

Section 42 Provider Enquiry Template

Local authorities must make enquiries, or cause others to do so, if they reasonably suspect an adult who meets the care act criteria is, or is at risk of, being abused or neglected

Name of Person at Risk:		
Address:		
NHS Number:		
Social Services ID Number:		
Mental Capacity Assessment carried out in relation to understanding the safeguarding incident: <i>(If yes, please enclose copy)</i>	YES	NO
Date of Mental Capacity Assessment:		
Other Decision's Assessed <i>(Please enclose a copy of the Mental Capacity Assessment)</i>		
Details of Concern reported:		

Risk Management

Immediate action taken to minimise risk to adult and other if applicable:

Views of Adult at Risk : *Please use appendix 1 when completing this section – in addition, if you identify that the adult 'has substantial difficulty' in being involved in the safeguarding process and the local authority has not arranged for an independent advocate to represent and support said person, please ensure one is made available.*

Duty of Candour:

(Evidence of openness and transparency in the enquiry process. Responsibility to inform a person or advocate/appropriate family members that there is an enquiry being undertaken under Section 42 of the Care Act and to clearly understand their views and the outcomes they want)

Medical Background of Person (if applicable) :

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Details of Alleged Person Causing Harm

Name of Alleged Person Causing Harm:	
Date of Birth:	
Relationship to adult at risk:	
Outcome of Enquiry for alleged person causing harm: <i>What action has been taken, was a referral made to the Disclosure and Barring Service or professional body?</i>	

Details of the Enquiry

Overview of the process taken and whether this has been evidenced:

(List of record checked- daily logs, incidents/accident logs, procedure and policy checks, care plans, training and supervisions)

Enquiry Conclusion

Outcomes from Enquiry

(Please record your findings and rationale for decision making and actions taken. The person/advocate is consulted about the outcome they want from the enquiry and it is recorded whether this outcome was met. The person/advocate is included and kept up to date with the enquiry)

Lessons Learnt

(Lessons learnt are clearly documented with actions and timescales to address any further issues)

Risk Reduced	<input type="checkbox"/>	Fully Upheld	<input type="checkbox"/>
Risk Remains	<input type="checkbox"/>	Partially Upheld	<input type="checkbox"/>
Risk Removed	<input type="checkbox"/>	Not Upheld	<input type="checkbox"/>
		Enquiry ceased at adults request	<input type="checkbox"/>

Adult at risks views

What risks remain for the adult(s) and how are these to be managed?

Other risks identified and action taken?

Name of Professional allocated to carry out the Section 42 Enquiry:

Contact Details:

Name and Role of Line Manager

Contact Details:

Name of the Organisation you work for:

Contact Details:

Date Enquiry Report sent to Safeguarding Adults Team:

(Please email securely to team with relevant documentation including a copy of the Safeguarding Adult Concern Form)

Copies of this report distributed to: *Please discuss with the LA Safeguarding Adult Safeguarding team prior to any distribution, to establish what information should be shared with whom. Discussion may involve who will do this*

Appendix I: Making Safeguarding Personal Template

Pre-enquiry evaluation: Please discuss the issues below with the person at risk, If that person does not have capacity please discuss with their friend, relative or advocate.

Think about your current situation how happy/safe do you feel? <i>Very happy/safe</i> <i>Quite happy/safe</i> <i>Quite unhappy/unsafe</i> <i>Very unhappy/unsafe</i> <i>Don't know</i>										
Thinking about the above, on a scale of 1-10 where 1 is very happy/safe and 10 is very unhappy/unsafe, how would you rate yourself?	1	2	3	4	5	6	7	8	9	10
Who/what is important to you and why?										
What is working and what is not working?										
How does that make you feel?										
What do you hope to get out of the Safeguarding Enquiry?										
How can you change the things that aren't working, who can help?										
What has been agreed that can be achieved through the Safeguarding process?										

Appendix II: Adult Safeguarding Enquiries

Adult Safeguarding Enquiries

Care Act 2014 Section 42 Guidance

The local authority has a statutory duty to make enquiries, or cause others to do so, if they reasonably suspect an adult who has care and support needs is at risk of being abused or neglected, and is unable to protect themselves.

The Care Act provides scope for the Adult Safeguarding Team to determine who or what organisation may be best placed to undertake enquiries. The Adult Safeguarding Team retains the responsibility to ensure that the enquiry is referred to the right place and is acted upon. The Adult Safeguarding Team in its coordinating role assures that any enquiry undertaken by another organisation satisfies the local authority duty under section 42 of the Care Act.

The objectives of an enquiry into abuse or neglect are to:

- Establish facts
- Ascertain the adults views and wishes
- Assess their needs for protection, support and address how they may be met
- Protect from the abuse and neglect in accordance with the wishes of the adult
- Make decisions as to what follow-up action should be taken with regard to the person or organisation responsible for the abuse or neglect
- Enable the adult to achieve resolution and recovery

When an enquiry is requested by the local authority, the agency will use their own internal investigation processes, such as, an incident investigation, serious incident, internal management review, HR procedures, complaints, root cause analysis. The Adult Safeguarding Team will request the outcome and a report within an agreed timescale. Referrals to professional regulatory bodies and the DBS must always be considered. The local authority and the CCG as commissioners require assurance that people have been safeguarded and appropriate action has been taken.

The Adult Safeguarding Team has developed an audit form to review section 42 enquiries undertaken by other organisations which is attached for your guidance.

The following six key principles apply to all sectors and settings and should underpin all adult safeguarding enquiries.

- Empowerment - supported and encouraged to make decisions
- Prevention – take action before harm occurs
- Proportionality – the least intrusive response appropriate to risk presented
- Protection – support and representation for those in greatest need
- Partnership – local solutions through services working with their community
- Accountability – accountability and transparency in delivering safeguarding

Well-being must be considered in all decisions; the well-being of an individual is paramount and is related to the outcomes that they seek for themselves. The first priority of the well being principle in safeguarding should be to consider:

- personal dignity
- physical, mental health and emotional well being
- protection from abuse and neglect
- control by the individual over day to day life
- participation in work, education, training or recreation
- social and economic well being
- domestic, family and personal relationships
- suitability of living accommodation
- the individuals contribution to society

Appendix III: Quick Guide to a Provider Led Enquiry

(This is a quick reference guide and not an exhaustive list)

Interview with the adult/s and others:

<ul style="list-style-type: none"> – Agree the focus of the enquiry, the actions and timescales with adult social care. – Arrange for the assessment interview of the adult/s be undertaken by the most appropriate person in the organisation. – Ensure that any decision to undertake an interview with the adult is discussed with the Police if there is any suspicion that a crime may have been committed. In the case of the crime, the Police will take the lead in all interviewing of adults at risk or witnesses. – Obtain consent of the adult to undertake an interview. – If necessary undertake an assessment of capacity if there is doubt about the adult's capacity to give consent to a safeguarding enquiry interview, and determine through 'best interests' if a safeguarding enquiry interview is proportionate. – Discuss issues of confidentiality and information sharing with the adult and if there are no others adults at risk, get permission to share information with other organisations as required. – If there are others at risk, inform the adult of the duty to share information to protect others – If the adult has mental capacity, reassure them that no decisions or plans which have an impact on their daily living arrangements will be made without their agreement to that decision – Where the adult has capacity, ensure their wishes are respected as to sharing of information with relatives and/or carers (unless there is a duty to override their decision) – Carry out a risk assessment with the adult if they have mental capacity to understand the risks and consequences 	<ul style="list-style-type: none"> – Identify who will keep the adult informed and what information will be shared with them – If the adult does not have mental capacity to make decisions about their safety, the person making the enquiry must continue to involve them and their advocate – Identify if the person needs advice, support, assistance or service – Produce a record of the interview with the adult/s and share this with the adult/s and their representatives and explain who the records will be shared with and why. – If the safeguarding enquiry interview reveals that a child or young person is living in the same household or is in regular contact with the person alleged to have caused harm and could be at risk, a referral must be made immediately to Children's Services or discussion with safeguarding team. – If the safeguarding enquiry interview reveals that the person alleged to have caused harm has regular contact with children in a paid or voluntary capacity, a referral must be made immediately to the Children's Local Authority Designated Officer. – Ensure the Adult knows how they will be supported and kept informed during the enquiry stage, including having an appropriate independent advocate. – During the enquiry the person undertaking the enquiry must keep Adult Social Care informed of the progress of the enquiry and of any information that could impact on the continued safety of the adult at risk of abuse or others who may be at risk. – Interview any staff who may have information to share that will help contribute towards the enquiry – Ensure that a record is made of any staff interviews
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Check and evaluate all relevant records:

<p><i>Check all relevant internal records i.e.;</i></p> <ul style="list-style-type: none"> – Care/support plans – Medication records – Staff rota's – Personnel records 	<p><i>There is a need to evaluate the evidence obtained from:</i></p> <ul style="list-style-type: none"> – Background reports, service records and previous histories – Witness statements from interviews – Any circumstantial evidence – An assessment of the extent and seriousness of the harm and the effect it has had on the adult and others in their network
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Links to other Processes:	
<ul style="list-style-type: none"> – Ensure that the Adult Social Care are made aware at the earliest point that HR Procedures have been instigated if staff are implicated – Ensure that Adult Social Care are made aware at the earliest point if complaints Procedures are Triggered – Ensure that Adult Social Care is made aware when decisions are made to refer to appropriate regulatory bodies – Ensure that Adult social Care are made aware when decisions are made to refer to the DBS 	<ul style="list-style-type: none"> – Duty of Candour
Action and Outcomes:	
<ul style="list-style-type: none"> – Contact with families as agreed with the person at risk or if the adult lacks capacity to make this decision, discuss what would be in their 'best interests' to explain what happened and why – Provide evidence of meeting Regulation 20 Duty of Candour (Registered Providers) – Demonstrate how whistle-blowers have been Supported – Identify measures to address practice and quality concerns – Describe what action has been taken i.e., Disciplinary, Referral to DBS – Outcomes from a Complaints Investigation, SIRI etc. 	<ul style="list-style-type: none"> – Identify whether the Provider should undertake any further information gathering to support the decision to undertake a Section 42 Enquiry – Produce a report for Adult Services (see template) which summarises action taken by the Provider to address presenting concerns – Have a clear plan for sharing information with adults, families and other agencies – Monitor the implementation of action plans including the effectiveness of any changes implemented following an enquiry and ensure that these are embedded across the whole organisation – Regularly review changes made as a consequence of learning from the enquiry
Identifying and Sharing Learning:	
<p>Could this incident have been avoided? Have you reviewed management and practice to protect adults in the future? Were other adults or staff at risk? Does the adult/s feel safer? Do families feel that the right action was taken to keep their relatives safe? Did you take the appropriate action at the right time? Did you receive the support you needed from other agencies?</p>	<ul style="list-style-type: none"> – Have risk assessments been undertaken? – Did you consider the needs/rights of adults at risk? – Have you recorded the actions taken appropriately? – Have you revised care/support plans and set reviews? – What have you learnt and what would we do differently next time?

Appendix IV: Quick Guide to a Provider Led Enquiry

Process	Criteria linked to process	Y/N	Comment/ Actions/ Guidance
General presentation	Person's name, date of birth and dates in relation to start date and finish dates recorded. All other names and contact details of who informed the enquiries recorded. Outline of the concern which has caused the enquiry.		
Risk assessment	Immediate action taken to minimise the risk to the adult and others where applicable. Explanation of what measures have been put in place to reduce future risks. Where applicable, rationale for how person causing harm remains fit to work and what measures are taken to provide assurance of this.		
Duty of Candour	Evidence of openness and transparency in the enquiry process. Responsibility to inform a person that they have been harmed by the provision of a care service and to offer an appropriate remedy regardless of whether a complaint has been made.		
Mental Capacity, and Consent	The person is involved in decision making. Advocate/family member support has been considered. Appropriate use of IMCA/ DoLS where required. The person must have an advocate if they lack mental capacity to understand the process of enquiry.		
Initial enquiries	Assurance that further safeguarding issues that come to light as a result of the enquiry, including those that require a response from the Police, are disclosed to the safeguarding team without delay.		

Process	Criteria linked to process	Y/N	Comment/ Actions/ Guidance
Safeguarding Plan	Have care and support plans been amended to reflect any changes and risks identified and mitigated.		
Outcome focused and person centred	The person/advocate is consulted about the outcome they want from the enquiry and it is recorded whether this outcome was met. They are included and kept up to date with the enquiry.		
Lessons Learnt	Lessons learnt are clearly documented with actions and timescales to address any further issues.		