



Protocol for responding to concerns about a person in a position of trust working with adults (PiPoT)

Worcestershire Safeguarding Adults Board

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Consultation

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West Midlands Adults Safeguarding Policy and Procedures

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1.0 Introduction

1.1 It is a requirement of the Care Act 2014 Statutory Guidance that Safeguarding Adults Boards should establish and agree a framework and process for any organisation to respond to allegations against anyone who works, (in either a paid or an unpaid capacity,) with adults with care and support needs. In this document this framework and process is referred to as the “Protocol”.

1.2 This Protocol applies to all partner agencies of Worcestershire Safeguarding Adults Board (WSAB), and organisations commissioned to provide services by them, so they respond appropriately to allegations against people who, whether an employee, volunteer or student, paid or unpaid, works with or cares for adults with care and support needs. These individuals are known as People in a Position of Trust (PiPoT).

1.3 WSAB requires its partner agencies to be individually responsible for ensuring they adopt the principles of this Protocol and maintain clear organisational procedures for dealing with PiPoT concerns.

1.4 WSAB also requires partner agencies and the service providers they commission to identify a designated PiPoT lead or contact to oversee the delivery of responsibilities in their organisation.

1.5 Partner agencies and the service providers they commission are individually responsible for ensuring that information relating to PiPoT concerns are shared and escalated outside of their organisation in circumstances where this is *required, proportionate and appropriate*. They are responsible for making the judgment that this is the case in each instance where they are the data controller.

1.6 This Protocol is designed to inform and support the decision making processes of partner agencies and their commissioned services once they become aware of a PiPoT concern arising from whatever source.

1.7 Each partner agency, will provide assurance to the WSAB to provide assurance that the PiPoT arrangements within their organisation are functioning effectively, when this is requested. The WSAB will in turn maintain oversight of whether these arrangements are considered to be working effectively between and across partner agencies in the city. Appropriate cross organisational challenge is an important part of this.

1.8 The Care Act 2014 Guidance also requires that partner agencies and their commissioned services should have clear recording and information-sharing guidance, set explicit timescales for action and are aware of the need to preserve evidence.

1.9 This Protocol applies whether the allegation relates to a current or an historical concern.

1.10 The WSAB partner agency (or organisation commissioned by them to provide a service) who first identifies or becomes aware of an allegation or concern will be the Primary Data Controller, or the “owner” of the information, and will have first responsibility for responding in accordance with this Protocol.

1.11 This Protocol should be read in conjunction with latest version of West Midlands Adult Safeguarding Policy and Procedures.

1.12 The Protocol is designed to ensure that if information is shared or disclosed it is done so in accordance with the law but in such a way that allows appropriate and proportionate enquiries to be made that ensures adults with care and support needs are protected and public confidence in services is maintained.

1.13 This Protocol is not a substitute for, but may be used in conjunction with, other formal legal processes; for example Multi-Agency Risk Assessment Conference (MARAC), Multi-agency public protection arrangements (MAPPA) etc.

2.0 SCOPE

2.1 This Protocol must be followed in all cases by the organisation which first becomes aware of a concern, where information (whether current or historical) is identified in connection with:

2.1.1 The PiPoT's own work / voluntary activity with Adults and / or Children (for example where a worker or volunteer has been accused of the abuse or neglect of an adult with care and support needs or a child).

2.1.2 The PiPoT's life outside work i.e. concerning adults with care and support needs in the family or social circle (for example where a son is accused of abusing his older mother and he also works as a domiciliary care worker with adults with care and support needs. Or where a woman is convicted of grievous bodily harm and also works in a residential home for people with learning disabilities).

2.1.3 The PiPoT's life outside work i.e. concerning risks to children, whether the individual's own children or other children (for example where a woman is employed in a day centre for people with learning disabilities but her own children are subject to child protection procedures as a result of emotional abuse and neglect).

And the person has:

2.1.4 Behaved in a way that has harmed or may have harmed an adult with care and support needs.

2.1.5 Possibly committed a criminal offence against or related to an adult with care and support needs.

2.1.6 Behaved towards an adult with care and support needs in a way that indicates s/he is unsuitable to work with adults with care and support needs.

2.1.7 Behaved in a way that has harmed children or may have harmed children which means their ability to provide a service to adults with care and support needs must be reviewed.

2.1.8 May be subject to abuse themselves and as a consequence means their ability to provide a service to adults with care and support needs must be reviewed.

2.1.9 Behaved in a way which questions their ability to provide a service to an adult with care and support needs which must be reviewed e.g. conviction for grievous bodily harm

against someone who is not an adult with care and support needs.

2.2 Children - whilst this Protocol is concerned with potential harm to adults with care and support needs, if the allegation is such that there is a concern that the person may also pose a risk to children, then Children's Services must be informed. It is everyone's duty to refer any current and historical allegations of abuse against children to Children's Services, whether the alleged perpetrator is a PiPoT or not. Concerns about children should be referred to the Family Front Door.

3.0 HOW MIGHT A CONCERN ABOUT A PIPOT BE IDENTIFIED?

Concerns about a PiPoT's behaviour may be identified by the following people / procedures:

- Police intervention or investigation
- Whistleblowing disclosure
- Safeguarding adults enquiry
- Safeguarding children investigation
- Complaints
- Reports from members of the public
- Providers alerting commissioners of services
- Commissioner's contract monitoring activity
- Reports from staff and volunteers
- Or any other source of disclosure

4.0 WHOSE RESPONSIBILITY IS IT TO RESPOND WHERE A PIPOT CONCERN IS IDENTIFIED?

4.1 As stated in 1.1, the WSAB partner agency (or service provider they commission) who first becomes aware of an allegation or concern will be the Primary Data Controller, or owner of the information. They have first responsibility for taking the appropriate action in line with this Protocol.

5.0 WHAT SHOULD THAT RESPONSE BE?

5.1 Any allegation against people who work with adults with care and support needs should be reported immediately to a senior manager within that organisation and their PiPoT Lead.

5.2 If the Local Authority, Police or CCG is given information about an allegation against a PiPoT, they should give careful consideration to what information should be shared with employers (or student body or voluntary organisation) so that a suitable response is made, in line with the principles outlined at 1.12.above, Section 6, and Section 7.1 below.

5.3 The person responsible for investigating the allegation of concern about the PiPoT must, on the information provided, determine if the situation is a position of trust concern or if other procedures should be used. (See Appendix 2 for Factors to Consider Chart as a suggested tool to help in this process).

5.4 A detailed record of the concern and the steps taken in response must be kept (see Appendix 3 for a suggested template example and Section 8 for further information on recording).

5.5 Where the person responsible for investigating the allegation of concern about the PiPoT and / or the PiPoT Lead concludes the concern *does not* meet the definition of a PiPoT concern (see 2 above), the PiPoT Lead will make a record of the discussion and decision and the reasons for this conclusion. These details could be drawn upon if further concerns come about in relation to a PiPoT.

5.6 Where the person responsible for investigating the allegation and / or the PiPoT Lead concludes the concern *does* meet the definition of a PiPoT concern (see 2 above), appropriate action **must** be taken in line with Section 5.

5.7 Where PiPoT concerns are identified by partner agencies or services they commission about their employee or volunteer, it will be necessary for the employer (or student body or voluntary organisation) to assess any potential risk to adults with care and support needs who use their services and, if necessary, to take action to safeguard those adults. If the employer (or student body or voluntary organisation) is aware of abuse or neglect in their organisation, then they have a duty to correct this and protect the adult with care and support needs from harm as soon as possible and inform the local authority in accordance with the *Multi-agency policy & procedures for the protection of adults with care & support needs in the West Midlands* and CQC (if a regulated care provider).

5.8 They also have a duty to consider what support and advice they will make available to their staff or volunteers against whom allegations have been made. Any PiPoT about whom there are concerns should be treated fairly and honestly. Their employer has a duty of care towards them.

5.9 If the PiPoT is removed by either being dismissed or permanently redeployed to a non-regulated activity because they pose a risk of harm to adults with care and support needs, the employer (or student body or voluntary organisation) has a **legal duty** to refer the person to the Disclosure and Barring Service. In addition, where appropriate, employers should report workers to the statutory and other bodies responsible for professional regulation such as the General Medical Council and the Nursing and Midwifery Council.

5.10 If a person subject to a PiPoT investigation attempts to leave their employment by resigning in an effort to avoid the investigation or disciplinary process, the employer (or student body or voluntary organisation) is entitled not to accept that resignation, conclude whatever process has been utilised and, if the outcome warrants it, dismiss the employee or volunteer instead. This would also be the case where the person intends to take up legitimate employment or a course of study.

5.11 Employers, student bodies and voluntary organisations should have their own sources of advice (including legal advice) in place for dealing with such concerns.

5.12 Appendix 1 demonstrates diagrammatically how PiPoT concerns should be managed.

6.0 INFORMATION SHARING

6.1 The default position should be that the owner of the information about a PiPoT should not share it without the PiPoT's knowledge and permission so they are given the opportunity to share the information with their employer first. If the PiPoT declines to share it with their employer for whatever reason, this does not mean the information cannot be shared by the data controller. In deciding whether to nevertheless share the information with an employer or voluntary organisation, the principles in this section (Section 6) should be followed.

6.2 If the PiPoT asks the data controller not to share the information, a decision must be made by the data controller, in line with the principles contained within this Protocol, whether to agree. If it is agreed that information will not be shared, this must be qualified since it may be the case that more detail comes to light to change this decision. If a decision is made at a later date to share information, the PiPoT should be consulted again and given a further opportunity to disclose the information him or herself if it is appropriate to do so. Again, the data controller could, following the principles for disclosure in this section (Section 6) decide to share the information even if the PiPoT decides not to. All decisions to share or not share information, and their rationale should be clearly recorded.

6.3 In each case involving an allegation against a PiPoT, a balance has to be struck between the duty to protect people with care and support needs from harm or abuse and the effect upon individuals of information about them being shared (for example, upon the person's Article 8 Human Rights (the right to private and family life).

6.4 For these reasons each case must be considered on its own merits and personal data shall be processed in accordance with the principles contained in Part I of Schedule 1 of the Data Protection Act 1998 ("the DPA").

6.5 Due regard must be had to Article 8 of the European Convention on Human Rights, which states that: *Everyone has the right to respect for his private and family life, his home and his correspondence. And There shall be no interference by a public authority with the exercise of this right except such as is in accordance with the law and is necessary in a democratic society in the interests of national security, public safety or the economic well-being of the country, for the prevention of disorder or crime, for the protection of health or morals, or for the protection of the rights and freedoms of others.*

6.6 When deciding whether to interfere with a person's Article 8 rights, each case must be judged on its own facts. The issue is essentially one of proportionality. Information is to be disclosed only if there is a "pressing need" for that disclosure. In considering proportionality, consideration must be given to the following general principles:¹

6.6.1 The legitimate aim in question must be sufficiently important to justify the interference

6.6.2 The measures taken to achieve the legitimate aim must be rationally connected to it

6.6.3 The means used to impair the right must be no more than is necessary to accomplish the objective

6.6.4 A fair balance must be struck between the rights of the individual and the interests of the community; this requires a careful assessment of the severity and consequences of the interference².

6.7 "There is a general presumption [which is not absolute] that information should not be disclosed, such a presumption being based upon a recognition of (a) the potentially serious effect on the ability of [in this case convicted people] to live a normal life; (b) the risk of violence to such people and (c) the risk that disclosure might drive them underground."³

6.8 Before actually disclosing information to a third party, there is a need to consult with the person whose information is to be disclosed and to give them an opportunity of making representations before the information is disclosed.⁴ “[T]he imposition of such a duty is a necessary ingredient of the process if it is to be fair and proportionate.”⁵

6.9 Information may be shared by an individual or an agency in the expectation that it will not be shared with others; i.e. it will be kept confidential. Often, a person will preface the disclosure with ‘I am telling you this in confidence’ or, after making the disclosure, will say ‘you won’t tell anyone will you?’ However, no blanket agreement not to share information with others must be given. Confidential information can be shared if it is justified as being in the public’s interest (e.g. for the detection and prevention of crime and for the protection of vulnerable persons, i.e. children or adults with care and support need at risk of harm or neglect). It is a matter for professional judgment, acting in accordance with information sharing protocols and the principles of the DPA to decide whether breaching a PiPoT’s confidentiality is in the public’s interest.

¹ *R (on the application of H) v A City Council* [2011] EWCA Civ 403

² *Huang v Secretary of State for the Home Department, Kashmiri v Same* [2007] UKHL 11, [2007] 2 AC 167, para [19]

³ *R v Chief Constable of North Wales Police and Others (ex parte Thorpe and Another)* [1999] QB 396, p409

⁴ *R (L) v Commissioner of Police of the Metropolis (SoS for the Home Department intervening)* [2010] 1 AC 410

⁵ *Ibid* per Lord Neuberger (para [84])

6.10 If after following the above principles, and weighing up the information available, a decision is made *not* to tell the PiPoT about the concern about them and ask their permission to share it with their employer, (because doing this would place any adults or children at increased risk of harm), then this decision and the reasons for it should be recorded. However, the PiPoT planning process must identify the earliest opportunity for them to be informed

7.0 ROLES AND RESPONSIBILITIES

7.1 THE PiPoT LEAD will:

7.1.1 Record PiPoT issues according to individual agency arrangements. The record should include details of the person referring, the PiPoT, the allegation, how the allegation was followed up and resolved, the decisions reached and the action taken. The record should be kept in accordance with DPA principles and should only be shared in accordance with this Protocol.

7.1.2 If not a Safeguarding Adult or Safeguarding Children case, instigate suitable enquiries to ascertain the truth or otherwise of allegations and be responsible for deciding what information should be shared with whom and on what basis, bearing in mind the contents of this Protocol. This decision must be recorded in accordance with best practice.

7.1.3 At the conclusion of any PiPoT enquiry consider if the findings demonstrate evidence of a theme or pattern in the context of past and historic PiPoT concerns; identify potential themes or system wide issues within the organisation; and ensure that appropriate action is taken by their organisation so that learning from past events is applied to reduce the risk of harm to adults with care and support needs in the future.

7.2 MANAGING OFFICERS will:

(The Managing Officer is the Local Authority representative who is coordinating any Adult Safeguarding Enquiry, so this section applies in circumstances where the Local Authority is responding to an adult safeguarding concern where a PiPoT issue is also present)

7.2.1 Inform the PiPoT Lead in all cases where a PiPoT is involved so individual agency recording arrangements can be followed.

7.2.2 Where there is no concurrent Police investigation, be responsible for deciding what information should be shared with whom and on what basis, bearing in mind the contents of this Protocol. This decision must be recorded in accordance with best practice.

7.2.3 Where it is appropriate to do so, involve the PiPoT's employer in the safeguarding process.

7.2.4 Inform Commissioning and Care Contracts if the employer is a contracted service and involve them in the safeguarding process.

7.2.5 Ensure that when an adult with care and support needs has been safeguarded but the PiPoT process continues, the adult is monitored according to individual agency arrangements until the PiPoT process is concluded.

7.2.6 Where appropriate liaise with the CQC (where the PiPoT is working or volunteering in a CQC regulated organisation), statutory and other bodies responsible for professional regulation (such as the General Medical Council and the Nursing and Midwifery Council) and the DBS if there are concerns about the employer's fitness to operate and safeguard adults with care and support needs.

7.2.7 Liaise with other Local Authority Safeguarding Adults Teams where there are cross border issues.

7.2.8 Liaise with Children Teams and make a referral to the appropriate Local Authority Designated Officer (LADO) if there are specific issues about the PiPoT's contact with children.

7.3 POLICE will:

7.3.1 Report to their PiPoT Lead when they know a PiPoT has behaved in a way as described in Section 2.

7.3.2 Where it is a Police led investigation, be responsible for deciding what information should be shared with whom and on what basis, bearing in mind the contents of this Protocol and their responsibilities under the Notifiable Occupation Scheme Disclosure Policy and / or nonconviction disclosure. This decision must be recorded in accordance with best practice.

7.3.3 Request that the employer considers taking appropriate action in line with their own procedures to ensure adults at risk are protected from any potential abuse and harm.

7.3.4 Where it is a Police led investigation, request that the employer carries out

their own risk assessment(s) and consider referral to the Disclosure and Barring Services (DBS) and / or other registration bodies as appropriate.

7.3.5 Where appropriate, liaise with the CQC (where the PiPoT is working or volunteering in a CQC regulated organisation), statutory and other bodies responsible for professional regulation (such as the General Medical Council and the Nursing and Midwifery Council) and the DBS if there are concerns about the employer's fitness to operate and safeguard adults with care and support needs.

7.3.6 Liaise with other Local Authority Safeguarding Adults and Children's Teams where there are out of area issues.

7.3.7 Make a referral to the LADO if there are specific issues about the PiPoT's contact with children through the CIAS service.

7.3.8 Seek advice as appropriate from the Birmingham Safeguarding Adults Team and attend / share relevant police information at any subsequent PiPoT strategy meeting. Any police information shared is for safeguarding purposes only and must not be used for any subsequent disciplinary proceedings without the permission of West Midlands Police.

7.4 **THE SERVICE COMMISSIONER** will:

7.4.1 Where a Service Commissioner is aware that a service it commissions employs a PiPoT who is under investigation, the Service Commissioner will ensure the commissioned service does the following:

7.4.1.1 Takes appropriate action in line with their own procedures to ensure adults with care and support needs are protected from abuse and harm

7.4.1.2 Carries out appropriate risk management procedures, including consideration of referral to the DBS and other registration bodies

7.4.1.3 Provides feedback at regular intervals until case conclusion.

7.4.2 Monitor the activities of commissioned services in their compliance of this Protocol.

7.4.3 Where appropriate, liaise with the CQC (where the PiPoT is working or volunteering in a CQC regulated organisation), statutory and other bodies responsible for professional regulation (such as the General Medical Council and the Nursing and Midwifery Council) and the DBS if there are concerns about the employer's fitness to operate and safeguard adults with care and support needs.

7.4.4 Regularly update the Service Commissioner's PiPoT Lead until case conclusion.

7.5 **EMPLOYERS (statutory, voluntary and private)** are expected to:

7.5.1 Take appropriate action in line with their own procedures to ensure adults with care and support needs are protected from abuse and harm.

7.5.2 Carry out appropriate risk management procedures, including, where

appropriate, referral to the CQC (where the PiPoT is working or volunteering in a CQC regulated organisation), statutory and other bodies responsible for professional regulation (such as the General Medical Council and the Nursing and Midwifery Council) and the DBS (see 5.9 above).

7.5.3 Provide feedback at regular intervals to the Managing Officer (if there is a safeguarding investigation) and Commissioning and Care Contracts until case conclusion.

7.5.4 Ensure the protection of adults with care and support needs is central to their decision making.

7.5.5 Ensure their organisation has a range of policies and procedures that will support their decisions.

7.5.6 Ensure all safeguarding concerns that result from a concern about a PiPoT are reported.

7.5.7 Share information in line with these procedures where it is known the PiPoT also has other employment or voluntary work with adults with care and support needs or children.

7.5.8 At the conclusion of any PiPoT enquiry consider if the findings demonstrate evidence of a theme or pattern in the context of past and historic PiPoT concerns; identify potential themes or system wide issues within the organisation; and ensure that appropriate action is taken by their organisation so that learning from past events is applied to reduce the risk of harm to adults with care and support needs in the future.

8 RECORDING OF PiPoT ISSUES

8.1 Record-keeping is an integral part of all adult safeguarding processes to ensure that adults with care and support needs are safeguarded, and that organisations and individuals are accountable for their actions when responding to concerns about a PiPoT. All cases should be recorded in accordance with this Protocol.

8.2 Individuals with responsibility for the investigation and management of PiPoT concerns must, as far as is practicable, contemporaneously document a complete account of the events, actions and any decisions taken, together with their rationale. This is to enable any objective person to understand the basis of any decision that was made, together with any subsequent action taken.

8.3 Records of actions taken to investigate PiPoT concerns which have been found to be without substance must also be retained so as to build up any history.

8.4 Records may be used to prepare reports to the Safeguarding Adult Board (for example to identify trends and patterns or give assurance that adults with care and support needs have been protected).

8.5 They might also be shared with any other relevant party to ensure the safety of adults with care and support needs (see Section 6 above).

8.6 A chronology or log of key events, decisions and actions taken should also be maintained to provide a ready overview of progress.

8.7 Individuals (including a PiPoT who is the subject of the recording) are entitled to have access to their personal records whether they are stored electronically or manually. It is therefore important that information recorded, is fair, accurate and balanced.

8.8 The purpose of the PiPoT record-keeping is to:

8.8.1 Enable accurate information to be given in response to any future request for a reference.

8.8.2 Provide clarification in cases where a future DBS Disclosure reveals information from the police that an allegation was made but did not result in a prosecution or conviction.

8.8.3 Prevent unnecessary re-investigation if an allegation resurfaces after a period of time.

8.8.4 Enable patterns of behaviour which may pose a risk to adults with care and support needs to be identified.

8.8.5 To assure the Safeguarding Adults Board that adults with care and support needs are protected from harm.

9. COMPLEX CASES

9.1 Many PiPoT concerns will be proportionately dealt with through straightforward employment management processes. Other circumstances will be more complex and require appropriate planning at each stage. These may include:

9.2 Identify key stakeholders

These could include:

- The Employer (supervisor/line manager/ HR manager)
- The Commissioner of a commissioned service contract
- The appropriate service regulator (e.g. CQC, Ofsted)
- The Police where there is a criminal concern
- The social worker of an adult with care and support needs
- Children's Services if children are involved
- Other case specific e.g. University representative if a student

9.3 PiPoT planning discussion / meetings

9.3.1 The relevant PiPoT Lead or Managing Officer will need to decide on the grounds of urgency and risk the best way to share information, risk assess and plan the lines of enquiry. The options would be a discussion, conference calls or a formal meeting. More complex cases and / or those with many stakeholders are likely to require a meeting. Appropriate records should be kept, and Appendices 4 - 7 give agenda and minute templates.

9.3.2 The planning discussion / meeting should cover the following areas

and be clearly recorded:

- Confidentiality agreement
- Sharing the PiPoT concern and purpose of the meeting
- Information from data controller and attendees
- Risk assessment
- Whether a crime has been committed
- Agree lines of enquiry (who is doing what and by when)
- Identify actions to be taken in respect of adults with care and support needs
- Identify who will support the PiPoT
- Timescales for actions and feedback
- Agree next step and actions.

9.4 Progress monitoring and timescales

9.4.1 It is important that PiPoT concerns are managed in a timely way. This is the role of the appropriate PiPoT Lead overseeing the PiPoT enquiry. Timescales should be identified at the planning stage. Regular monitoring is essential to ensure procedures are kept on track and risks are managed. Additional meetings can take place at any time as deemed necessary.

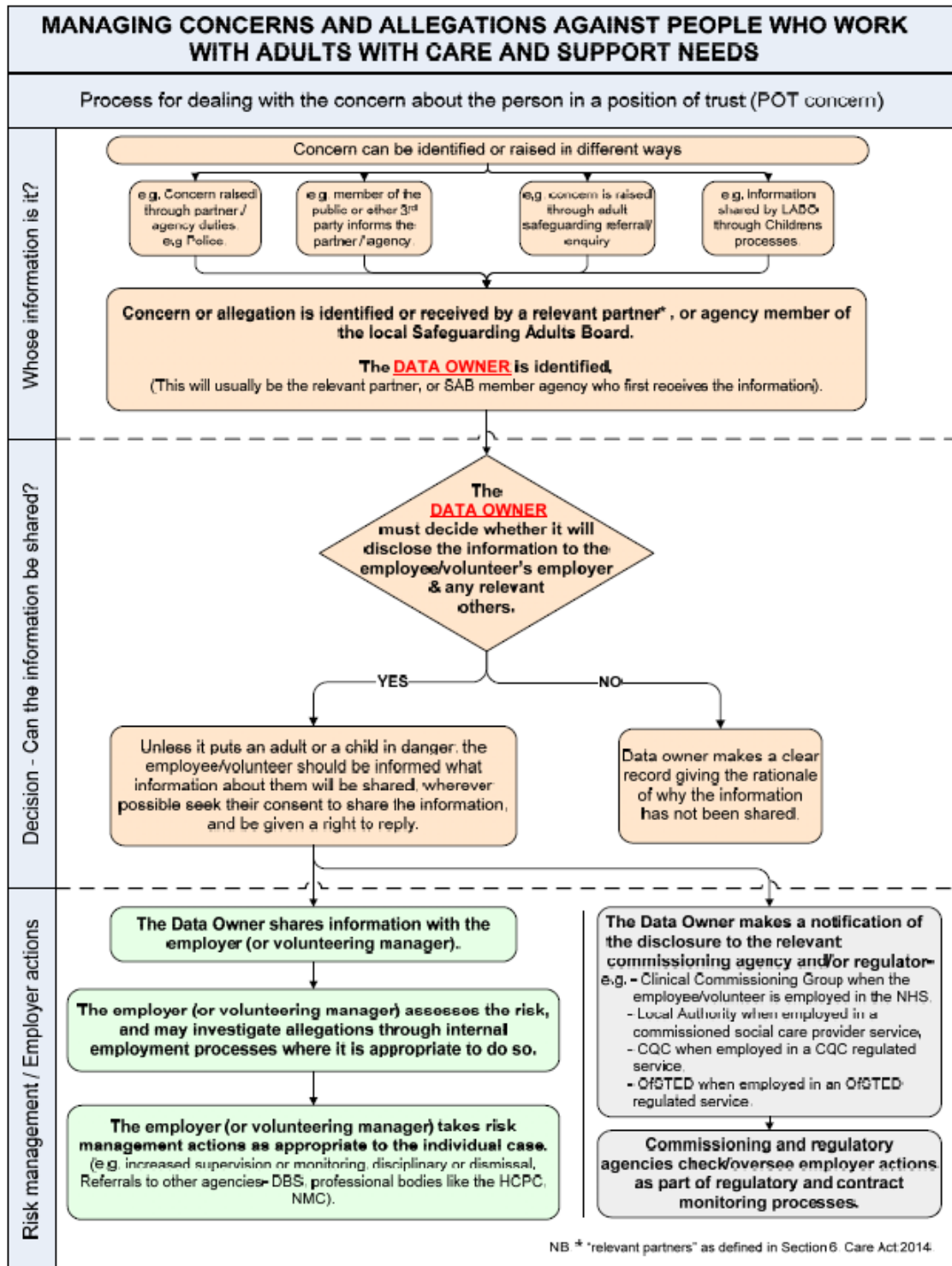
9.5 Evaluation and conclusion

9.5.1 It is important these cases have a robust evaluation and conclusion. This should include the following areas:

- Share the results of enquiries (e.g. results of disciplinary processes) and assess if they are adequate or if further work is required.
- Risk assess, including transferable risk (e.g. child protection risk to adults with care and support needs).
- Make recommendations for required actions
- Feedback mechanisms (to whom, by whom)
- Determine if further work is required or case closure.

Appendix 1

Fig.1. Adult PoT process – flowchart -



Appendix 2

Factors to consider on relation to PoT notifications

The following applies to all cases where current or historical concern, suspicion or allegation arises in connection with:

- a. The person in a PoT's own work/voluntary activity (Adults and Children)
- b. The person in a PoT 's life outside work i.e. concerning adults at risk in the family, social circle.
- c. The person in a PoT's life outside work i.e. concerning risks to children, the individual's own children or other children.

	Questions	No cause for concern	Some cause for concern requiring investigation	Cause for concern
1.	The person has behaved in a way that has harmed or may have harmed an Adult with care & support needs or a child?	No harm or potential harm	Some harm or potential harm	Serious harm or potential harm
2.	Possibly committed criminal offence against or related to an adult/s with care and support needs or a child?	No	Not to an Adult with care & support needs but the offence is serious	Yes
3.	Otherwise behaved towards an adult or child in a way that indicates they may pose a risk of harm to adults with care and support needs.	No	Yes	
4.	May be subject to abuse themselves which means their ability to provide a service to adults at risk must be reviewed	NO	YES	

Appendix 3

LOGO

CONFIDENTIAL AND RESTRICTED

Ref No:

**ALLEGATIONS AGAINST PEOPLE WHO
WORK IN POSITIONS OF TRUST (PoT) WITH
ADULTS REFERRAL/REPORTING FORM**

Date Referral sent:	<input type="text"/>	Date of alleged incident:	<input type="text"/>
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REFERRER DETAILS	<input type="text"/>
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Family Name	<input type="text"/>	First Name/s	<input type="text"/>
Position	<input type="text"/>	Email address	<input type="text"/>
Agency	<input type="text"/>	Tel. No/Mobile	<input type="text"/>
Address	<input type="text"/>		

This referral applies to allegations or concerns raised about a person, whether an employee, volunteer or student, paid or unpaid who works with or cares for adults with care and support needs. These individuals are known as People in Position of Trust (person in a PoT) and the process is the Position of Trust (PoT) process.

Criteria for PoT:

Tick those which apply:

Concern/allegation is identified in connection with:

<input type="checkbox"/>	The person in a PoT's own work/voluntary activity (with Adults and/or Children) (for example where a worker or volunteer has been accused of the abuse or neglect of an adult with care and support needs or child)
<input type="checkbox"/>	The person in a PoT's life outside work i.e. concerning adults with care and support needs in the family, social circle (for example where a son is accused of abusing his older mother and he also works as a domiciliary care worker with adults with care and support needs. Or where a woman is convicted of grievous bodily harm and also works in a residential home for people with learning disabilities)
<input type="checkbox"/>	The person in a PoT's life outside work i.e. concerning risks to children, the individual's own children or other children (for example where a woman who works in-a host authority with women who suffer domestic abuse and lives in the neighbouring authority is subject to child protection procedures involving her own children due to domestic abuse by her husband)

And the person has:

	Behaved in a way that has harmed or may have harmed an adult with care and support needs.
	Possibly committed a criminal offence against or related to an adult/s with care and support needs.
	Otherwise behaved towards an adult with care and support needs or in a way that indicates s/he is unsuitable to work with adults with care and support needs.
	Behaved in a way that has harmed children or may have harmed children which means their ability to provide a service to adults with care and support needs must be reviewed.
	May be subject to abuse themselves which means their ability to provide a service to adults with care and support needs must be reviewed.
	Behaved in a way which questions their ability to provide a service to an adult with care and support needs which must be reviewed e.g. conviction for grievous bodily harm against someone who is not an adult with care and support needs.

PERSON IN POSITIONS OF TRUST DETAILS

PERSONAL DETAILS OF THE EMPLOYEE/VOLUNTEER BEING REFERRED for POSITION OF TRUST							
Family Name		First Name/s					
Date of Birth		Gender					
Home Address							
ID Number (if known)		Tel. No					
Current Address (if different)							
Race		Religion		Language			
Gender		Sexuality		Disability			
Other Household Members (including non-Family)							
Name	M/F	DOB	ID	Relationship to Child/Young Person /Adult	First Language	Parental Responsibility	
						Yes	No
Organisation & Address Person in Position of Trust Works/Volunteers for:							
Is the organisation named above CQC Registered?				Yes / No			

Job Title & Role:	
Does the Person in Position of Trust have a Professional Registration? <i>(e.g NMC, HCPC, GMC etc.)</i>	Yes / No State: NMC / HCPC / GMC / (specify)
Manager Contact Details at Employing Organisation:	Name: Address: Email: Telephone:
Current employment status (e.g. permanent/temporary/agency/full time /part time/zero hours):	
Has this person been referred to the Adult Safeguarding Lead before? When? What were the concerns and the outcome? e.g. managed as an advice issue or went to a POT meeting	Yes / No
Does the Person in Position of Trust know you are making this referral?	Yes / No
If not why not? (please note there may be some situations where the adult may be placed at greater risk if the PoT is informed immediately. See PoT policy for further detail))	

INCIDENT/CONCERNS DETAILS

Brief description of concerns:	
Was the victim a child or adult with care and support needs?	Child / Adult at Risk / Other (please state)
Are there adult or children's safeguarding procedures currently in process?	Adult Safeguarding Procedures: Yes / No Children's Safeguarding Procedures: Yes / No
Police Crime Reference Number (if applicable)	Person in Position of Trust: Child (if applicable):

ALLEGED VICTIMS DETAILS

No. of Alleged Victims		<input type="text"/>	
1st - Adult / Child / Young Person / other individual			ID Number if applicable:
Specify			
Full Name:		DOB:	
Gender:	Male / Female		
Current/Past Local Authority Involvement (specify):		Child in need / child protection/not applicable	
(if a child) Parent's names and DOB: (if different)		Adult / Child's Relationship to the Alleged Person in Position of Trust:	
2nd - Adult / Child / Young Person / other individual			ID Number if applicable:
Full Name:			DOB:
Gender:	Male / Female		
Current/Past LA Involvement:		Indicate if Child in need / Child Protection/Not applicable	
(if a child) Parent's names and DOB: (if different)		Adult / Child's Relationship to the Alleged Person in Position of Trust:	
3rd - Adult / Child / Young Person / other individual			ID Number if applicable:
Full Name:			DOB:
Gender:	Male / Female		
Current/Past LA Involvement:		Child in need / child protection	
(if a child) Parent's names and DOB: (if different)		Adult / Child's Relationship to the Alleged Person in Position of Trust:	

~copy and paste here victims information if more than 3 victims~

Please provide names of key individuals connected to the Alleged Person in Position of Trust as the Adult Safeguarding Lead will need to consider who to invite to the POT meeting:

Job role/title	Name and Job role	Organisation	Telephone Number	Email Address
Supervisor/Line manager				

HR/Personnel				
Provider Manager				
Police contact				
Contract and Commissioning contact for provider				
CQC for provider				
Health Professional				
Others				

Please provide names of key individuals connected to the Alleged Victim(s) as the Adult Safeguarding Lead will need to consider who to invite to the POT meeting:

Job role/title	Name and job role	Organisation	Telephone Number	Email Address
Social Worker				
Health Professional				
Advocate				
Provider				
Voluntary Agency				
Contract and Commissioning contact for provider				
Others				

For Completion by Adult Safeguarding Lead - POT Case Recording (record name after each entry or group

of entries)

Adult Safeguarding Lead ADVICE	Adult Safeguarding Lead ACTIONS
Date referral received;	Date advice given:

Adult Safeguarding Lead DECISION:	
Not Adult POT, referred to another process/procedure (specify): <input type="checkbox"/>	Initiate POT procedures <input type="checkbox"/>
Request further information from referrer (Referrer to action) <input type="checkbox"/>	Request further information from other sources (ASL to action) <input type="checkbox"/>
Refer to other ASL for management <input type="checkbox"/>	Refer to LADO if appropriate <input type="checkbox"/>
ASL DECISION DATE:	

For Completion by ASL - POT Case Recording (record name after each entry or group of entries)

Date/Time	Recording	Outcome/Actions	Contact Details

Appendix 4

Position of Trust Agenda for Planning Meeting/Planning Discussion Template

Chair		Date	
Start time		Finish Time	
Venue		Minute Taker	
Person in Position of Trust		Employer and role	

Confidentiality Statement

Those present are reminded that this meeting is strictly confidential. Discussions should not be shared outside of the meeting. All agencies should develop procedures to ensure that the minutes are retained in a confidential and appropriately restricted manner. The minutes will aim to reflect that all individuals who are discussed at the meetings should be treated fairly, with respect and without improper discrimination. All decisions undertaken at the meetings will be informed by a commitment to equal opportunities and effective practice issues in relation to race, gender, sexuality and disability.

Minutes of this meeting could be shared as part of criminal, civil or disciplinary proceedings, or as part of investigations concerning whether an individual should be barred from working with children or adults with care and support needs. If further disclosure is felt essential, permission must be sought from the Chair. The minutes should not be photocopied or shared without the agreement of the Chair and must be kept in a restricted or confidential section of the agency files.

Purpose of the meeting

This meeting is held under the West Midlands Position of Trust Guidance (2016) to:

- Share information
- Agree actions to be taken, by whom and by when
- Risk assess

Agenda

1	Introductions and confidentiality statement
2	Detail of the allegations (to include current and previous allegations, details to whom the allegation relates)
3	How this is relevant to their employment with adults with care and support needs
4	Relevant information from attendees

5	Risk assessment <ul style="list-style-type: none"> • To consider the safety of adult/s concerned • To consider the safety of other adults or children 		
6	Agree support to person in position of trust		
7	Agree feedback mechanism to the referrer (who, what, when)		
8	Planning the management of the allegation		
		Action	By whom
	1		
	2		
	3		
4			
9	Consider strategy for media enquiries (if relevant)		
10	Next steps including details of further meetings		
11	AOB		

Appendix 5

Position of Trust Agenda for Case Closure Meeting Template

Chair		Date	
Start time		Finish Time	
Venue		Minute Taker	
Person in Position of Trust		Employer and role	

Confidentiality Statement
<p>Those present are reminded that this meeting is strictly confidential. Discussions should not be shared outside of the meeting. All agencies should develop procedures to ensure that the minutes are retained in a confidential and appropriately restricted manner. The minutes will aim to reflect that all individuals who are discussed at the meetings should be treated fairly, with respect and without improper discrimination. All decisions undertaken at the meetings will be informed by a commitment to equal opportunities and effective practice issues in relation to race, gender, sexuality and disability.</p> <p>Minutes of this meeting could be shared as part of criminal, civil or disciplinary proceedings, or as part of investigations concerning whether an individual should be barred from working with children or adults with care and support needs. If further disclosure is felt essential, permission must be sought from the Chair. The minutes should not be photocopied or shared without the agreement of the Chair and must be kept in a restricted or confidential section of the agency files.</p>

Purpose of the meeting
<p>This meeting is held under the West Midlands Position of Trust Guidance (2016) to:</p> <ul style="list-style-type: none"> • Gain feedback from agreed actions from the PoT planning meeting or discussions • Reach a formal determination of the case • Further risk assess

Agenda	
1	Introductions and confidentiality statement
2	Summary of original allegations
3	Feedback of agreed actions from planning meeting or discussion
4	Risk assessment <ul style="list-style-type: none"> • To consider the safety of adult/s concerned • To consider the safety of other adults or children

5		Risk assessment <ul style="list-style-type: none"> • To consider the safety of adult/s concerned • To consider the safety of other adults or children 		
6		Agree support to person in position of trust		
7		Agree feedback mechanism to the referrer (who, what, when)		
8		Planning the management of the allegation		
		Action	By whom	By when
	1			
	2			
	3			
4				
9		Consider strategy for media enquiries (if relevant)		
10		Next steps including details of further meetings		
11		AOB		

Appendix 6

Position of Trust Planning Meeting or Planning Discussion Minutes Template

Chair		Date	
Start time		Finish Time	
Venue		Minute taker	
Person in Position of Trust		Employer and Role	

Present	
Apologies	
Non-Attendees	
Detail of the allegations	
How this is relevant to their employment	
Agree feedback mechanism to the referrer (who , what, when)	
Risk Assessment	
Agree support to person in position of trust	
Agree feedback mechanism to the referrer (who , what, when)	
Planning the management of the allegation	

	Actions	By Whom	By when
1			
2			
3			
4			
5			
Strategy for media enquiries			
Next steps/further meetings			
A.O. B			

This record is issued in the belief that it accurately reflects of the meeting. Please contact the chair within 7 working days of receipt to record any inaccuracies or omissions. This record is confidential and is not to be reproduced or copied to others without the chair's approval.

Appendix 7

Position of Trust Case Closure Meeting Minutes Template

Chair		Date	
Start time		Finish Time	
Venue		Minute taker	
Person in Position of Trust		Employer and Role	

Present			
Apologies			
Non-Attendees			
Summary of the allegations			
Feedback of agreed actions from planning meeting or discussion			
Risk assessment			
Formal determination of the cases			
	Agreed actions from this meeting	By Whom	By when
1			
2			
3			

4			
5			
Strategy for media enquiries			
Agree feedback to person in position of trust			
Agree feedback mechanism to the referrer and relevant others			
A.O. B			

This record is issued in the belief that it accurately reflects of the meeting. Please contact the chair within 7 working days of receipt to record any inaccuracies or omissions. This record is confidential and is not to be reproduced or copied to others without the chair's approval.

Appendix 8

Suggested Database (for data collection and checking for previous concerns)

Date PoT concern received	Date	
From	Referrers details	Name Organisation Contact details
In relation to	PoT details	Name Address DOB Contact details Position of trust detail (job/role)
Specific to their employment/placement with	Employer/managers details	Name Organisation Contact details
The concerns are	Details of allegation/concern	What, when
The concerns is going to be managed by	Managed by	Safeguarding Adults Safeguarding Children Adult PoT Guidance Childrens PoT procedure NO PoT process
Date passed to employer	Date passed to employer	
Outcome	Outcome	Date Outcomes Referrals to regulatory bodies etc.