisation:	
Address and contact details:	

e-mail address:	
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**RISK:**

What are the risks for the adult: (Provide details)	
Are there risks to other adults: (Provide details)	
Are there risks for worker's visiting: (Provide details)	
Are there any risks to children: (If yes, refer to CAP Children's Access Point)	

**PERSON/PROFESSIONAL RAISING CONCERNS:**

Name of person/professional:	
Team/designation:	
Organisation:	
Contact details: (please provide an alternative name and number in your absence):	
Relationship to adult: (staff, family, neighbour)	
Do you want to remain anonymous:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not known
Are you a whistle-blower:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not known
Confirmation that the person raising concerns received acknowledgement	

**PERSON-CENTRED OUTCOMES:**

Has the adult stated what they want the outcome of safeguarding to be?	<input type="checkbox"/> No <input type="checkbox"/> Yes (detail below)
Desired outcomes stated by adult	How these outcomes might be achieved according to the adult
1.	1.



*Everyone's business*  
Working together to  
prevent harm and abuse

## Appendix 2 Confidential Adult Safeguarding Concerns

Date concerns raised:	15 April 2015
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### ADULT'S DETAILS:

Fwi Number:	234786
Named adult:	Fred Bruce
Date of Birth:	06/06/1926
Gender:	Male
Ethnicity/Sub:	White Irish
NHS ID:	Not known
Current address:	11 Bishop Hill, Petworth, West Sussex. PO13 4AB.
Is the adult at above address: If not where are they at present:	No, Fred was taken to St Richard's hospital due to his injuries and remains there whilst recovering. No current plan for discharge.
Contact Details for adult: Email address:	None
Are there any communication issues:	Hearing loss, 2x hearing aids, speak clearly, whilst facing Mr Bruce as he tends to lip read.
Next of kin/main person in their life:	Daughter – Vanessa Bruce
Next of kin address and contact details:	13 Merryfield Road, Chatham, Kent. ME2 8TD. Tel: 0141 356841 vanessabruce@hotmail.com
Details of GP surgery:	Meadowfield Surgery
Name of GP	Dr Shoestring
GP address and contact details:	12 High Street Petworth PO14 3DE
Does the adult live alone: if no, provide details.	Yes.
Has the adult given	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

consent for the concerns to be raised: (Adult must consent to information being shared and further action taken, unless other adults are at risk).	Yes      No      Not known Provide details: <b>Mr Bruce gave consent, and his daughter stated that something must be done.</b>
Are there any capacity issues: if so, is there a Mental Capacity Assessment relating to the issues: give details.	<b>No capacity issues for Mr Bruce</b>
Has the person and/or service thought to be the cause of risk been informed that concerns are being raised: (Include who they are and how they responded)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not known Provide details: <b>At this point we are not aware who might be the cause of risk, as Mr Bruce was at day services at the time and the incident was not witnessed.</b>

### DETAILS OF CONCERN:

Date and time incident happened: Is the concern on-going:	<b>14 April 2015 10.30am.</b> <b>No one off.</b>
Details of the incident/concerns: <b>Mr Bruce was found on the floor in one of the main corridors, he was distressed and bleeding from the back of his head. When asked what happened he stated that someone approached him from behind, and hit him round the head, he did not see who the person was.</b>	Detail any action taken immediately: <b>Mr Bruce was checked for further injuries, and paramedics contacted immediately, due to his injuries Mr Bruce was taken to Hospital. The incident was not witnessed, staff searched nearby rooms but found nothing, not sure if the person is staff, volunteer or visitor.</b>
Have Police been informed (crime evident)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not known  Crime Ref No:

### RELEVANT PEOPLE/PROFESSIONALS INVOLVED:

Person/professional name:	<b>Jenny Phillips</b>
Organisation:	<b>Occupational Therapy WSCC</b>
Address and contact details:	<b>Durban House, Bognor.</b>
e-mail address:	<b>Jenny.phillips@westsussex.gov.uk</b>

### RISK:

What are the risks for the adult: (Provide details)	<b>None at present, currently in Hospital.</b>
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Are there risks to other adults: (Provide details)	As it is not known who caused Mr Bruce's injuries, we do not know. If a member of staff, all day centre attendees could be at risk.
Are there risks for worker's visiting: (Provide details)	No, no previous incidents reported.
Are there any risks to children: (If yes, refer to CAP Children's Access Point)	No, children do not access the day centre.

### PERSON/PROFESSIONAL RAISING CONCERNS:

Name of person/professional:	Julie Barnes
Team/designation:	Day Service Manager
Organisation:	West Sussex County Council
Contact details: (please provide an alternative name and number in your absence):	01243 505671 Deputy Manager: Dawn Town, same number.
Relationship to adult: (staff, family, neighbour)	Manager of day service Mr Bruce has attended for the last 3 years, 3 days per week.
Do you want to remain anonymous:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not known
Are you a whistle-blower:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not known

### PERSON-CENTRED OUTCOMES:

Has the adult stated what they want the outcome of safeguarding to be?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (detail below)
Desired outcomes stated by adult	How these outcomes might be achieved according to the adult
4. To feel safe when not at home.	1 Not sure at this time.
5. Not be attacked again	2 Go to a different day centre
3.To prevent anyone else suffering as I have	3.identify who did this

## Appendix 3 Confidential

### Adult Safeguarding s.42 Enquiry Summary

Enquiries are primarily about conversations and clarifying desired outcomes and actions with the adult.

NB: This template is a guide only to the information you need to capture.

### ABOUT THE PERSON

Fwi number:	
Name of person:	
D:O:B:	
Gender:	
Ethnicity/Sub:	
NHS ID	
Address & Contact details:	
Details of next of kin/representative/advocate (name, address, contact details, relationship to person)	

Enquiry Manager	Name	Team	Contact Details
Enquiry officer/s			

<b>Brief details of concerns</b>	
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### SUMMARY OF s.42 ENQUIRY

1.	What happened? In the words of adult/rep/advocate	
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2.	What outcomes does the adult/rep/advocate want to achieve?	
3.	What are the risks according to the adult/rep/advocate?	
4.	How does the adult/rep/advocate think outcomes will be achieved?	
5.	Enquiry Officer's comments	

**Which organisations (if any) were caused to make enquiries under s.42.**

Organisation:	Professionals Name:	Has report been submitted:
Relevant information about the adult:		
Capacity issues/MCA assessment:		
Who was the adult supported by ie: IMCA, family, friend		

## DESIRED OUTCOMES & RISK:

6.	Have the adult's/rep's desired outcomes been achieved:	<p>Outcomes:</p> <input type="checkbox"/> Not achieved <input type="checkbox"/> Partially achieved <input type="checkbox"/> Achieved
7.	<p>Adults/Reps view of risks:</p> <p>Summarise Risks:</p>	<input type="checkbox"/> Risk remains <input type="checkbox"/> Risk reduced <input type="checkbox"/> Risk removed
8.	Person thought to be the cause of risks comments/right of reply:	
9.	Enquiry Officer's comments:	
10.	Safeguarding Plan as agreed by the adult/rep:	<p>Action:</p> <p>Whom:</p> <p>By when:</p>
11.	Where risk remains what further action is needed (if any) according to the adult:	
12.	Duties of s.42 Enquiry	Rationale:

	met: Date:	
13.	Sign off by Enquiry Officer:	

## Appendix 4

### Confidential Adult Safeguarding s.42 Enquiry

#### ABOUT THE PERSON

Fwi number:	2389456
Name of person:	Jean Fayre
D:O:B:	10/10/1934
Gender:	Female
Ethnicity/Sub:	African/American
NHS ID	Not known
Address & Contact details:	Jacob's Nursing Home 15 Hill Barn West Sussex
Details of next of kin/representative/advocate (name, address, contact details, relationship to person)	Graham Fayre (son) Advocate; Chris Smith Tel: 01903 432432

Enquiry Manager	Name	Team	Contact Details
	Philip Morris	Southern	03300452678
Enquiry officer/s			
Specialist Nurse	Penny Smith	Health	0798523423
Senior Practitioner	Julie Walsh	Adult services	0330223909

<b>Brief details of concerns</b>	Jean lives in a nursing home, whilst in the lounge she fell, which was not witnessed by staff or other residents. Jean was found on the floor between two chairs, and screaming in pain, at 10.50am. Jean was unable to say what had happened. No recent history of health deterioration, no previous risk in relation to falls. Initial observations completed, and staff moved Jean into a chair, and called her GP. GP visited at 3.30pm and after examination called paramedics. Suspected fractures to 2 ribs and hip.
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## SUMMARY OF s.42 ENQUIRY

1.	What happened? In the words of adult/rep/advocate	Jean is unable to remember what happened, she thinks she may have blacked out when she fell. Advised that her son is her representative, who has POA. Son was not contacted until 10pm at night. He stated that his mother did not have a history of falls, however was unsteady when mobilising.
2.	What outcomes does the adult/rep/advocate want to achieve?	Jean stated that;  <ol style="list-style-type: none"> <li>1. She wants to feel safe</li> <li>2. She does not want other people at the home to fall and be injured</li> <li>3. She wants to be pain free</li> </ol>
3.	What are the risks according to the adult/rep/advocate?	Jean is happy with the care she receives and once recovered she would like to return to the home, as long as she feels safe. Jean feels that she will only be safe if staff are nearby to help her, she stated that if a staff member had been present perhaps she would not have fallen, and if she had fallen other residents may also fall and end up in hospital.
4.	What does the adult/rep/advocate think will achieve the outcomes?	More staff visible.
5.	Enquiry Officer's comments	Risks for other residents need to be considered. Contracts/commissioning need to give a view/take action with regards quality assurance.

### Which organisations (if any) were caused to make enquiries under s.42.

Organisation:	Professionals Name:	Has report been submitted:
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Sussex Homes	John Parkes (area manager)	Yes, attached as Appendix 1.
Relevant information about the adult:	Jean suffers with arthritis, experiencing pain as a result. Pain significantly affects her mobility, putting her at risk of falls. This being the reason she was cared for in a Nursing Home.	
Capacity issues/MCA assessment:	No capacity issues identified in relation to Jean	
Who was the adult supported by ie: IMCA, family, friend	Jean requested that her son represent her.	

## DESIRED OUTCOMES & RISK:

1.	<p>Have the adult/ reps desired outcomes been achieved:</p> <p>Give details:</p> <ol style="list-style-type: none"> <li>1. To feel safe</li> <li>2. For others at the nursing home not to be injured by falling</li> <li>3. Be pain free</li> </ol> <p>As a result of the s.42 Enquiry, action taken has resulted in Jean gaining confidence and feeling safe. Work has been undertaken with the home manager and risk assessments have been reviewed. Discussion was had with the Hospital ward and GP re: medication review, and regular pain relief, to prevent pain prior to the event.</p>	<p>Outcomes:</p> <p><input type="checkbox"/> Not achieved</p> <p><input type="checkbox"/> Partially achieved</p> <p><input checked="" type="checkbox"/> Achieved</p>
	<p>Adults/Reps view of risks:</p> <p>Summarise Risks:</p> <p>Jean stated that she feels safer, however she does not think that risks to</p>	<p><input type="checkbox"/> Risk remains</p> <p><input checked="" type="checkbox"/> Risk reduced</p>

	her falling again have been removed, as her mobility has deteriorated since fracturing her hip.	Risk removed	
	Person thought to be the cause of risks comments/right of reply:	PG: Senior Carer. Please see full interview transcripts – Appendices C & D	
	Enquiry Officer comments:	Contracts/CCG/CQC all fully involved and arrangements in place to monitor staff numbers and recruitment, quality of service, training and paperwork, in particular risk assessments	
	Safeguarding Plan as agreed by the adult:	Action: Whom: By when:	
9.	Where risk remains what further action is needed (if any) according to the adult:		
10.	Duties of s.42 Enquiry met: Date:	Sign off by Enquiry Officer:	Rationale:

## Appendix 5



### Safeguarding meeting

Meeting Type:	..... <input type="checkbox"/> <b>Draft</b> <input type="checkbox"/> <b>Final</b>	Date:
Person's details:	Name:	Fwi ID:
	Provider:	
Attendees:		
Minutes also sent to:		
<b>4.</b>	<b>Welcome and Introductions</b>	
<b>5.</b>	<b>Apologies received and people invited but not attending:</b>	
<b>6.</b>	<b>Purpose of the meeting and action taken to date:</b>	
<b>7.</b>	<b>Actions outstanding</b>	
<b>8.</b>	<b>Review of the outcomes as stated by the adult, and what the adult wanted to achieve from the safeguarding process:</b>	
<b>9.</b>	<b>Summary of risks addressed and existing:</b>	
<b>10.</b>	<b>Update on the views of the Adult re: outcomes</b>	
<b>11.</b>	<b>Update on any issues relating to the Person/Service thought to be the cause of risk:</b>	

<b>12.</b>	<b>Other issues and actions needed:</b>		
	<b>Action</b>	<b>By Whom</b>	<b>By When</b>
<b>13.</b>	<b>Safeguarding Plan</b>		

<b>11.</b>	<b>Next steps (Protection Plan) &amp; closure:</b>

**Chair's signature:**

**Print name:**