

# **North Lanarkshire Council**

## **Guidance for the Protection of**

### **Adults within Registered and**

#### **Contracted Services**

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## A - Introduction

The Adult Support and Protection (Scotland) Act 2007 is part of a complex system of legislation to protect adults at risk. It should not be considered in isolation, as there are other relevant pieces of legislation designed to support and protect adults at risk of harm. This includes the Adult with Incapacity (Scotland) Act 2000 and the Mental Health (Care & Treatment) (Scotland) Act 2003. The addition of the Adult Support and Protection (Scotland) Act 2007 now means we have a concise legal framework to facilitate further the protection of adults at risk of harm through the new measures contained in this Act.

Most adults at risk of harm i.e. older adults and those with dementia, people with physical or learning disabilities and impairments or mental health difficulties, manage to live their lives without experiencing harm. Often this is with the assistance of caring relatives, friends, paid carers, professional agencies or volunteers. However, for some, dependence on another may result in conflict, exploitation and risk of harm.

Everyone has a responsibility to ensure that all adults at risk are supported and are safe from harm, respected, included, receive clear communication route to ensure they are fully involved in all decisions which affect them. Changes, in the way community care services are being provided, have resulted in a greater amount of options available to those requiring help and assistance, however different risks can arise irrespective of the setting which people are supported.

All of this makes it vitally important to ensure that those involved with the support and protection of adults at risk of harm have a clear sense of what signifies harm and what should happen when harm is suspected or discovered.

### Definition of an adult at risk

The Adult Support and Protection (Scotland) Act 2007 (Section 53) defines an adult, as a person aged **16 years or over**. (For those aged 16-18 years and subject to child care legislation consideration should be given to the best way of managing the risk of harm and what would best meet the young person's needs and circumstances.) For all 'adults' consideration of the Adults with Incapacity (Scotland) Act 2000 or the Mental Health (Care and Treatment) (Scotland) Act 2003 must be taken.

'Adults at risk' are adults who:

- are unable to safeguard their own wellbeing, property, rights and other interests;
- are at risk of harm; and;
- because they are affected by disability, mental disorder, illness or physical or mental infirmity, are more vulnerable to being harmed than an adult, who is not so affected.

It is important to note that simply the existence of a particular condition does not mean that an adult is at risk. A person may have a disability and be able to safeguard themselves. For the Act to apply all three criteria must apply. This is called 'the Three Point Criteria'. All staff across agencies are expected to work within a clear procedural framework but with the confidence to exercise judgement about the most appropriate responses in specific circumstances. Ensuring the protection and welfare of adults at risk is more important than rigid adherence to procedures.

If there is a decision not to follow the normal procedures this will need to be based on evidence and a full analysis of the situation. The decisions should be recorded and approved by an appropriate identified supervisor or senior manager.

All the relevant statutory agencies in the West of Scotland - Social Work, Care Inspectorate, Police, Housing and Health have worked in partnership to produce an Inter Agency Practice Guidance & Procedures document. From these over-arching multi-agency procedures North Lanarkshire Council has developed Social Work Adult Protection Operational Procedures of which this guidance is a part.

**North Lanarkshire Council Adult Protection Procedures** outline the **General Principles and Definitions** of the Act, which must be taken into account when considering action under the legislation. The procedures also outline the **Council duties and the role of other agencies**. It is important that North Lanarkshire Council Adult Protection Procedures are read in conjunction with the procedures below.

Services delivered/provided within North Lanarkshire are broken into two groups - those services, which are delivered directly by North Lanarkshire Council and those services purchased by the Council, which are delivered by independent provider organisations.

**Services that are delivered by North Lanarkshire Council and covered within Part 1 of the procedures, Include:**

- Locality Support Services (Disability)
- Integrated Day Services for older adults
- Care Homes
- Support at Home, (homecare)
- Social work assessment and planning services within the localities

**Part 2 of the procedures cover Independent Sector Services and these include:**

- Support at Home (homecare)
- Supported Living
- Care Homes
- Independent Living services
- Advocacy
- Other non statutory organisations.

There is no difference in the process for intervention, to be followed, either by North Lanarkshire Council or Independent Provider staff other than any differences which may exist, in internal organisational policy and procedures e.g. personnel procedures, internal recording/reporting arrangements etc.

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## B – Part 1 - Referral Process for services delivered by North Lanarkshire Council

### Introduction

- 1.1 The process for services making an adult protection referral is clearly laid out in the following paragraphs. It is important for all parties to know that there may be three strands of action to an adult protection referral and staff should be aware of where their role starts and finishes. The three strands could be:
  - Inquiry or investigation of an adult at risk of harm is the responsibility of the locality team where the service is placed.
  - Conduct issues or complaint's relating to staff employed by North Lanarkshire Council should be alerted to Social Work Headquarters and the appropriate HQ care group manager. The Locality/HQ Social Work Human Resources Section must also be notified. This is the responsibility of the Locality Social Work Manager
  - Practice issues, complaints or regulatory issues for registered services will initiate the Care Inspectorate procedures. The manager of the service should initiate this with advice from the locality team.
- 1.2 Part one of the Adult Support and Protection (Scotland) Act 2007 places a duty on local authorities to make enquiries about a person's well being, property or financial affairs if it knows or believes that the person is an adult at risk, and that it might need to intervene in order to protect the person's well being, property or financial affairs.
- 1.3 Social work services, as lead agency on behalf of North Lanarkshire Council have overall responsibility for the co-ordination of adult protection procedures and will be the central point for the receiving and logging of referrals.
- 1.4 Referrals that also include issues of staff conduct or complaints will be managed through the relevant North Lanarkshire Council internal Policies and Procedures
- 1.5 All staff within registered and contracted services must be aware of their adult protection procedures and how to make referrals to the local authority. Consideration to the main principles of **benefit** and the **least restrictive** option must be given.
- 1.6 Where a staff member knows or believes that a person is an 'adult at risk of harm', then the staff member must report their concerns to their manager. it will be their responsibility to report it to the social work office where their service is located.
- 1.7 Social work staff who receive a referral from the independent sector in their locality area should note that whilst the 2007 Act does not give independent sector providers the same duties, contractual obligations ensure that providers adopt adult protection procedures that are compatible with the local authority procedures and agencies obtain a copy of local procedures for comparison and reference.
- 1.8 It is the responsibility of all agencies **to consider the need of any child** who may reside or have contact with an adult(s) suspected to be at risk of harm

particularly if they reside in the same household. In such cases [North Lanarkshire Council Child Protection Procedures](#) should be followed.

## Services Delivered by North Lanarkshire Council

- 1.9 Where it is identified that an adult is at risk of harm within a North Lanarkshire Council service then the person who identified the risk should report this to their responsible manager.
- 1.10 **Where the social work service has concerns about the immediate safety and well being of an adult they should immediately advise the appropriate emergency service e.g. police, medical practitioner**
- 1.11 The manager responsible for the service should make a referral to the social work team in the area where the person is for the time being located, even if the adult is not known to North Lanarkshire Social Work Services or they have been placed by another authority.
- 1.12 **For Support at Home** the home support team leader will discuss the referral with the locality social work manager and agree whether an adult protection inquiry should be undertaken. (Graph 2)
- 1.13 If it is appropriate for further adult protection inquiries to be undertaken then the team leader will alert the senior social worker (or equivalent manager) of the care group to which the adult at risk belongs and the senior social worker will initiate adult protection procedures.
- 1.14 Wherever possible the manager responsible for the service should ascertain the following information at the point of referral.
  - Details of referrer and their relationship to the adult.
  - Whether or not the referrer is willing to be interviewed if required during the course of any possible future investigation.
  - Person who is suspected of causing harm or abuse and their relationship to the adult and the referrer (if any).
  - Name and addresses of adult and any persons with an interest e.g. family, carer etc where known.
  - Current whereabouts of the adult.
  - Date of birth of the adult.
  - Whether the adult has a physical disability, learning disability, mental health or communication difficulties.
  - Nature of harm caused or anticipated.
  - Whether the adult is subject to any proxy decision making powers under the Adults with Incapacity (Scotland) Act 2000 or subject to any order under the Mental Health (Care & Treatment) (Scotland) Act 2003
  - Identity of any witnesses and their contact details.

- 1.15 Details of the initial referral should be forwarded to appropriate locality team or allocated worker on the Adult Protection Initial Report Form - **AP1** (Appendix 1) within **24 hours**.
- 1.16 The manager responsible for the service will ensure that the adult at risk is safe, receives appropriate treatment if required, that other adults in the service are safe and all relevant persons are notified.
- 1.17 The manager responsible for the service will notify the Care Inspectorate using an e-notification referral system or by telephone when an accusation or evidence of harm is received which may involve one or more service users.
- 1.18 If a social work employee is suspected of placing an adult at risk where a service is managed from Headquarters then the line manager responsible for the employee should obtain an initial outline of the circumstances and bring to the attention of the Care Group Senior Officer, Service Manager, or Manager at Social Work Headquarters and the locality social work manager in the form of a memo or written statement and advice should be sought at this stage from the Service Manager/Senior Officer HR. A decision will be made at this point as to who will co-ordinate the inquiry/investigation. If the member of staff is in a service managed by the locality then the locality social work manager should liaise with their own locality HR section in the first instance.
- 1.19 **If a social work member of staff is suspected** of placing an adult at risk where a service is managed from Headquarters then the manager responsible for the service should alert the Care Group Senior Officer, Service Manager, or Manager at Headquarters, Merry Street, Motherwell and the locality social work manager. A decision will be made at this point as to who will co-ordinate the inquiry/investigation and liaise with the personnel section. If the member of staff is in a service managed by the locality then the locality social work manager should liaise with their own locality personnel section.

### **Initial action or inquiry**

- 1.20 Initial inquiries by social work services should be commenced within **24 hours** of receipt of referral. In cases where there is an allegation of physical abuse, inquiries should commence immediately and the adult should be visited within **24 hours**.
- 1.21 On receipt of the initial referral form AP1 a letter of acknowledgement should be forwarded immediately to the referrer logging time, date of receipt and a further letter sent advising the outcome of initial enquiries **within five working days**. This may be done via email.
- 1.22 **For Support at Home** the home support team leader will discuss the referral with the duty ASP senior or locality social work manager and agree whether an adult protection inquiry should be undertaken. (Graph 2)
- 1.23 The purpose of the initial inquiries is to
- **Ascertain whether the adult is at risk of harm and**
  - **Establish if the council needs to take any action in order to protect the adult at risk.**
- 1.24 **It is not the role of the council officer to interview a member of staff from the service who may be suspected of placing the adult at risk. This decision should be made by the locality social work manager in**

**discussion with H.R. and the relevant Senior Officer, Headquarters. It may be more appropriate for a fact finding investigation to be undertaken along side or subsequent to the adult protection investigation. Relevant information relating to the adult protection investigation should be gathered from the manager responsible for the service.**

- 1.25 **For Support at Home** the home support team leader will discuss the referral with the duty ASP senior or the locality social work manager and agree whether an adult protection inquiry should be undertaken. (Graph 2)
- 1.26 Where there is evidence of a criminal offence, the police **must** be invited to initial planning meetings to decide who should lead the formal investigation. If the situation is urgent then there should be no delay in agreeing the process of investigation.
- 1.27 The locality social work manager should decide where appropriate to alert the Head of Community Care where joint investigations involving the police or another public body are taking place.
- 1.28 Where the abuse or suspected act of harm has occurred in a registered establishment or NHS facility, relevant representation from the Care Inspectorate or NHS Board **must** be invited to any meetings that take place.
- 1.29 This guidance should be read in conjunction with Part 3 Referral Process and Part 4 Formal Investigations of Alleged Harm. [North Lanarkshire Council Adult Protection Procedures](#)

### **Conduct issues – Council Employees**

- 1.30 Where a notification has been made relating to the conduct of a council employee in respect of an adult protection concern consideration should be given to whether there is a need to initiate an adult protection referral. If this is required the adult protection procedures should be followed. If an adult protection investigation identifies possible misconduct/inappropriate performance by a council employee then the senior social worker (or equivalent manager) should refer this information to their locality social work manager for them to liaise with the appropriate Service Manager – Personnel
- 1.31 The manager responsible for the service will as soon as practicable obtain an initial outline of the circumstances and bring to the attention of the locality team and contact the care group Senior Officer, Headquarters, Merry Street, Motherwell for advice and support..
- 1.32 The nominated person at headquarters will be responsible for liaising with the appropriate Service Manager HR, Service Manager and the locality team as appropriate, to decide whether a fact finding investigation should be initiated
- 1.33 Any such investigation must be conducted in line with the Council’s Discipline Policy and it may be prudent to temporarily transfer an employee or suspend the employee on full pay whilst the investigation is undertaken. Neither course of action should be undertaken without the approval of a senior manager at local or HQ level in consultation with Service Manager HR/Senior Officers HR. Managers should consider the seriousness of the offence and the likelihood of repetition.

- 1.34 If the employee concerned is causing an immediate danger to himself or others, e.g. incapable of continuing to work that day due to the possible influence of alcohol or drugs, precautionary suspension may be used. The employee should be removed from the workplace immediately ensuring that they are able to/assisting them to get home safely This is separate from suspension to allow a fact-finding investigation to proceed, referred to below.
- 1.35 Before a fact-finding investigation commences, a decision will be taken by the appropriate manager in consultation with Service Manager/Senior HR Officer as to whether the employee(s) concerned should be suspended or temporary relocated. The circumstances identified within the Council's Discipline Policy as to when suspension may be appropriate are where (a) the investigation may be otherwise impeded or (b) the workplace may be disrupted and examples of potential risk to be considered should the employee remain in the workplace are risk to council or other employee's property or a service user or member of the public
- 1.36 An employee who is suspended as part of investigatory procedures will be verbally advised by an appropriate manager of the broad reasons for and the conditions of the suspension and this then requires to be given in writing. The employee upon suspension shall immediately leave their place of work and should not return to the workplace without the express permission of their line manager. The employee who is suspended must be contactable and available to return to the workplace at any time during their normal working hours. There is no right of appeal against suspension.
- 1.37 Where a decision is taken following completion of a fact-finding investigation to move to a disciplinary hearing, this shall be conducted in line with the Council's Discipline Policy, including the right of appeal against any disciplinary action taken
- 1.38 The nominated Senior Officer will be responsible for liaising with the responsible manager of the service and keeping them informed of actions taken by North Lanarkshire Council in this matter. The nominated Senior Officer will also advise the Care Inspectorate of any instance where an employee of the council is the subject of a fact-finding investigation and of the outcome of any subsequent disciplinary hearing. This information requires to be consistent with any information provided to the SSSC as required where the employee is a registered worker. This consistency can be ensured by the nominated Senior Officer contacting the HQ Human Resource section before advising the Care Inspectorate of any employee involvement.
- 1.39 The nominated Senior Officer and the senior social worker (or equivalent manager) co-ordinating the adult protection inquiry must liaise regularly to ensure there is no conflict of interest.
- 1.40 Notification to the Scottish Social Services Council, other registration bodies or the Protection of Vulnerable Groups Service, if appropriate, will be undertaken by the appropriate Head of Service in North Lanarkshire Council, Social Work Services.

## Care Inspectorate

- 1.41 The Care Inspectorate will be alerted by the manager responsible for the service and confirm the matter has immediately been referred to the local authority in which the service user is residing. This should take place even where the service user has not requested involvement.
- 1.42 The Care Inspectorate officer will advise their Care Inspectorate team manager immediately and record the details of the adult protection referral on their system.
- 1.43 The Care Inspectorate officer must liaise with the responsible council officer, and, where appropriate, the police and/or Procurator Fiscal, to ensure that issues pertaining to the ongoing regulation of the service be considered.
- 1.44 Discussion will take place with the Care Inspectorate team manager to determine whether enforcement action is required to ensure the safety of other service users. However, this must be carried out in a manner which does not interfere with the investigation of the allegations.
- 1.45 Care Inspectorate staff will follow their local adult protection procedures and remain in regular contact with the local authority to confirm the outcome of the investigation.

## Referral process for adults at risk within North Lanarkshire Council services who have been placed by another local authority

- 1.46 Where it is identified that an adult is at risk of harm within a North Lanarkshire service then the person who identified the risk should report this to their responsible manager.
- 1.47 **Where the referral agency or social work has concerns about the immediate safety and well being of an adult they should immediately advise the appropriate emergency service e.g. police, medical practitioner.**
- 1.48 The manager responsible for the service should make a referral to the social work team in the area where the person is for the time being located, even if the adult is not known to North Lanarkshire social work services or they have been placed by another authority.
- 1.49 Wherever possible the manager responsible for the service should ascertain the following information at the point of referral.
- Details of referrer and their relationship to the adult.
  - Whether or not the referrer is willing to be interviewed if required during the course of any possible future investigation.
  - Person who is suspected of causing harm or abuse and their relationship to the adult and the referrer (if any).
  - Name and addresses of adult and any persons with an interest e.g. family, carer, placing authority.
  - Current whereabouts of the adult.
  - Date of birth of the adult.
  - Whether the adult has a physical disability, learning disability, mental health or communication difficulties.
  - Nature of harm caused or anticipated.
  - Whether the adult is subject to any proxy decision making powers under the Adults with Incapacity (Scotland) Act 2000 or subject to any order under the Mental Health (Care & Treatment) (Scotland) Act 2003
  - Identity of any witnesses and their contact details.
- 1.50 Details of the initial referral should be forwarded to the local team on the Adult Protection Initial Report Form - **AP1** (Appendix 1) within **24 hours** of the initial referral.
- 1.51 The manager responsible for the service will ensure that the adult at risk is safe, receives appropriate treatment if required, that other adults in the service are safe and all relevant persons are notified.
- 1.52 The manager responsible for the service will notify the Care Inspectorate using an e-notification referral system or by telephone when an accusation or evidence of harm is received which may involve one or more service users.

- 1.53 The manager responsible for the service will also alert their nominated care group Senior Officer, Merry Street, Motherwell.
- 1.54 **If a member of staff is suspected** of placing an adult at risk the manager responsible for the service should alert the Care Group Senior Officer in, Headquarters, the Service Manager HR/Senior HR Officer and the locality team

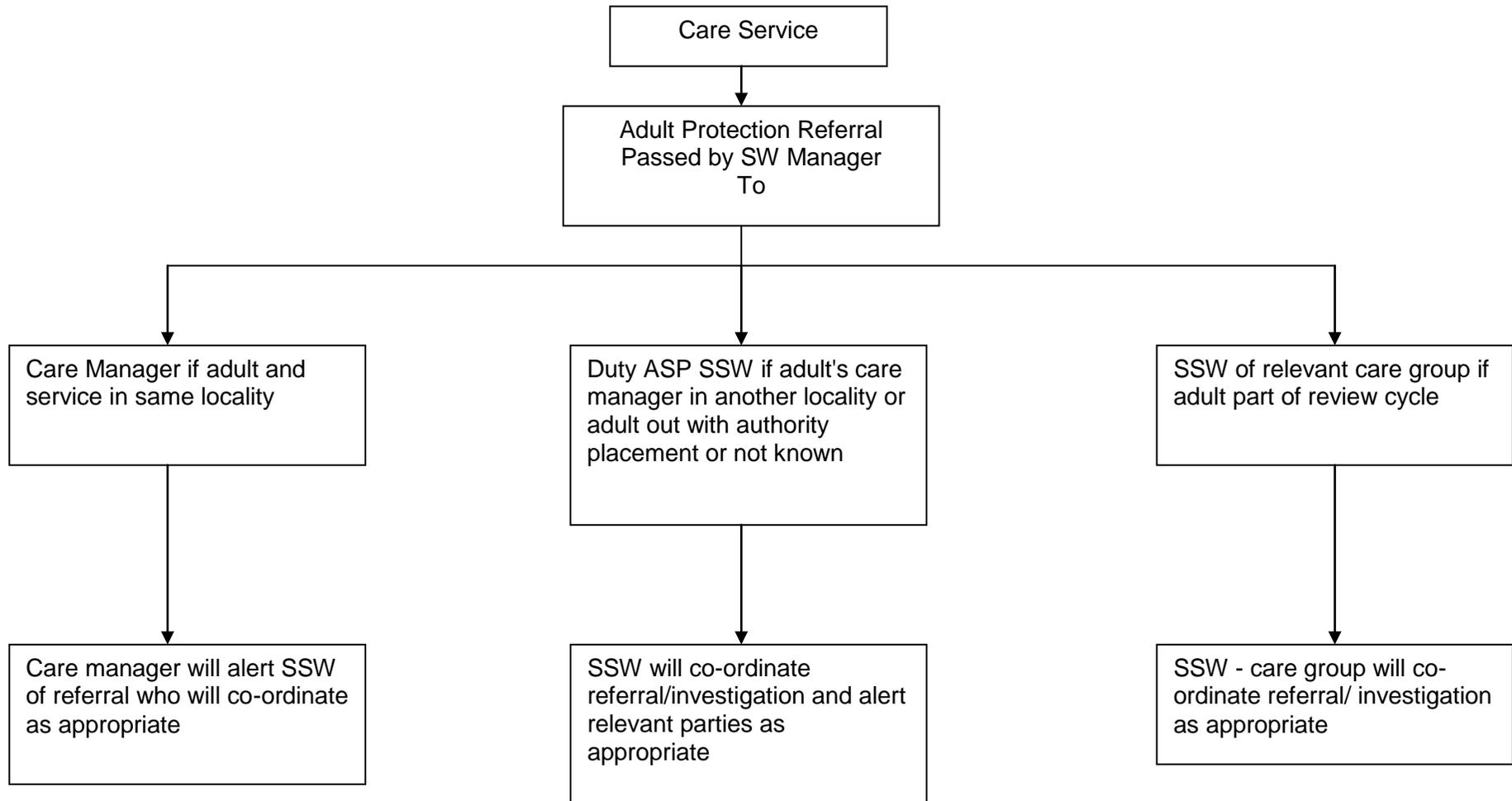
### **Initial action or inquiry**

- 1.55 Initial inquiries by social work services should be commenced within **24 hours** of receipt of referral. In cases where there is an allegation of physical abuse, inquiries should commence immediately, an assessment of the risk must be made and if required the adult should be visited within **24 hours**.
- 1.56 On receipt of the initial referral form AP1 a letter of acknowledgement should be forwarded immediately to the referrer logging time, date of receipt and a further letter sent advising the outcome of initial enquiries **within five working days**. This may be done via email.
- 1.57 On receipt of the adult protection referral the senior social worker (or equivalent manager) should alert the placing authority or care manager that an adult protection referral has been received. Agreement should be reached on who will undertake the initial inquiry or investigation.
- 1.58 **Initial inquiries should not be delayed while waiting for a response from the placing authority.**
- 1.59 Section 53 of the Act states the responsible council is the area where the adult is for the time being resident. This places the responsibility for inquiries or investigations to be undertaken by North Lanarkshire Council. However as good practice the co-ordinating senior social worker (or equivalent manager) should notify the placing authority and recommend a joint investigation is undertaken.
- 1.60 The outcome of investigation should be discussed with the locality social work manager and recorded on mySWIS. While the placing authority has no legal right to undertake any investigations on their own this may happen and North Lanarkshire Council alerted retrospectively. If this situation arises a discussion with the placing authority and copies of their adult protection paperwork from the investigation must be passed to the host authority for our records.
- 1.61 The purpose of the initial inquiries is to
- **Ascertain whether the adult is at risk of harm and**
  - **Establish if the council needs to take any action in order to protect the adult at risk.**
- 1.62 **It is not the role of the council officer to interview a member of staff from the service who may be suspected of placing the adult at risk. Relevant information relating to the adult protection investigation should be gathered from the responsible manager.**
- 1.63 It may be appropriate for a disciplinary /fact finding investigation to be undertaken along side or subsequent to the adult protection investigation by

North Lanarkshire Council and the Locality Social Work Manager will liaise with the appropriate Service Manager – HR and the appropriate HQ Manager for advice.

- 1.64 Where there is evidence of a criminal offence, the police **must** be invited to initial planning meetings, held by North Lanarkshire Council, to decide who should lead the formal investigation. If the situation is urgent then there should be no delay in agreeing the process of investigation.
- 1.65 The locality social work manager should decide where appropriate to alert the Head of Community Care where joint investigations involving the police or any other public body are taking place.
- 1.66 Where the suspected abuse or act of harm has occurred in a registered establishment or NHS facility, relevant representation from the Care Inspectorate or NHS Board **must** be invited to any meetings that take place.
- 1.67 This guidance should be read in conjunction with Part 3 Referral Process and Part 4 Formal Investigation of Alleged Harm, North Lanarkshire Council Adult Protection Procedures
- 1.68 Where there are issues relating to conduct/performance issues by employee(s) of the council sections 1.18- 1.40 of this procedure should be followed.

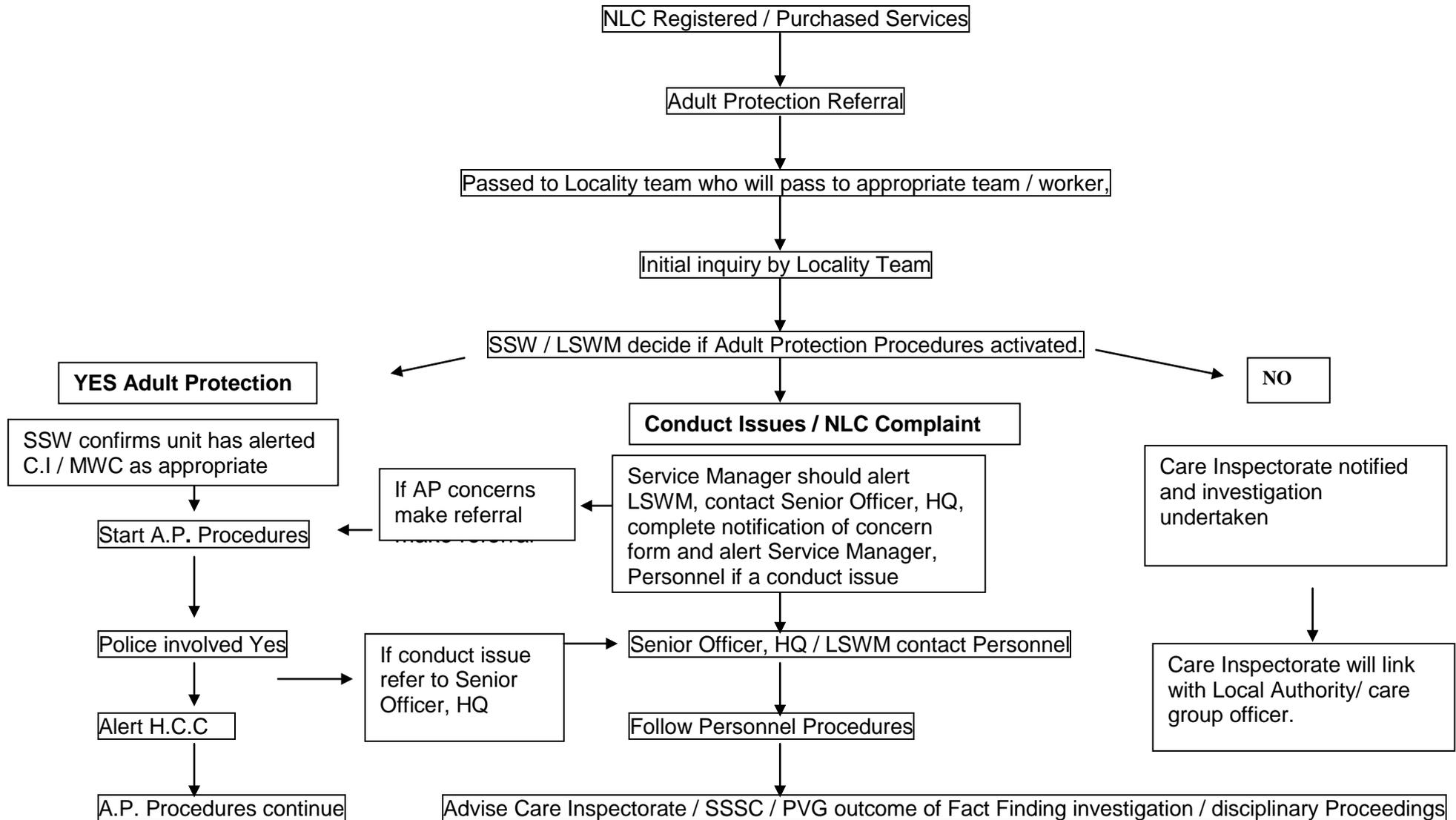
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# Protection of Adults in Registered Settings

## Flow chart of Adult Protection within N.L.C Services

Graph 1a



## C – Part 2 – Referral process for Independent Sector Services

### Introduction

- 2.1 The process for independent sector services making an adult protection referral is clearly laid out in the following paragraphs. It is important for all parties to know that there may be three streams of action to an adult protection referral and staff should be aware of where their role starts and finishes. The three strands are:
- Inquiry or investigation of an adult at risk of harm is the responsibility of the locality team where the independent sector service is placed.
  - Conduct issues or complaint's relating to staff employed by independent sector services should be alerted to their organisational manager, Social Work Headquarters (appropriate care group) and Quality Assurance Section.
  - Practice issues, complaints or regulatory issues for registered care services will activate the Care Inspectorate procedures. The manager responsible for the service should initiate this.
- 2.2 Part one of the Adult Support and Protection (Scotland) Act 2007 places a duty on local authorities to make enquiries about a person's well being, property or financial affairs if it knows or believes that the person is an adult at risk, and that it might need to intervene in order to protect the person's well being, property or financial affairs.
- 2.3 Social work services, as lead agency on behalf of North Lanarkshire Council have overall responsibility for the co-ordination of adult protection procedures and will be the central point for the receiving and logging referrals.
- 2.4 Referrals that also include staff conduct or complaints will be managed within North Lanarkshire Council and independent sector internal procedures.
- 2.5 All staff within registered services must be aware of their own organisation's adult protection procedures and how to make referrals to the local authority. Consideration to the main principles of **benefit** and the **least restrictive** option must be given.
- 2.6 Where any employee knows or believes that a person is an 'adult at risk' and action needs to be taken in order to protect that person from harm, then that staff member must report the facts and circumstances of the concern to the appropriate manager who will report it to the council for the area where the person to be located.
- 2.7 Whilst the 2007 Act does not give independent sector providers the same duties contractual obligations ensure that providers adopt adult protection procedures that are compatible with the [North Lanarkshire Council Adult Protection Procedures](#) and organisations/agencies should obtain a copy of local procedures for comparison and future reference.

- 2.8 It is the responsibility of all agencies **to consider the need of any child** who may reside or have contact with an adult(s) suspected to be at risk of harm particularly if they reside in the same household. In such cases North Lanarkshire Council Child Protection Procedures should be followed

### Referral process for adult protection

- 2.9 Where it is identified that an adult is at risk of harm within an independent sector service then the person who identified the risk should report this to their responsible manager.
- 2.10 **Where the referral agency or social work has concerns about the immediate safety and well being of an adult they should immediately advise the appropriate emergency service e.g. police, medical practitioner.**
- 2.11 The responsible Independent sector service manager should contact the locality team where the service is located and report their concerns.
- 2.12 Wherever possible the manager responsible for the service should ascertain the following information at the point of referral.
- Details of referrer and their relationship to the adult.
  - Whether or not the referrer is willing to be interviewed if required during the course of any possible future investigation.
  - Person who is suspected of causing harm or abuse and their relationship to the adult and the referrer (if any).
  - Name and addresses of adult and any persons with an interest e.g. family, carer etc where known.
  - Current whereabouts of the adult.
  - Date of birth of the adult.
  - Whether the adult has a physical disability, learning disability, mental health or communication difficulties.
  - Natures of harm caused or anticipated.
  - Whether the adult is subject to any proxy decision making powers under the Adults with Incapacity (Scotland) Act 2000 or subject to any order under the Mental Health Act (Care & Treatment) (Scotland) Act 2003
  - Identity of any witnesses and their contact details.
- 2.13 Details of the initial referral should be forwarded to the locality team on the Adult Protection Initial Report Form - **AP1** (Appendix 1) within **24 hours**.
- 2.14 The manager responsible for the service will ensure that the adult at risk is safe, receives appropriate treatment if required, other adults within their service are safe and that all relevant persons are notified.
- 2.15 The manager responsible for the service of the independent sector service will notify the Care Inspectorate using an e-notification referral system or by

telephone when an accusation or evidence of harm is received which may involve one or more service users.

- 2.16 If a member of staff is suspected of placing an adult at risk the manager responsible for the service should contact their appropriate manager/director and Service Manager - HR etc. (depending on internal procedures), for advice and support and alert the nominated Senior Officer, Quality Assurance, Merry Street, Motherwell and the nominated Care Group Senior Officer, Merry Street, Motherwell.

### **Initial action or inquiry**

- 2.17 Initial inquiries by social work services should be commenced within **24 hours** of receipt of referral. In cases where there is an allegation of physical abuse, inquiries should commence immediately and an assessment of the risk must be made and if required the adult should be visited within **24 hours**.
- 2.18 On receipt of the initial referral form AP1 a letter of acknowledgement should be forwarded immediately to the referrer logging time, date of receipt and a further letter sent advising the outcome of initial enquiries **within five working days**. This may be forwarded by email.
- 2.19 The senior social worker (or equivalent manager) in the locality team where the independent sector service is placed will co-ordinate the adult protection inquiry or investigation. If the allocated worker is out with the locality the senior social worker (or equivalent manager) will alert the allocated worker and their manager that an adult protection referral has been received and negotiate who will undertake the inquiry or investigation.
- 2.20 The purpose of the initial inquiries is to
- **Ascertain whether the adult is at risk of harm and**
  - **Establish if the council needs to take any action in order to protect the adult at risk.**
- 2.21 **It is not the role of the council officer to interview a member of staff from the service who may be suspected of placing the adult at risk. Relevant information relating to the adult protection investigation should be gathered from the manager responsible for the service.**
- 2.22 The independent sector manager will liaise with their own organisation for advice and support. They will also follow their own internal personnel procedures.
- 2.23 It may be appropriate for a disciplinary/fact finding investigation to be undertaken by the organisation concerned alongside the adult protection investigation by North Lanarkshire Council and the locality social work manager will liaise with the appropriate manager, Headquarters for advice.
- 2.24 Where there is evidence of a criminal offence, the police **must** be invited to initial planning meetings to decide who should lead the formal investigation. If

the situation is urgent then there should be no delay in agreeing the process of investigation.

- 2.25 The locality social work manager should decide where appropriate to alert the Head of Community Care where joint investigations involving the police are taking place.
- 2.26 Where the abuse or suspected act of harm has occurred in a registered establishment or NHS facility, relevant representation from the Care Inspectorate or NHS Board **must** be invited to any meetings that take place.
- 2.27 This guidance should be read in conjunction with Part 3 Referral Process and Part 4 Formal Investigations of Alleged Harm, North Lanarkshire Council Adult Protection Procedures

### **Conduct Issues – non Council employees**

- 2.28 Where a notification has been made relating to the conduct of an employee of the organisation, which may involve adult protection concerns, consideration should be given to whether there is a need to initiate an adult protection referral. If this is required the adult protection procedures should be followed. If an adult protection investigation identifies a concern relating to staff conduct then the senior social worker (or equivalent manager) should refer this information to the Quality Assurance Section at Social Work HQ.
- 2.29 Where an employee of another organisation is suspected of placing an adult at risk then the manager responsible for the service should undertake a risk assessment and take the appropriate immediate action to safeguard the adult, other service users and if appropriate other staff members.
- 2.30 The manager responsible for the service will as soon as practicable contact their organisational manager and Senior Officer Quality Assurance, Headquarters, Merry Street, Motherwell for advice and support.
- 2.31 The independent sector service should refer to their internal personnel procedures.
- 2.32 The manager responsible for the service should keep the nominated person at Quality Assurance, Headquarters informed of action taken by the organisation.
- 2.33 Notification to the Scottish Social Services Council, other registration body or Disclosure Scotland, if appropriate, will be undertaken by the independent sector service. This will include advising the Care Inspectorate and /or where appropriate the SSSC or Disclosure Scotland of instances where their own employees are the subject of fact finding/disciplinary investigations, and of the outcome of any subsequent disciplinary hearings.

### **Care Inspectorate**

- 2.34 The Care Inspectorate will be alerted by the manager responsible for the service and confirm the matter has immediately been referred to the local authority in which the service user is residing. This should take place even where the service user has not requested involvement.

- 2.35 The Care Inspectorate office will advise their team manager immediately and record the details of the adult protection referral on their system
- 2.36 The Care Inspectorate officer must liaise with the responsible council officer, Quality Assurance Team and, where appropriate, the police and/or Procurator Fiscal, to ensure that issues pertaining to the ongoing regulation of the service be considered;
- 2.37 Discussion will take place with the Care Inspectorate team manager to determine whether enforcement action is required to ensure the safety of other service users. However, this must be carried out in a manner which does not interfere with the investigation of the allegations
- 2.38 Care Inspectorate staff will follow their local adult protection procedures and remain in regular contact with the local authority to confirm outcome of investigation.
- 2.39 Care Inspectorate will follow their local procedures as required.

### **Referral Process for adults at risk within Independent Sector Services who have been placed by another local authority**

- 2.40 Where it is identified that an adult is at risk of harm within an independent sector service then the person who identified the risk should report this to their responsible manager.
- 2.41 **Where the referral agency or social work has concerns about the immediate safety and well being of an adult they should immediately advise the appropriate emergency service e.g. police, medical practitioner.**
- 2.42 The manager responsible for the service should make a referral to the social work team in the area where the person is for the time being located, even if the adult is not known to North Lanarkshire Social Work Services or they have been placed by another authority.
- 2.43 Wherever possible the manager responsible for the service should ascertain the following information at the point of referral.
- Details of referrer and their relationship to the adult.
  - Whether or not the referrer is willing to be interviewed if required during the course of any possible future investigation.
  - Person who is suspected of causing harm or abuse and their relationship to the adult and the referrer (if any).
  - Name and addresses of adult and any persons with an interest e.g. family, carer, placing authority.
  - Current whereabouts of the adult.
  - Date of birth of the adult.
  - Whether the adult has a physical disability, learning disability, mental health or communication difficulties.
  - Natures of harm caused or anticipated.

- Whether the adult is subject to any proxy decision making powers under the Adults with Incapacity (Scotland) Act 2000 or subject to any order under the Mental Health (Care & Treatment) (Scotland) Act 2003
  - Identity of any witnesses and their contact details.
- 2.44 Details of the initial referral should be forwarded to the locality team on the Adult Protection Initial Report Form - **AP1** (Appendix 1) within **24 hours**.
- 2.45 The manager responsible for the service will ensure that the adult at risk is safe, receives appropriate treatment if required, other adults within their service are safe and all relevant persons are notified.
- 2.46 The manager responsible for the service will follow their organisation procedures and alert all relevant persons.
- 2.47 The manager responsible for the service will notify the Care Inspectorate using an e-notification referral system or by telephone when an accusation or evidence of harm is received which may involve one or more service users.
- 2.48 The manager responsible for the service will also alert their nominated officer at the Quality Assurance Team, Merry Street, Motherwell and care group Senior Officer, Merry Street, Motherwell.
- 2.49 **If an employee of the organisation concerned is suspected** of placing an adult at risk the responsible manager should contact the appropriate manager (depending on the organisation's procedures) for advice and support and alert the nominated Senior Officer, Quality Assurance, Merry Street, Motherwell and care group Senior Officer, Merry Street, Motherwell.

### Initial action or inquiry

- 2.50 Initial inquiries by social work services should be commenced within **24 hours** of receipt of referral. In cases where there is an allegation of physical abuse, inquiries should commence immediately, an assessment of the risk must be made and if required the adult should be visited within **24 hours**.
- 2.51 On receipt of the initial referral form AP1 a letter of acknowledgement should be forwarded immediately to the referrer logging time, date of receipt and a further letter sent advising the outcome of initial enquiries **within five working days**. This may be done via email.
- 2.52 On receipt of the adult protection referral the senior social worker (or equivalent manager) or locality social work manager should alert the placing authority or care manager that an adult protection referral has been received. Agreement should be reached on who will undertake the initial inquiry or investigation.
- 2.53 **Initial inquiries should not be delayed while waiting for a response from the placing authority.**
- 2.54 Section 53 of the Act states the responsible council is the area where the adult is for the time being resident. This places the responsibility for inquiries or investigations to be undertaken by North Lanarkshire Council. However as good practice the co-ordinating senior social worker (or equivalent manager)

should notify the placing authority and recommend a joint investigation is undertaken.

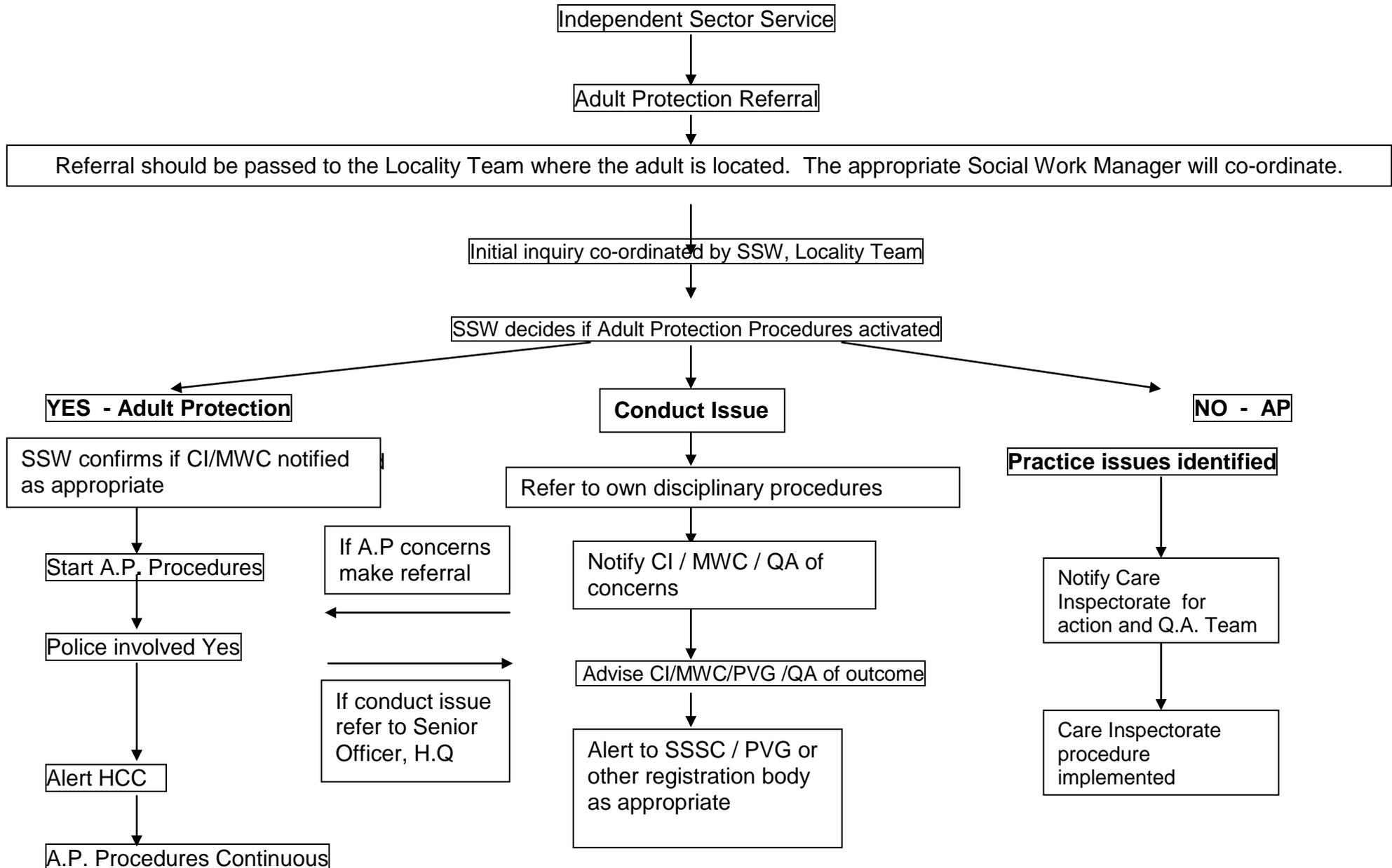
- 2.55 The outcome of investigation should be discussed with the locality social work manager and recorded on mySWIS. While the placing authority has no legal right to undertake any investigations on their own this may happen and North Lanarkshire Council alerted retrospectively. If this situation arises a discussion with the placing authority and copies of their adult protection paperwork from the investigation must be passed to the host authority for our records.
- 2.56 The purpose of the initial inquiries is to
- **Ascertain whether the adult is at risk of harm and**
  - **Establish if the council needs to take any action in order to protect the adult at risk.**
- 2.57 **It is not the role of the council officer to interview a member of staff from the service who may be suspected of placing the adult at risk. Relevant information relating to the adult protection investigation should be gathered from the responsible manager of the service.**
- 2.58 The independent sector manager will liaise with their own organisation for advice and support. They will also follow their own internal disciplinary procedures
- 2.59 It may be appropriate for the organisation concerned to initiate a disciplinary/fact finding investigation to be undertaken subsequent to /alongside the adult protection investigation by North Lanarkshire Council and the locality social work manager will liaise with the appropriate manager, Headquarters for advice.
- 2.60 Where there is evidence of a criminal offence, the police **must** be invited to initial planning meetings to decide who should lead the formal investigation. If the situation is urgent then there should be no delay in agreeing the process of investigation.
- 2.61 The locality social work manager should decide where appropriate to alert the Head of Community Care where joint investigations involving the police or other public bodies are taking place.
- 2.62 Where the abuse or suspected act of harm has occurred in a registered establishment or NHS facility, relevant representation from the Care Inspectorate or NHS Board **must** be invited to any meetings that take place.
- 2.63 This guidance should be read in conjunction with Part 3 Referral Process and Part 4 Formal Investigations of Alleged Harm, North Lanarkshire Council Adult Protection Procedures
- 2.64 Where there are issues relating to conduct issues sections 2.28 – 2.33 of the procedures should be followed.

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# Protection of Adults in Registered Settings

## Flow chart of Adult Protection within Independent Sector Services

Graph 2



## **D – Part 3 – Large Scale Investigations within North Lanarkshire Council**

### **Purpose of Guidance**

This guidance must be read in conjunction with North Lanarkshire's Adult Protection Procedures. This guidance is designed to support consistent practice and process in managing large scale investigations across North Lanarkshire Council, it aims to:

- Provide a standardised approach to be implemented in all professions consistent with current evidence of best practice.
- Help to decide if a Large Scale Investigation is warranted
- Offer a framework for an alternative process to holding large numbers of individual Adult Support and Protection Inquiries and ensure that there is adequate overview / co-ordination where a number of agencies have key roles to play.
- Clarify roles and responsibilities amongst affiliated agencies involved in Large Scale Investigations, including where these may involve more than one local authority.
- Ensure that ethical issues related to the guidance are recognised and handled appropriately.
- Facilitate a shared understanding of how it supports and complements local ASP procedures among all staff working in North Lanarkshire.

### **Definition of a large scale investigation**

A Large Scale Investigation is a multi-agency response to circumstances where there may be a risk of serious harm within a care setting (this may be either residential care, day care, home based care or a healthcare setting). The circumstances of concern could have arisen during a short timeframe, or have accumulated over a longer period. Additionally, there could be circumstances where the seriousness of the harm experienced by one individual and potential impact on others would merit a large scale investigation.

### **Criteria**

A Large Scale Investigation (LSI) should be considered when one or more of the factors below are applicable:

- There are concerns about systemic failure in the delivery of services which is placing individuals at risk of harm.
- There is a report of harm to an individual which may affect a number of other individuals.
- There are multiple individuals deemed to be at or potentially at risk of harm in one setting: for example a number of adults at risk in the community may be being systematically targeted in a criminal fashion. Although the police will have the lead responsibility to investigate, this approach would bring together key agencies to assist in that investigation and take a consistent approach to support and protect victims from harm.
- There are circumstances where multiple allegations are received from service users against other service users. In these circumstances, whilst it may be

appropriate to conduct individual Adult Support and Protection Case Conferences, experience indicates that taking a proactive approach which can address supervisory arrangements and/or the management of aggressive or sexualised behaviour, is potentially more effective.

## Introduction

Under the Adult Support & Protection (Scotland) Act 2007 (The Act) councils have a duty to make inquiries where it is known or believed that an individual may be an adult at risk of harm and that protective action may be required. The Act gives the Council the lead role in Adult Protection investigations and makes no distinction between NHS premises and other settings.

Concerns about an adult at risk being harmed in a care setting can be raised from many sources including:

- Family / friends making a complaint about standards of care
- Whistle blowing within an organisation
- GPs visiting the care setting
- Community-based health or social work professionals visiting the care setting
- An existing or ongoing ASP investigation into one adult
- Procurator fiscal investigating a death
- An admission to hospital
- Quality assurance and contract monitoring arrangements
- Concerns raised by the regulatory process

When a report is received about an adult at risk being harmed within a residential or hospital care setting, or potential systemic failure in the delivery of care services to adults at risk, there is a duty to make inquiries. These inquiries should consider whether there is potential that other adults are also experiencing harm or are at risk of harm, and include, where relevant, consultation with both police and health managers. If this is suspected to be the case, following discussion with the relevant senior manager, a Large Scale Investigation should be recommended and in these circumstances, this guidance should be followed.

Section 53 of the Act states the responsible council is the area where the adult is for the time being resident. This places the responsibility for inquiries or investigations to be undertaken by North Lanarkshire Council.

This guidance must not be read in isolation, and should be viewed as companion to the Act's Code of Practice, and North Lanarkshire ASP procedures.

All large scale investigations should be completed within sixty days of the first planning meeting, however if this progresses beyond that time a meeting of the planning group must be reconvened to review progress , further action and agree amended timescales. This must also be agreed by the Head of Community Care.

## Initial Referral / Immediate Safety Issues

- 3.1 On receipt of an adult protection referral or expressions of concern the Social Work Service locality team, which covers the geographical area where the individual receiving a registered service lives, will conduct the initial inquiry as per standard adult support and protection procedures. However, when the harm is noted to have occurred within a managed care setting, the local authority social work service will also consider whether there is potential that other adults may also be experiencing harm or are at risk of harm.
- 3.2 If there is potential that there may be multiple adults at risk of harm, then the responsible LSWM will alert the relevant Planning & Quality Assurance Senior Officer / Manager, the Adult Protection Lead Officer and the Senior Officer Adult Protection using the notification of concern form (App 2)
- 3.3 A pre social work planning meeting should take place to discuss the issues arising and clarify actions prior to any formal planning meeting. Planning & Quality Assurance Senior Officer / Manager and the Senior Officer Adult Protection must be invited.
- 3.4 At this stage of the inquiry process, relevant contact with other appropriate agencies (who are not presently aware of the concerns) should be made and any information which will inform the **inquiry** should be gathered.
- 3.5 The agencies who may be notified include (please note this is not an exhaustive list):
  - The Care Inspectorate (for concerns relating to registered care services)
  - Police Scotland (for concerns where there is potential criminality)
  - The Mental Welfare Commission (where the concerns relates to ill treatment, neglect or cruelty towards a person with a mental disorder)
  - Healthcare Improvement Scotland (for concerns located within NHS care settings)
  - NLC Planning & Quality Assurance Team
  - The Office of the Public Guardian (if proxies in place)
  - Other placing authorities if appropriate
  - NHS Lanarkshire, relevant GP practices, pharmacists etc
  - Financial or other agencies relevant to the inquiry
- 3.6 This inter-agency liaison will contribute to the initial inquiry and consider:
  - Whether any immediate protective action is required should individuals be at risk of imminent harm
  - Whether there is a potential risk to any other individuals
  - Whether a multi-agency planning meeting should be convened to assess whether a Large Scale Investigation should be initiated
  - The urgency of this and who is best to attend
  - A media strategy

- 3.7 Following initial inquiries, the local authority will be in a position to make a decision as to how to proceed in regards to the concern raised. Normally, there will be one of three outcomes:
- There is to be No Further Action (NFA) under adult protection procedures. This would be the outcome if the adults involved did not meet the three point criteria under Adult Support and Protection (ASP) legislation, or the risk of harm that was reported was not present. NOTE: A decision of NFA in regards to Adult Protection does not in any way preclude other interventions occurring (e.g. Care Inspectorate regulatory activity; contract enforcement action etc).
  - Individual Adult Protection Investigations where it is likely that there are ongoing adult protection concerns would be best addressed via individual inquiries/investigations. In these circumstances, individual ASP inquiries/investigations would be progressed via the standard arrangements within NLC Adult Support and Protection Guidance. This would be the outcome if the harm is thought to be limited in who it affects within the managed care setting and is felt to be best addressed on an individual basis.
  - Large Scale Investigation – Where it is likely that there are ongoing adult protection concerns AND those concerns are felt to impact upon multiple adults who are involved with the managed care setting.
- 3.8 When the decision of the local authority is that there ARE ongoing adult protection concerns within the commissioned or managed care services AND that it impacts upon multiple adults, the next step would be to convene a Large Scale Investigation Planning Meeting.
- 3.9 Whatever the decisions taken all agencies should be notified of the outcome of the inquiry.
- 3.10 All decisions taken should be noted on mySWIS where an individual is recorded or a minute of any meetings taken place circulated to all who attended, including Planning & Quality Assurance Senior Officer and Adult Protection Senior Officer.
- 3.11 Where individual service users are not yet identified or their details are unclear the organisations details should be recorded on agency report form (App 3) and kept for reference until further inquiries are completed.

### **Media Strategy:**

- 3.12 Where any media interest is likely, the lead senior manager and the appropriate communication officers from the relevant agencies should agree a joint media strategy
- 3.13 A nominated senior manager must to be appraised and may decide to direct / manage this process. The Head of Community Care /Lead Officer for Adult Protection will advise all other relevant senior managers, local Chief Officer's groups and the Convenor of the Adult Protection Committee as appropriate.
- 3.14 If a large number of adults are at risk as a result of an emergency situation in a registered service (such as failure of business or a situation requiring

evacuation of accommodation such as a care home) then emergency planning arrangements should be agreed within the Council & Health Board contingency plan and reference made to COSLA's [Good Practice Guidance on the Closure of a Care Home](#) .

### **Large Scale Investigation Planning Meeting**

- 3.15 The council will be the lead agency for arranging the Large Scale Investigation Planning Meeting and will appoint a Chairperson (LSWM/ CSWM) who will have overall responsibility for arranging and conducting the meeting.
- 3.16 The Chairperson will identify the key agencies that are required to attend the meeting. Those attending should be of a sufficiently senior level to contribute to decision making and resource allocation if necessary.
- 3.17 The following should routinely be considered for invitation (this is not an exhaustive list)
- Representative from the Council's Social Work Service (Adults and/or Older Adults Sections,)
  - Council Officers if already identified
  - Council's Planning & Quality Assurance Team Manager or representative and Senior Officer Adult Protection
  - Council Communications Manager (if appropriate)
  - Police Scotland Representative – via the Public Protection Unit,
  - Council Legal representation
  - NHS Representative, Pharmacist Lead etc
  - GP medical link to the managed care setting (if appropriate)
  - Other Medical Practitioner linked to the managed care setting – e.g. Geriatrician, Psychiatric Consultant etc.
  - Care Inspectorate relevant Manager (if a registered care setting/provider)
  - Senior Manager of the managed care setting involved (if appropriate)
  - Representative(s) from any other local authorities who are funding placements for a service user(s) within the managed care setting concerned.
- 3.18 Attendees of this meeting will be referred to as the Planning Group. As a minimum local authority, police and health should be represented and the care inspectorate where appropriate. If senior managers are invited they may bring / delegate attendance to relevant managers involved in the investigation.
- 3.19 Dedicated administrative supports should be in place to record the outcome of any formal adult protection processes being implemented and be available to support investigators for the duration of the large scale investigation.
- 3.20 It is important to involve the relevant senior manager of the managed care service that is involved in the potential investigation throughout the process, where possible. However, there will be instances where notifying the managed care setting may not be appropriate, for example, due to risk of compromise to an investigation. A decision as to whether to exclude a representative from the

managed care service from the planning meeting will be taken by the Chairperson in consultation with relevant partners e.g. Police Scotland, Care Inspectorate etc. Decisions for this action must be recorded.

3.21 The intention of the Large Scale Investigation Planning meeting will be to:

- Analyse information available and make a decision as to whether a Large Scale Investigation should be initiated under Adult Support and Protection Procedures, and/or through criminal investigation.
- Identify and evaluate risks
- Consider the nature and timing of any regulatory response being proposed by the Care Inspectorate to ensure that this does not interfere with any proposed or ongoing investigation.
- Consider/discuss any assessments/investigations already conducted at this time (from Social Work, Health, or Police).
- Consider information provided by all agencies which will include previous concerns / reports and complaints received by them.
- Consider / review whether a media strategy is required.
- Provide clarity in regard to parallel / joint investigation i.e. Police/Care Inspectorate/Council/NHS
- Identify key tasks to be undertaken; the persons who will undertake these tasks; and agreed timescales for completion. This will include any immediate protective measures for individuals (where not already addressed).
- Consider the need for any individual interventions which need to be undertaken for adults considered to be at particular risk (it may not be necessary to do this if concerns / protection issues are adequately addressed by the Large Scale Investigation Procedure).
- Agree how the relevant manager of the care home / care service under investigation will be apprised of the situation and who is responsible for this (if not already informed).
- Advise the relevant Planning & Quality Assurance Manager of the decisions of the planning meeting if not in attendance.
- Ensure notification of other parties if notifications have not already been made at an earlier part of the process for example Mental Welfare Commission, other local authorities, family/main carers will take place.
- Identify key personnel from each agency who will be the link person and responsible for communication.
- Ensure the managed care service provide NLC with the names of all their residents/ service users, the placing authority responsible for their

funding, any legal status (Guardian, POA, MHA ) and the contact details of family or proxies where appropriate.

- Decide on the provision of advocacy services.
- 3.22 The planning group will decide who will inform other Local Authority funded residents within the care home/ service. Under the Act the host authority has responsibility for any Adult Support and Protection Investigation in its area. The responsible manager from each funding authority must be notified of the planning meeting and information appropriate to the situation should be sent to them. Whilst it is their responsibility to notify their Chief Social Work Officer the decision may be taken by the Head of Community Care to notify all Chief Social Work Officer's involved.
- 3.23 If the planning group decides that all or some of the residents need to be reviewed, the level and type of review should be clarified and the professionals who need to be involved identified. Where a number of residents are funded by another authority, it is the role of that Council to undertake its own reviews. Once assessments / reviews have been undertaken by the appropriate professionals and any immediate risks have been addressed, then outstanding concerns should be discussed with the Adult Protection Lead Officer / Senior Officer Adult Protection and reported back to the next multi-agency meeting. (Appendix 4) review form
- 3.24 The planning group should identify timescales for placing authorities to forward information on their service users, including the outcome of recent ASP activity, which should be no later than four weeks or the next LSI review meeting.
- 3.25 The planning meeting will also identify core group representatives and ensure the minutes from their 4 weekly core group meeting are in place to inform progress or the need for the planning group to reconvene.
- 3.26 Any staffing/resource issues which may impede the investigation should be escalated to relevant Senior Managers / Head of Community Care. Where the concerns relate to criminal activity (or possible criminal activity) the planning meeting will need to ensure that:
- Any agreed action plan focuses on the immediate protective measures required for the adults involved, BUT
  - The action plan will otherwise be primarily informed by the requirements of the Police to conduct a criminal investigation in liaison with the Procurator Fiscal.
- 3.27 The chairperson will identify a named person to notify families and proxies by letter of any Large Scale Investigation taking place and what support is required.
- 3.28 The Large Scale Investigation Planning meeting must be minuted and a copy of the decisions sent to all participants within 1 day including those who were invited but were unable to attend. A full minute should be circulated within 14 days of the meeting being held.

- 3.29 Consideration needs to be given on a local basis as to how and where information gathered during the course of a Large Scale Investigation is recorded and stored. Additionally, consideration needs to be given to situations where information from the Large Scale Investigation requires to be included in an individual's records.
- 3.30 Where the planning group decide that a Large Scale Investigation is not required, they must record the reason(s) for this decision and outline any further contingency or improvement action the planning group decide is required. A clear plan should be formulated which identifies who is responsible for implementing the actions within an agreed timescale and also who is responsible for monitoring the action plan if in place.

### **Staff Briefings**

- 3.31 It will be the responsibility of the Senior Social Worker / LSWM to identify and brief the Council Officer's who will undertake the investigation on their role, systems for sharing information, timescales and processes for completing reports.
- 3.32 The lead Senior Social Worker (equivalent manager) will identify the adults who are to be interviewed under ASP using ASP paperwork, the adults who are not subject to ASP but require initial inquiries to be carried out using the adult review form (App 4) and those who are to have outcome focused reviews by the placing authority or North Lanarkshire Social Work Service using
- 3.33 All information pertaining to the adult's legal status must be available with the contact details of the relevant proxies using the legal details form (App 5)
- 3.34 The Senior Social Worker (equivalent manager) will co-ordinate a meeting which will include the Manager and Depute Manager from the care service being investigated (if appropriate or they did not attend the Planning Meeting) and Council Officers to ensure all parties are clear on their roles and responsibilities and clear lines of communication are in place.
- 3.35 The Senior Social Worker (equivalent manager) will formally meet with the investigating officers at least weekly to monitor progress, support staff and address any outstanding issues.
- 3.36 Advocacy Services should be identifies and included in meeting as appropriate.

### **Large Scale Investigation (LSI)**

- 3.37 The Planning Group must identify the Senior Social Worker responsible for co-ordinating the investigation if not already known.
- 3.38 If there is a criminal investigation then decisions regarding primary and parallel processes vis-a-vis criminal investigation / disciplinary investigation will be considered, however it remains the Council's duty to co-ordinate the Adult Protection process.
- 3.39 If the identified risks relate to the actions of a staff member (or staff members) within an organisation, then that organisation will be responsible for invoking

its own disciplinary proceedings and ensuring that any immediate risks are removed or minimised.

- 3.40 If there is a criminal investigation, this will take priority over any disciplinary proceedings and the organisation should be advised accordingly. Where the organisation concerned contracts with the Council to provide a service, then the Planning & Quality Assurance Officer / Planning group should be advised of any indications that the provider may be in breach of contract.
- 3.41 Where possible it will be important to involve the relevant senior manager of the service under investigation throughout the process. If this does not seem appropriate e.g. it may potentially compromise the investigation, advice should be sought from the police. The Care Inspectorate may also have a role in keeping the manager apprised in terms of possible action under the Public Services Reform (Scotland) Act 2010
- 3.42 Different situations will necessitate different levels of investigatory response. For example, in a situation where there have been concerns about standards of care within a registered care setting over a period of time, the majority of information may already be available and the primary responsibility of the Council Officer will be to address any gaps in knowledge and ensure collation of all known reports. Conversely, in situations where the allegation of harm is completely new to the statutory services, far more substantial direct investigation may be required – potentially including interviews with service users, staff (not staff members alleged of causing harm) family members etc.
- 3.43 As per NLC procedures, all investigatory work, should consider the following:
- All council officers involved in the investigation have undergone NLC adult protection training.
  - All investigations should be carried out sensitively taking into consideration the adults needs for protection and respecting their rights.
  - Investigations should be undertaken as soon as possible while taking into consideration the impact on the adults in a managed care setting.
  - Consideration should be given to the venue, time and support available for all adults at risk.
  - Those involved in the investigation must be given clear guidance from managers on how to proceed, making sure they are aware of all the facts to date, background, knowledge / information regarding the adult at risk and any alleged perpetrators.
- 3.44 Once the investigatory process is concluded, the Senior Social Worker (or equivalent manager) will be responsible for ensuring that all relevant information is collated and ready for presentation to, and consideration at, an Adult Protection Large Scale Investigation Review Meeting.

## LSI Core Group Meetings

- 3.45 LSI Core groups are small groups of interagency staff who are involved with individuals or service subject to the adult protection.
- 3.46 The core group has delegated responsibilities to progress the adult protection investigation / plan and is answerable to the LSI planning group.
- 3.47 Core group members must be identified during the initial Large Scale Investigation Planning meeting along with delegated tasks and timescale recorded in the minute.
- 3.48 Membership of the core group should be kept as small as possible without compromising the adult protection planning and protective process. It will also be for professionals meeting to share information and ensuring the plan clearly identifies and achieves the outcomes for the adult or young person(s) involved in the LSI.
- 3.49 The co-ordinating Senior Social Worker (equivalent manager) who will chair the core group must ensure that those in attendance and those invited but unable to attend, receive copies of the adult protection plan being worked to and a copy of the minutes within 5 working days of the meeting.

## Timescales

- 3.50 The first core group should meet no later than **2 weeks** from the adult protection planning meeting being held. Thereafter core groups should be held no later than **4 weekly** until the LSI Review Meeting.
- 3.51 Where risk has increased the Senior Social Worker (equivalent manager) may wish for more frequent core group meetings to take place.
- 3.52 Any member of the core group can also request an additional core group meeting to consider new information. The relevant senior social worker (equivalent manager) should be notified of this request and decide on whether to grant or not this request. If the request is refused the core group member must be advised in writing that he/she can appeal this decision by writing to the locality social work manager.
- 3.53 The core group held 10 weeks after the adult protection planning meeting will be the core group which evaluates the effectiveness of the adult protection plan and submits a written update (including a copy of the most up to date plan) to the LSI review meeting . The LSI review should take place no more than two weeks after this core group meeting has taken place.
- 3.54 Any deviation of the above timescales must be recorded and circulated to the chairperson of the Planning Group.

## **Additional LSI core group meetings**

- 3.55 Each core group must review the adult protection plan being worked to, and as part of this review, consider
- implementation of the adult protection plan to date
  - any protective/risk factors identified
  - if outcomes identified are being achieved/not being achieved (if not consider why not and what needs to be changed to meet the outcomes)
  - what tasks need to be undertaken (and by whom) in order to work towards agreed outcomes
  - if there is a need to recommend to the locality social work manager that a LSI review meeting is required because of a significant deterioration in the adults circumstances or the service.

Should the core group recommend that there needs to be a LSI review meeting convened as soon as possible, it must not preclude action to safeguard the adult(s) e.g. protection order.

- 3.56 The co-ordinating Senior Social Worker (equivalent manager) who will chair the core group must ensure that those in attendance and those invited but unable to attend, receive copies of the adult protection plan being worked to and a copy of the minutes within 5 working days of the meeting.
- 3.57 A copy of core group minutes must also be given to the locality social work manager (Chairperson of the LSI planning group).

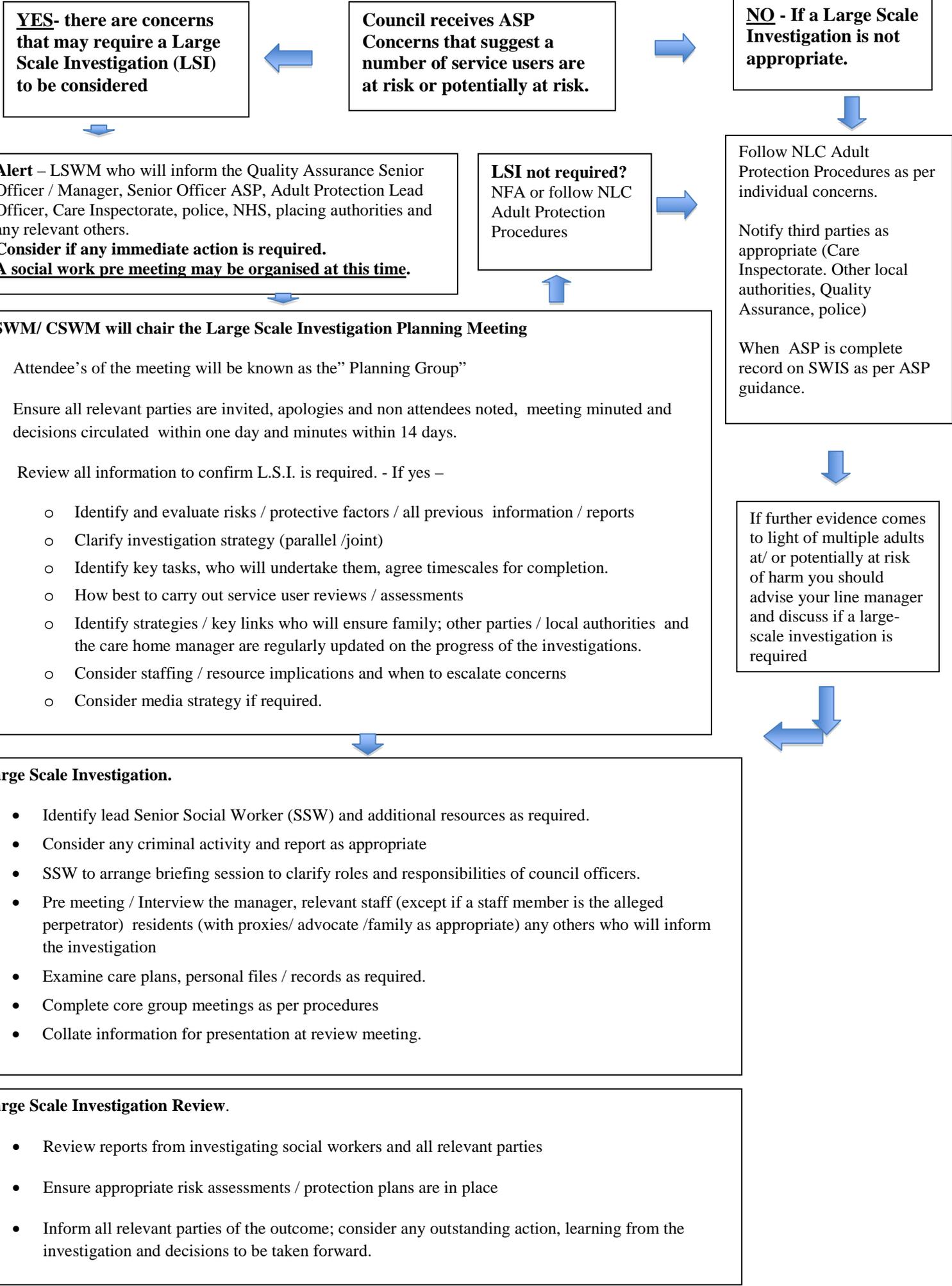
## **Large Scale Investigation Review Meeting**

- 3.58 A large scale investigation review meeting should be convened no later than 3 months from the initial LSI planning meeting and where possible chaired by the lead officer who chaired the initial planning meeting.
- 3.59 Those invited to the original planning meeting should also be invited to the review meeting along with any additional relevant parties who may contribute to effective decision making.
- 3.60 Representation of the management of the managed care service should be invited to attend the meeting. Due to the nature of the deliberations / discussions it may be appropriate for them to attend only part of the proceeding, this will be at the discretion of the chairperson.
- 3.61 The chairperson will set the agenda (App 6) to help frame the deliberations.
- 3.62 The Review Meeting will:
- Consider reports from investigating council officers, Police Scotland, Care Inspectorate and any other relevant information
  - Ensure that appropriate Risk Assessments have been completed and Risk Management Plans are in place
  - The action plan is specific in regards to those responsible and the timescales for implementation.
  - Agree core group membership and further meeting dates if required
  - Agree any outstanding actions and date of next review (where required).

- 3.63 If there is no evidence of improvement this information must be escalated to Head of Community Care and any other senior managers involved in the LSI for further action.

### **Final Large Scale Investigation Review Meeting**

- 3.64 The LSWM of the area carrying out the investigation must complete a final report (App 7) summarising the process and outcome of the investigation, including an action plan which identifies if any further action is required.
- 3.65 A copy of this report must be sent to the Head of Community Care, Manager, Quality Assurance and Senior Officer Adult Protection before submission to the LSI review meeting
- 3.66 Once the report has been agreed a final LSI review meeting should be convened and the report and action plan shared with all relevant parties. It will also be agreed by the Planning Group if the LSI is concluded or if further action is required under adult protection.
- 3.67 Large scale investigations may have wider implications for local and national policy and practice. Where these are identified by the Planning Group but have not been dealt with through other processes (e.g. local management reviews, multi-agency Significant Case Reviews, etc), the Planning Group should make recommendations, by way of an action plan, to the Adult Protection Committee.



**YES- there are concerns that may require a Large Scale Investigation (LSI) to be considered**

**Council receives ASP Concerns that suggest a number of service users are at risk or potentially at risk.**

**NO - If a Large Scale Investigation is not appropriate.**

**Alert – LSWM who will inform the Quality Assurance Senior Officer / Manager, Senior Officer ASP, Adult Protection Lead Officer, Care Inspectorate, police, NHS, placing authorities and any relevant others.**  
**Consider if any immediate action is required.**  
**A social work pre meeting may be organised at this time.**

**LSI not required? NFA or follow NLC Adult Protection Procedures**

Follow NLC Adult Protection Procedures as per individual concerns.

Notify third parties as appropriate (Care Inspectorate. Other local authorities, Quality Assurance, police)

When ASP is complete record on SWIS as per ASP guidance.

**LSWM/ CSWM will chair the Large Scale Investigation Planning Meeting**

- Attendee’s of the meeting will be known as the” Planning Group”
- Ensure all relevant parties are invited, apologies and non attendees noted, meeting minuted and decisions circulated within one day and minutes within 14 days.
- Review all information to confirm L.S.I. is required. - If yes –
  - Identify and evaluate risks / protective factors / all previous information / reports
  - Clarify investigation strategy (parallel /joint)
  - Identify key tasks, who will undertake them, agree timescales for completion.
  - How best to carry out service user reviews / assessments
  - Identify strategies / key links who will ensure family; other parties / local authorities and the care home manager are regularly updated on the progress of the investigations.
  - Consider staffing / resource implications and when to escalate concerns
  - Consider media strategy if required.

If further evidence comes to light of multiple adults at/ or potentially at risk of harm you should advise your line manager and discuss if a large-scale investigation is required

**Large Scale Investigation.**

- Identify lead Senior Social Worker (SSW) and additional resources as required.
- Consider any criminal activity and report as appropriate
- SSW to arrange briefing session to clarify roles and responsibilities of council officers.
- Pre meeting / Interview the manager, relevant staff (except if a staff member is the alleged perpetrator) residents (with proxies/ advocate /family as appropriate) any others who will inform the investigation
- Examine care plans, personal files / records as required.
- Complete core group meetings as per procedures
- Collate information for presentation at review meeting.

**Large Scale Investigation Review.**

- Review reports from investigating social workers and all relevant parties
- Ensure appropriate risk assessments / protection plans are in place
- Inform all relevant parties of the outcome; consider any outstanding action, learning from the investigation and decisions to be taken forward.

## FORM AP1

### Adult Protection Referral Form & Actions ( AP1) ALL AGENCIES

**All agencies use the AP1 with the exception of the Police who will use their own Referral Form at Appendix 8**

- *You must immediately report suspected or actual harm to your line manager and you have a legal duty to report any concerns to the Council Social Work Services if it is known or believed that a person is an adult at risk and that protective action is needed.*
- *All sections of **Part A** of the Referral Form require to be completed within **1 Normal Working Day** from the time of adult at risk consent or decision that there is sufficient evidence to prove a lack of capacity to consent.*

**NB:** - If you do not have all the information required in **Part A** please do not delay and send the Referral information you have. Social Work Services will follow up on your referral and add any additional relevant and required information.

#### Part A

#### 1. ADULT AT RISK DETAILS:

Name:

Date of Birth:

Social Work number:

Agency reference number:

Address:

Post Code

Tel number

Gender:

Ethnic Origin:

Religion:

Any known communication difficulties: YES/NO

If YES, please provide details including aids to communication that the adult may use

Living situation, e.g. lives alone, with spouse etc., type of accommodation, any known supports, caregivers there details. etc

#### 2. REFERRAL DETAILS

Name of referrer:

Address:

Telephone number:

Email Address:

Relationship to the adult being referred:

Is it suspected that a crime has been committed and have the police been informed?  
( date & time and any actions taken)

<b>Who else have you informed of this referral to Social Work Services? ( date &amp; time and any actions taken)</b>	
<b>DETAILS OF THE SITUATION LEADING TO REFERRAL?</b> (to include details of any specific incidents – dates, times, injuries, witnesses, evidence such as bruising)	
<b>Do you believe the adult at risk is capable of understanding what has happened to them?</b>	
<b>Have you obtained the adult at risk consent to make this referral? If not please give the reason for referring without consent.</b>	
<b>What action, other than this referral, have you taken to ensure the adult at risk is now safe?</b>	
<b>GENERAL PRACTITIONER:</b>	
<b>Name:</b>	
<b>Telephone No:</b>	
<b>Address:</b>	
<b>OTHER HEALTH PROFESSIONALS KNOWN TO BE INVOLVED:</b>	
<b>Name/s:</b>	<b>Contact No/s:</b>
<b>Details of person's physical and mental health as known to Health Professional:</b> <i>Confidentiality is important but for the purposes of allowing Councils to undertake the required inquires and investigations information to protect an adult at risk of harm relevant information</i>	

*should be shared. Please refer to your agencies procedures under Adult Protection Law.*

**ADULT AT RISK LEGAL STATUS AT TIME OF REFERRAL e.g. MHCTA, AWI, CHILD CARE LEGISLATION**

**DETAILS OF THE ALLEGED ABUSER – WHERE KNOWN**

**Name**

**Relationship to person**

**Address**

**DETAIL OF ANY PREVIOUS CONCERN/INCIDENT**(to include dates, times, actions taken and outcomes)

**Referrer Signature**

**Print Name**

**Date**

**SECTION B**

**ACTION TO BE TAKEN BY SOCIAL WORK SERVICES ON RECEIPT OF REFERRAL**  
**Within 5 days of receiving a written referral on Form AP1 the following actions MUST be completed by Social Work Services as the lead agency.**

**Letter of acknowledgement to be sent immediately to referrer /organisation.**

Form AP1 received ( date):-

Form AP1, letter of acknowledgment sent (date):-

**Referrer/Organisation to be advised in writing of the initial outcome of their referral**

Advised (date):-

**Referrer/Organisation to be invited to any subsequent adult protection meetings held by Social Work Services**

<b>Case Conference must be arranged within 10 days of receipt of referral to Social Work.</b>
Invitation to Adult Protection Case Conference YES/NO (date sent):-  Date of Case Conference:-
<b>Enquire &amp; Complete any missing information not provided in Part A</b>
Completed: (date)  Reasons for non completion:-
<b>ACTION - NO HARMFUL CONDUCT/CONCERNS</b>
i.e. - Refer on to an appropriate agency/review existing care plan/ consider other adult legislation/ action taken and give reasons :-
<b>ACTION - YES HARMFUL CONDUCT /CONCERNS</b>

i.e. – Immediate Adult Protection Order sought/Investigate Further / Case Conference arranged and give reasons:-

<b>Note Primary Category of Referral</b>	<b>Note Primary Category of Referrer</b>
<b>Category is :-</b>	<b>Category is:-</b>
<b>Codes</b>	<b>Codes</b>
A. Physical Injury	1. Social Work Statutory Staff in Council
B. Sexual Abuse	2. Staff at Council Residential Establishment
C. Physical Neglect	3. Staff at Council Day Care Establishment
D. Financial or Material Abuse	4. Home Carer ( Council)
E. Emotional /Psychological Abuse	5. Housing in the Council
F. Neglect and acts of Omission by others charged with adult at risks care	6. Police
G. Self Neglect	7. GP/ Member of Primary Care Team
	8. Hospital Medical Staff/ Registrar/ Consultant/ /Nurse
	9. Clinical Psychologist/Psychiatrist
	10. Community Mental Health Team/Nurses/Doctors/ MHO
	11. Substance Misuse Team
	12. Parent/Carer/ Guardian
	13. Neighbour/Friend
	14. Other ( Please Specify)

<b>All information from AP1 Form to be transferred to Councils Assessment &amp; Care Management IT Screens or held in Council Case Files. Information gained from Police Referral Form also to be recorded.</b>	<b>Date Completed :-</b>
---	--------------------------

<b>ALL QUESTIONS COMPLETED AND ACTION DECISION RECORDED ON INITIAL REFERRAL</b>
<b>Manager's Signature</b>
<b>Print Name</b>
<b>Date</b>

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## Appendix 2 – Notification of concern form

Internal notification to Quality Assurance Section of reportable incidents, protection issues or complaints regarding independent sector services



### Guidance note for completion:

1. You may need to change the view of this form to 'print layout' to see it properly.
2. Before you start to complete the form, save a copy to an appropriate drive (such as an i: drive).
3. Ensure that you complete all sections of this form.
4. Either save the form and email it to [QualityAssurance@northlan.gov.uk](mailto:QualityAssurance@northlan.gov.uk) or print off and post a copy to the address at the end of the form.

1.	Referring locality team/service:	
2.	Nature of report:	Please tick as appropriate
		<input type="checkbox"/> serious incident <input type="checkbox"/> protection issue
		<input type="checkbox"/> formal complaint <input type="checkbox"/> informal complaint/concern
3.	Name and address of service involved:	
4.	Description of service being provided:	
5.	If service user involved please enter name and mySWIS number:	
6.	If service user specific provide date service commenced:	
7.	If service user specific provide date of last review:	

8.	<b>Name, address, job title and telephone number of referrer:</b>	
9.	<b>Referrer relationship with service user or service:</b>	
10.	<b>Describe circumstances of incident, issue, complaint or concern and include date(s):</b>	
11.	<b>Describe action, if any, taken by the service provider taken and the outcome?</b>	
12.	<b>State whether matter was brought to the attention of any statutory body e.g. Care Inspectorate, Mental Welfare Commission. If yes, provide details and information on any outcome:</b>	<p><i>Please tick as appropriate</i></p> <p><input type="checkbox"/> <b>Yes</b>                      <input type="checkbox"/> <b>No</b></p>

13.	<p><b>Please provide brief details of action taken or intended by the locality team. This should include adult protection, child protection actions:</b>  <i>(append further sheet if necessary)</i></p>	
14.	<p><b>Details compiled by:</b>  <i>(name)</i></p>	
	<p><b>Designation:</b></p>	
	<p><b>Phone number:</b></p>	
	<p><b>Countersigned by:</b>  <i>(name)</i></p>	
	<p><b>Designation:</b></p>	
	<p><b>Phone number:</b></p>	
	<p><b>Date:</b></p>	
	<p><b>Date forwarded to Quality Assurance Section:</b></p>	

Completed forms and accompanying documentation should be forwarded by email to [QualityAssurance@northlan.gov.uk](mailto:QualityAssurance@northlan.gov.uk) or posted to:  
**Planning & Quality Assurance Section**  
**Social Work Headquarters**  
**Scott House**  
**73/77 Merry Street**  
**Motherwell ML1 1JE**

For telephone enquiries or advice please contact the Quality Assurance Team on 01698 332084

### Appendix 3 – Details of adult not known

Where individual service users are not yet identified or their details are unclear the organisations details and areas of concern should be recorded and kept for reference until further inquiries are completed.

Date:	Co-ordinating Senior's Name:	Locality:
Name of Organisation:		
Address:		
Telephone Number:	Contact Person:	
Name of referrer (if different from above):		
Address:		
Telephone Number:		
Nature of Concern:		
Action to Date:		

## Appendix 4– Care Home / Adult Review Form

Large Scale Investigation Review Form			
Name of Care Setting/ Provider			
Social Work Manager			
Council Officer			
Details of Adult			
Surname	Forename	Date of Birth	Record Number
Funding details of the adult at risk			
Funded by social work <input type="checkbox"/>	Funded by other local authority <input type="checkbox"/>	Continuing health care funding <input type="checkbox"/>	Self funding <input type="checkbox"/>
Capacity: Yes <input type="checkbox"/> No <input type="checkbox"/>		Consent to Interview: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Next of Kin / Proxy			
Surname	Forename	Subject to POA	Subject to Guardianship
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Information Gathered			
Is the person an “Adult at Risk” as defined in the ASP Act 2007	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Is the abuse perpetrated by a third party	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Is there actual, or risk of, significant harm	Actual	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Risk	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you recommending further action via ASP Procedures:	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Reason :			
Are you recommending a review only take place, if so please complete the next page	Yes <input type="checkbox"/> No <input type="checkbox"/>		

<b>Risks Identified at this stage to adult.</b>	<b>Details of risks:</b>
<b>Large Scale Investigation Review Form</b>	
<b>Name of Care Setting/ Provider</b>	
<b>Action Taken</b>	
<b>Protective Factors in Place:</b>	
<b>Other specialist protocols considered (e.g. Pressure area protocols, Falls protocols, AWI, MHA etc)</b>	<b>Detail protocols considered:</b>
<b>Recommendation to the L.S.I. Core Group:</b>	
<b>Council Officer's Signature</b>	
<b>Managers Signature</b>	

**Appendix 5 – Details and Legal Status of all adults resident / supported by (name of service)**

Adults Name	Placing Authority Details	Active Legal Status.	Proxies Contact Details	Comments
		P.O.A. / Guardianship Order / Mental Health / other	Name, Address, Contact number	

## Appendix 6 – LSI Review agenda guidance

A review case conference should be held within **3 months** of the initial LSI planning meeting and regularly for the duration of the LSI. While the purpose of the review case conference is to:

- Summarise support and outcomes to date and to confirm the current situation.
- Consider the recommendations of the core group, if one is appointed
- Review risk management plans and establish current level of risk.
- Ensure agreed duties and responsibilities across partner agencies have been fulfilled and agree any remedial action where a shortfall has been identified.
- Review and if necessary up-date the protection plan and associated service provision.
- Ensure any intervention or legal powers exercised in relation to the Principles remains proportionate and are the least restrictive option in terms of maximising benefit and offering effective protection.

**It is important that participants who are invited to the meeting are clear from the initial invitation of what is expected of them as representatives of their organisation and the information they are expected to bring or forward to the review. This should also be included in the agenda.**

### For example

**Individual reports submitted / circulated prior or at the meeting**—(*which will be submitted from agencies giving their apologies.*)

**Update reports from all agencies in attendance.** (*to ensure they are prepared and can't say they were unaware of their role*)

**Core group report and updated plan.**

Appendix 7

**North Lanarkshire Council  
Housing and Social Work Services**

**Adult Support and Protection**

**Large Scale Investigation Report**

<b>Name and address of service</b>	
<b>Areas of harm being investigated</b>	
<b>Date of final report</b>	
<b>Investigative Officers / agencies involved</b>	<i>(Starting with lead officer)</i>

## Section 1 – Introduction and Background

<p><b>Introduction</b></p>	<p><i>This large scale investigation was commissioned at the request of LSWM name / chair of the planning group on Date</i></p> <p><i>The purpose of this large scale investigation is to explore and report on relevant factors relating to adult protection concerns raised by (name of referrer(s) and relate to (number of adult at risk) within (name of service).</i></p> <p><i>(chronology of events should be attached as an appendix)</i></p>
<p><b>Background and summary of incident(s)</b></p>	<p><i>Brief account of the lead up to the LSI, the organisation involved, how many adults involved in the investigation and potentially those not involved. What immediate action has been taken e.g. suspensions, internal investigation / disciplinary action,</i></p> <p><i>Other agencies involved e.g. Care Inspectorate, NHS , financial, solicitors etc</i></p>
<p><b>Outline of investigation process</b></p>	<p><i>This investigation was carried out following adult protection concerns reported to North Lanarkshire Social Work Services: e.g.</i></p> <p><i>review of agency records (social work, health, care setting etc) for the period of (dates start - finish)</i></p> <p><i>A review and application of relevant policies, procedures and legislative responsibilities.</i></p> <p><i>Regular planning meeting, core group meetings and review meetings took place (see appendix ? )</i></p> <p><i>(Any additional information required)</i></p>
<p><b>Allegations</b></p>	<p><i>Main areas investigated were:</i></p> <p><i>Allegation 1 – adults (name, ref or initials)– allegation of harm – action taken – outcome</i></p> <p><i>Allegation 2 –</i></p> <p><i>Allegation 3-</i></p>

## Section 2 – Analysis and Findings

*Pull together the salient points of the investigation in a way which makes it clear for the commissioning manager to follow the information provided and to understand its significance. Some headings may include clarity around issues of: medication, falls, financial harm, assessment & care management, mental health, communication etc.*

**Conclusions:** *This may draw wider considerations e.g. need for service / staff improvement, change in policy / procedures, escalation of concerns etc.*

**Section 3 - Recommendations and action plan**

Recommendation	Agreed Action	Lead Person(s)	Timescales	Progress Update

