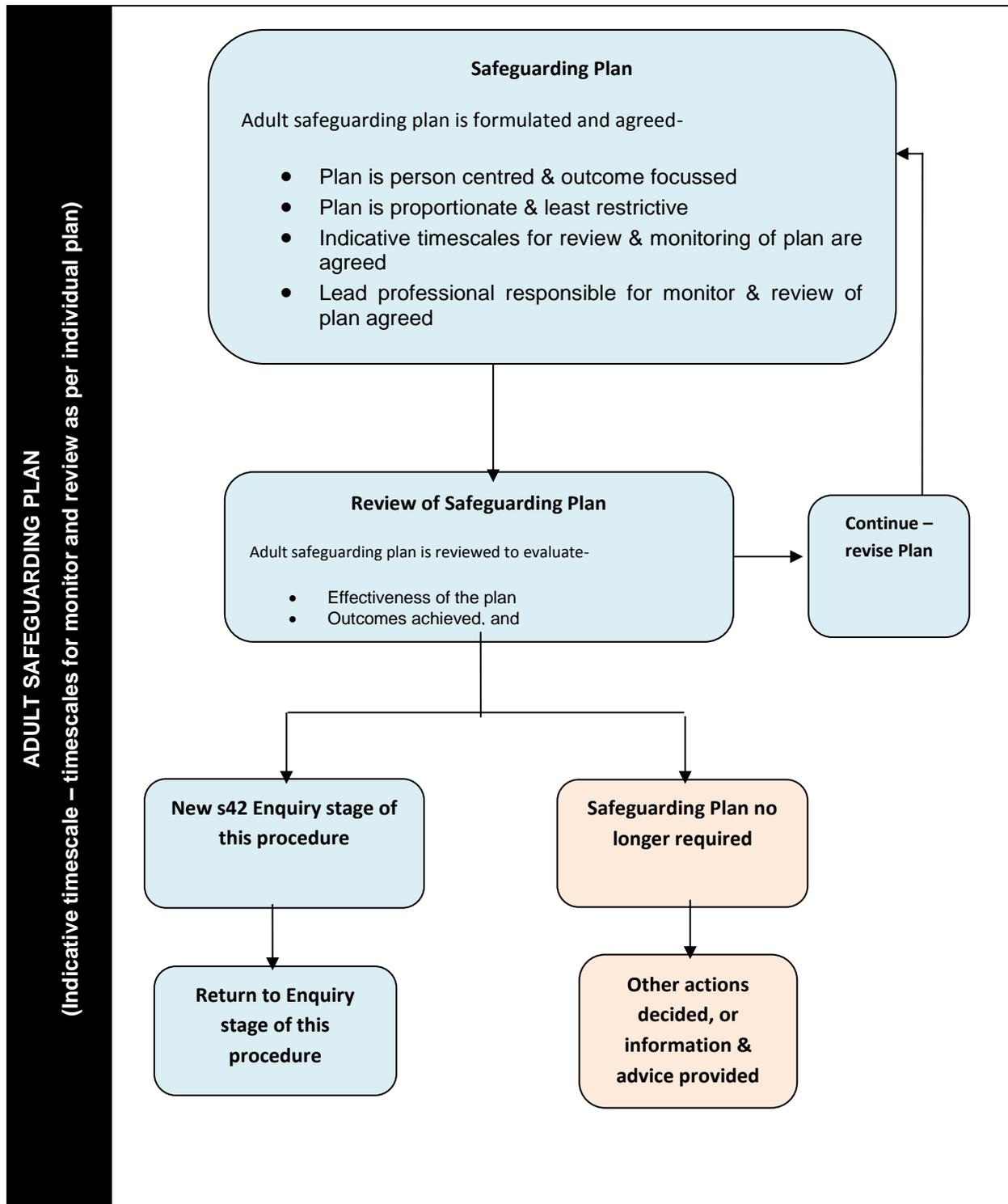


11. Adult Safeguarding Plans-



11.1. Definition

An adult safeguarding plan is the agreed set of actions and strategies that are designed to support and manage ongoing risk of abuse or neglect for an adult with care and support needs.

11.2. Purpose

The purpose of an adult safeguarding plan is to formalise and coordinate the range of actions to protect the adult, and to support the adult to recover from the experience of abuse or neglect.

Adult safeguarding plans should be individual, person-centred and outcome-focused.

In relation to the adult this should set out¹:

- what steps are to be taken to assure their safety in future;
- the provision of any support, treatment or therapy including on-going advocacy;
- any modifications needed in the way services are provided (e.g. same gender care or placement; appointment of an OPG deputy);
- how best to support the adult through any action they take to seek justice or redress;
- any on-going risk management strategy as appropriate; and,
- any action to be taken in relation to the person or organisation that has caused the concern.



I am supported to get over bad experiences, and to be safer in the future

11.3. Roles and responsibilities

The Local Authority will take responsibility for organising and coordinating the formulation of the adult safeguarding plan. Care Act statutory guidance does not specify who or which agency should be responsible for monitoring and reviewing adult safeguarding plans. However, for all adult safeguarding plans, a lead professional should be identified who will monitor and review the plan. In most cases this will be the Responsible Manager from the Local Authority.

The adult safeguarding plan should identify who is involved in the plan, and outline individual roles and responsibilities in relation to the plan.

Following an adult safeguarding enquiry, where the Local Authority has decided that it should itself take further action, then it will be under a duty to do so².

¹ Paragraph 14.95. Care and Support Statutory Guidance 2014

² Paragraph 14.91. Care and Support Statutory Guidance 2014

11.4. Timeliness and risk

Formulating the plan: The adult safeguarding plan should follow naturally from concluding the adult safeguarding enquiry and decisions on what actions are required in the adult's case. There should be no delay between concluding the enquiry and formulating the plan.

Monitoring and reviewing the plan: This procedure does not specify specific timescales for monitor and review of the plan. Timescales for monitoring and review of the plan should be set individually when formulating the plan, and should reflect the circumstances and level of risk involved. Local guidance may outline more specific timescales.

11.5. Process

11.5.1. *Formulating the plan*

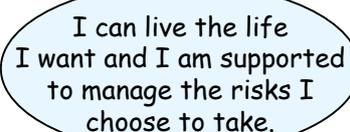
11.5.1.1. In most cases there will be a natural transition between deciding what actions are needed in the adult's case at the end of the enquiry episode, into formalising what these actions are and who needs to be responsible for each action- this is the adult safeguarding plan. The plan should outline the roles and responsibilities of all individuals and agencies involved, and should identify the lead professional who will monitor and review the plan, and when this will happen.

11.5.1.2. Adult safeguarding plans should be person-centred and outcome-focused. Adult safeguarding plans should be made with the full participation of the adult, or their representative or advocate as appropriate. Wherever possible, adult safeguarding plans should be designed to reflect and aim to achieve the desired outcomes of the adult.

11.5.1.3. Adult safeguarding plans should not be paternalistic or risk averse. Plans should reflect a positive risk taking approach and be clear how the plan will promote the wellbeing of the adult.

11.5.1.4. The Mental Capacity Act directs that agencies **must** presume that an adult has the capacity to make a decision until there is a reason to suspect that capacity is in some way compromised; the adult is best placed to make choices about their wellbeing which may involve taking certain risks.

Where the adult may lack capacity to make decisions about arrangements for enquiries or managing any abusive situation, then their capacity must always be assessed and any decision made in their best interests. If the adult has the capacity to make decisions in this area of their life and declines assistance, this can limit the intervention that organisations can make. The focus should therefore be on harm reduction. It should not however limit the



I can live the life I want and I am supported to manage the risks I choose to take.

action that may be required to protect others who are at risk of harm³.

11.5.1.5. As outlined in Chapter 10.5.10, there will be occasions where the desired outcomes of the adult cannot be met or where doing so would cause unacceptable risk of harm to the adult or others.

Adult safeguarding plans will need to balance the duty of care to safeguard the adult with their right to self-determination. In cases where the adult is not able to understand and make safe decisions, the adult safeguarding plan may need to include restrictions on the adult's choices and lifestyle. Any support or decision that is designed to restrict unsafe choices or behaviour needs to be lawful, proportionate, and least restrictive.

Good Practice Guide – Positive risk taking and personalising choice & control

See: [A positive approach to Risk and Personalisation: A Framework. Gloucestershire IEP](#)

Risk is the probability that an **event** will occur with beneficial or harmful outcomes for a particular person or others with whom they come into contact.

Positive risk taking is a process which starts with the identification of potential benefit or harm. The desired outcome is to encourage and support people in positive risk taking to achieve personal change or growth.

Positive risk management does not mean trying to eliminate risk. It means managing risks to maximise people's choice and control over their lives.

Positive risk taking recognises that in addition to potentially negative characteristics, risk taking can have positive benefits for individuals, enabling them to do things which most people take for granted. In the right circumstances, risk can be beneficial, balancing necessary levels of protection with preserving reasonable levels of choice and control. A balance has to be achieved between the wishes of adults at risk of abuse or neglect, and the common law duty of care.

Risk Assessment and Identification-

Risk should be considered and assessed before it occurs. This should include identifying the probability of the risk occurring and the impact if it does. It should be remembered that the impact of a risk can be positive and that not all risks will require management.

Risk assessment practice is dynamic and flexible and should respond to change. Therefore it will:

- Include the views of individuals and those of their families/carers which should have prominent focus in the assessment, identification and management of risk.
- Have a focus on a person's strengths to give a positive base from which to develop plans that will support positive risk-taking. The strengths and abilities of the person, their wider social and family networks, and the diverse support and advocacy services available to them should inform a balanced approach.
- Be proportionate to the risk identified, potential impact and subject to ongoing monitoring and

³ Paragraph 14.92. Care and Support Statutory Guidance 2014

review.

- Use the principles of multi-agency working in proportion to risk and the impact on self and others.
- Use a person-centred approach to assess, identify and manage risk.
- Ensure that staff have access to appropriate training to support them to promote positive risk taking.
- Ensure that written assessments identify a review date and include the signatures of everyone involved in the assessment.
- Include historical information which is of value in the assessment and management of risk. Historical information should not prejudice a positive approach to risk taking in the future.

Risk management and personalising choice & control-

'The goal is to manage risks in ways which improve the quality of life of the person, to promote their independence or to stop these deteriorating if possible. Not all risks can be managed or mitigated but some can be predicted.'⁴

Risk management entails broad range of responses and may involve preventative, responsive and supportive measures to reduce the potential negative consequences of risk, and to promote the potential benefits of taking agreed risks. These will occasionally involve more restrictive measures and crisis responses where the identified risks have an increased potential for harmful outcomes.

Risk management strategies and measures should be personalised to the individual circumstances and context of the adult. Personalisation is not about maximising freedom. As the term implies it is primarily concerned with how to design support arrangements so they are more "personal" - which means they need to fit the person, and be suitable for them.

One of things you can personalise is *control* itself. Not only can you personalise control but *personalised control* is sometimes the key to excellent support.

Control can be personalised, just like any other aspect of a support service. But it must be justified with due regard for (a) mental capacity, (b) effectiveness, and (c) proportionality⁵.

Personalised approaches to adult safeguarding are not just about gaining and focusing on the desired outcomes of the adult, although this is important. It is also about ensuring any support the adult needs to manage risk of abuse or neglect- including measures that may need to restrict or control an adult's choices and freedoms- is tailored to their individual circumstances, and takes account of their history, preferences, culture and values.

11.5.2. Interface between adult safeguarding plans and care & support plans.

11.5.2.1. An adult safeguarding plan is not a care & support plan, and it will focus on care provision only in relation to the aspects that provide protection against abuse or neglect, or which offer a therapeutic or recovery based resolution. In many cases the provision of care and support may be important in addressing the risk of abuse or neglect, but where this is the intention the adult safeguarding plan must be specific as to how this intervention will achieve this outcome.

⁴ *Nothing Ventured, Nothing Gained: risk guidance for people with dementia*, Department of Health, November 2010

⁵ Content adapted from *Safeguarding and Personalisation*, v1.1, Jan 2009. Simon Duffy and John Gillespie.

11.5.2.2. Where the adult requires assessment and provision of care and support services by the Local Authority, they must also have a care and support plan in line with the requirements of the Care Act 2014 (sections 24 & 25).

11.5.3. *What sort of actions should be included adult safeguarding plans?*

11.5.3.1. Adult safeguarding plans can cover a wide range of interventions and should be as innovative as is helpful for the adult. The Care Act statutory guidance states that in relation to the adult, safeguarding plans should set out:

- what steps are to be taken to assure their safety in future;
- the provision of any support, treatment or therapy including on-going advocacy;
- any modifications needed in the way services are provided (e.g. same gender care or placement; appointment of an Office of the Public Guardian Deputy)
- how best to support the adult through any action they take to seek justice or redress;
- any on-going risk management strategy as appropriate; and,
- any action to be taken in relation to the person or organisation that has caused the concern.



I am supported to get over bad experiences and to be safer in the future

11.5.3.2. Outcomes for adult safeguarding plans can be as high level or detailed as the circumstances require, and as the law allows. Actions should aim to be **S.M.A.R.T.** -

- **Specific** - try to be very clear about exactly what action is going to be taken. Name the person/people responsible for each action.
- **Measurable** - you should be able to clearly quantify or demonstrate that the action or outcome has been achieved.
- **Achievable** - you need to make sure that you are able to attain the action or outcome.
- **Realistic** - try to make sure that the action you are planning is the most practical way to achieve the improvement you want.
- **Time constrained** - make sure you state the time period in which each action will be accomplished.

11.5.3.3. The adult safeguarding plan should include, relevant to the individual situation:

- Positive actions to promote the safety and wellbeing of an adult, and for resolution & recovery from the experience of abuse or neglect; and,
- Positive actions to prevent further abuse or neglect by a person or an organisation. (See Good Practice Guide on the next page).

The Safeguarding Plan should also include consideration of what triggers or circumstances would indicate increasing levels of risk of abuse or neglect for individual/s, and how this should be dealt with (e.g. who to contact or how to escalate concerns).

11.5.3.4. Support measures for adults who have experienced abuse or neglect, or who are at risk of abuse or neglect, should be carefully considered when formulating the adult safeguarding plan. Mainstream support service provision (e.g. mainstream Domestic Abuse support services, Victim Support) should be considered as well as specialist support services (e.g. specialist psychology services).

11.5.3.5. The role of Police and related support measures should be considered where an adult may be going through the criminal justice process, including use of Intermediaries, Independent Domestic Violence Advocates (IDVA), and Independent Sexual Violence Advisors (ISVA).

11.5.3.6. Where there is a potential for criminal prosecution it is important to ensure that support provided to the adult (some types of counselling or psychology support in particular) will not interfere with criminal processes and evidence. This should be discussed as part of planning processes, and guidance can be obtained from the Crown Prosecution Service on a case by case basis should this be a possibility.

Good Practice Guide – Examples of positive actions for adult safeguarding plans	
Actions to promote the safety and wellbeing of an adult, and for resolution & recovery from the experience of abuse or neglect.	Actions to prevent further abuse or neglect by a person or an organisation.
<ul style="list-style-type: none"> • Provision of care and support services to promote safety and wellbeing (e.g. homecare, telecare). • Security measures e.g. door locks and entry devices, personal alarms, telephone or pager, CCTV. • Formalised arrangements for monitoring safety and wellbeing (e.g. Keeping in Touch plans- usually used where an adult with capacity will not accept any other form of support). • Flags on agency systems. • Activities / personal development / awareness raising that increase a person's 	<ul style="list-style-type: none"> • Reassessing and changing support provision for an adult with care & support needs who poses a risk of harm to other service user/s. • Carrying out a carers assessment and providing services to decrease risk of harm • Change of support services provided to an adult to decrease carer stress. • Increased observation of and appropriate interventions to prevent harmful behaviour by other service users • Meeting with an individual who poses a risk of harm, and negotiating changes to their

<p>capacity to protect themselves</p> <ul style="list-style-type: none"> • Support or activities that increase self-esteem and confidence. • Advocacy services. • Counselling and therapeutic support. • Mediation or family group conferencing. • Domestic abuse support services. • Restorative justice. • Circles of support. • Befriending. • Blocking nuisance calls or advice from Trading Standards. • Neighbourhood watch. • Application for Criminal Injuries Compensation • Appointeeship. • Application to the Court of Protection for single decision or court appointed deputy • Application to the High Court under inherent jurisdiction • Domestic abuse prevention orders, forced marriage prevention orders. • Civil injunctions. • Guardianship order under the Mental Health Act e.g. to require residence or require 	<p>behaviour.</p> <ul style="list-style-type: none"> • Family group conferencing to agree changes to behaviour that harms. • Criminal prosecution. • Enforcement action by CQC, including cancellation of registration • Application for a Court Order e.g. restraining contact or an anti-social behaviour order. • Application to the Court of Protection to change/remove a Lasting Power of Attorney • Application to the Department of Work and Pensions to change / cancel appointeeship. • Civil Law remedies e.g. suing for damages • Prosecution by Trading Standards • Referral to the relevant registration body (e.g. NMC, HCPC, GMC) • Training needs assessment, supervision (of employee/volunteer) or disciplinary action following an internal investigation • Organisational review (e.g. of staffing levels, policies/procedures, working practices, or culture)
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<p>access be given</p> <ul style="list-style-type: none"> • Support through the Criminal Justice system; Independent Domestic Violence Advocate (IDVA), ISVA, Intermediary Service. • Support to recover from crime and for advice on the criminal justice system- Victim Support. • Support to make visual evidence for later use if decide to make criminal complaint- Visual Evidence for Victims. 	
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11.5.4. *Monitoring and reviewing the plan.*

11.5.4.1. The identified lead professional should monitor the plan on an ongoing basis, and lead review processes within the timescales agreed on the plan. The purpose of the review process is to-

- evaluate the effectiveness of the adult safeguarding plan;
- evaluate whether the plan is meeting/achieving the adult's outcomes;
- evaluate levels of current and ongoing risk.

The Local Authority should be involved in any review of adult safeguarding plans, and decisions about plans should be communicated and agreed with the Lead Agency.

11.5.4.2. Following review processes, it may be determined that-

- **the adult safeguarding plan is no longer required;** or,
- **the adult safeguarding plan needs to continue.** Any changes or revisions to the plan should be made, new review timescales set and who will be the lead professional to monitor and review the plan; or,
- **a new adult safeguarding s42 enquiry is needed.** This will usually be when new information comes to light that significantly changes the circumstances and risks, or introduces new risks. New adult safeguarding enquiries will only be needed when the Local Authority determines that new enquiries are necessary to enable it to decide what action is needed in the adults case. If the Local Authority is satisfied that, despite new or changed risks, further enquiries are not necessary to enable it to decide what action is needed, then new or changed risks can still be managed through revision and monitoring of safeguarding plans.

11.5.5. Closing the adult safeguarding procedure.

11.5.5.1. The adult safeguarding procedure can be closed following review or any time where the adult safeguarding plan is no longer required. The adult safeguarding plan will no longer be required when the adult is no longer at risk of abuse or neglect, or risks have reduced to the level that they can adequately and appropriately be managed or monitored through single agency processes, e.g. assessment and support planning processes, community policing responses, health service monitoring.

11.5.5.2. Decisions about concluding the adult safeguarding procedure should be made by, or in agreement with, the Local Authority be clearly recorded with the rationale for the decision.

11.5.5.3. When the adult safeguarding procedure is concluded, feedback on the outcomes should be shared with the following agencies/individuals as appropriate:

- The adult.
- Their representative or advocate.
- The person / agency who raised the adult safeguarding concern.
- The person / agency who were identified as the potential source of risk.
- Key partner agencies as outlined in Fig 10b above.
- Any other involved stakeholder agency/individual.

The consent of the adult to share information should be gained, and usual information sharing rules apply.