

<b>Directorate</b>	<b>Manchester City Council - Adult Social Care</b>
<b>Document title</b>	Safeguarding Adults Policy and Procedures  Part 3 - Safeguarding supporting appendices, including references to supporting policies and guidance alongside practice templates.
<b>Summary</b>	This document forms part 3/3 of safeguarding adults policy and procedures.  It contains information, appendices and templates that staff should use when undertaking relevant safeguarding activity.
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<b>Owner of policy</b>	Head of Safeguarding - Amanda Baker
<b>Date policy is signed off by DMT</b>	11 <sup>th</sup> December 2024

Version Control	Description of change	Undertaken by who	Date
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## 1. Policy Statement

1.1. The information contained in this policy forms part 3 of the safeguarding adults policy and procedures. It provides appendices, templates and links to support staff with all safeguarding activity. It aims to embed a consistent and standardized approach to safeguarding work citywide.

1.2 This policy supports the Local Authorities “Our Manchester” strategy and priorities in contributing to the development of a highly skilled city and world class and home-grown talent.

## 2. Scope

2.1 This policy relates to adult social care staff working within Manchester City Council. Staff who are deployed to Manchester Local Care Organisation (MLCO) or Greater Manchester Mental Health Trust (GMMH) will be expected to comply with their respective organizations policies and procedures.

## 3. Safeguarding Practice Standards

3.1 Practice standards provide a consistent mechanism across Adult Social Care for all practitioners to undertake assessment, safeguarding enquiries and to critically reflect on their practice.

3.2 Safeguarding processes/enquiries evidence the key principles of Making Safeguarding Personal. They comply with legislation and local safeguarding adults policy & procedures.

Principle	Practice Standard
Empowerment	<p>A person-centred approach is taken</p> <p>Consent and information sharing and, wherever practicable, the practitioner seeks the consent of the person before action is taken.</p> <p>In circumstances where consent cannot be obtained due to a lack of capacity, a best interest meeting is evidenced for the decision to act on the safeguarding concern</p> <p>Every effort has been made to effectively communicate with the person by providing support where identified with communication difficulties, mental capacity issues and the consideration of the use of Independent Advocacy where appropriate</p>

	<p>The person at risk spoken to alone and their desired outcomes have been sought and recorded at the start of the process.</p> <p>The person has real choice and control over the process with a presumption of capacity</p> <p>The dynamics of the relationships involved in the case have been considered to ensure that the people acting on behalf of the person at risk of abuse are acting in their best interests</p> <p>The person is supported and empowered to resolve the circumstances that put them at risk</p> <p>The person is receiving the help they desire and are feeling more in control, informed and involved in the decision-making process.</p> <p>Feedback is provided to the referrer and the person at risk on the agreed outcomes</p>
<b>Prevention</b>	<p>Proactive attempts to prevent harm from occurring and the prevention of further harm is evident</p> <p>Information is shared with the person and with their consent to relevant agencies as required on the abuse, risk and how to respond appropriately</p> <p>Discuss with the person at risk the safeguarding support they received, and listen to their views and experiences, so that future support can be planned and shaped according to their needs, wishes and circumstances</p>
<b>Proportionality</b>	<p>Is abuse or neglect is indicated? If yes, Section 42 Enquiry must be completed to help decide what action to take to support and protect the person in question.</p> <p>Decisions taken are proportionate to the presenting situation with sound professional judgement and rationale</p> <p>The enquiry identifies potential benefits and risks of a particular activity/decision for the person and others</p> <p>The enquiry demonstrates collaboration with the person and others to understand the consequences of potential risks, maximizes benefits and appropriately reduces the potential negative impacts</p>

	Where required, a review of relevant case history and/or historic information which identifies incidents, patterns and concerns where risks relate to people or children involved in the individual's support network have been explored
<b>Protection</b>	<p>Where required safeguarding plans are in place and have been jointly developed with the person and other agencies</p> <p>Safeguarding plan are reviewed at recommended dates and closed appropriately</p> <p>Where required the safeguarding plan is accessible to the person, relevant professionals and persons who provide support to the person</p> <p>Action taken adhere to information sharing guidance on sharing sensitive/third party information. This may require a separate/edited version of the safeguarding plan to be shared.</p>
<b>Partnership</b>	Where required the safeguarding enquiry evidence multi-disciplinary workings, assessment, the management of risk and shared decision making
<b>Accountability</b>	<p>Good record keeping guided by recording standards (see link)</p> <p>As far as possible facts are established and documented appropriately</p> <p>The person is given a copy of the enquiry outcome, providing a clear statement of the Safeguarding plan and arrangements for support</p> <p>Cases with significant risks requiring ongoing monitoring and review are closely monitored and reviewed through robust line management supervision by the Team managers/ Senior Social Workers</p>

3.3 Recording of safeguarding activity should meet the practice standards set out in Manchester City Council's [Case Recording Guidance](#)

## 4. Safeguarding Enquiry Activities

4.1 The following table outlines activities which can form part of the safeguarding enquiry and this focuses on reducing risk and preventing repeat abuse or neglect by a person or an organisation:

Type of concern	Examples of safeguarding activity carried out as part of the Enquiry	Responsible agency or organisation
Unmet care and support of either the adult or their carer	Needs assessment and/or review of support plan, changes to support plan	Adult Social Care
Carer stress leading to harmful behaviour towards the cared for adult	Carer assessment, family network meeting	Adult Social Care
Poor care provided by the carer placing the cared for adult at risk	Information, advice or training for the carer	Health professionals Voluntary organisations
Health care needs not being managed appropriately	Review of health care or treatment plan	Health professionals
Fire Safety	Risk assessment and development of a fire safety plan	Fire and Rescue Service
Staff poor practice	Training, supervision, capability processes, competency assessment	Provider/Employer
Staff misconduct	HR investigation, disciplinary processes, referral to the DBS and professional registration bodies	Provider/Employer
Wilful ill-treatment or neglect	Criminal investigation	Police
Concerns about a person acting as appointee	Department of Work and Pensions (DWP) investigation change appointee or adult services set up to act as appointee	DWP Adult Social Care

Concerns about a deputy or registered attorney	Investigation, Lasting Power of Attorney revoked	Office of Public Guardian
Best interests of an adult lacking capacity are not being met causing a significant risk of harm	Application to the Court of Protection for an order or Deputyship.	Adult Social Care Health Professionals Court of Protection
Domestic Abuse	Referral to specialist service for support	IDVA Services
Forced Marriage	Application for a Forced Marriage Protection Order	Police Adult Social Care
Hate Crime	Criminal Investigation	Police
Anti-social behaviour	Tenancy revoked, court order, anti-social behaviour injunctions, prosecution	Housing Environmental Health Police
Modern slavery and trafficking	Referral to the National Referral Mechanism (NRM)	Police Adult Social Care Health professionals
Internal care concerns	Internal investigation and review, service improvement	Care Provider
Exploitation by radicalisers	Referral to the Channel Panel	Police Adult Social Care Health professionals
Poor quality care	Contract monitoring and compliance, quality improvement activities	Quality, Performance and Compliance teams
Failure to meet standards in NHS and social care services	Regulatory and enforcement action, cancellation of registration	Care Quality Commission
Breach of rights of a person detained under the Mental Health Act 1983	Regulatory and enforcement action	Care Quality Commission Mental Health Act Commissioner
Unauthorised use of DOLS	Best interests assessment, follow up action such as providing information or training to prevent a recurrence	DOLS Supervisory Body



Harmful behaviour of another person with needs of care and support	Risk assessment, behaviour support plan, referral to specialist service, behaviour contract	Care provider Adult Social Care Health professionals
Fraud by a person appointed as financial deputy	Fraud investigation, fitness to practice referral with referral to the Police	Office of the Public Guardian
Irregular or suspicious activity relating to a bank account	Fraud investigation with referral to the Police	Bank Fraud Investigation Unit Police
Bogus callers or rogue traders	Investigation and prosecution	Trading Standards
Breach of health and safety legislation	Investigation and enforcement action	Health and Safety Executive
Civil remedies	Taking out injunctions, suing for damages	Persons (with support from family, advocates, support organisations, etc.)

## 5. Self-Neglect and Hoarding Policy

### 5.1 MCC Adult Social Care Self-Neglect and Hoarding Policy

## 6. Managing High Risk Together

### 6.1 Manchester Safeguarding Partnership - Managing High Risk Together Pathway

### 6.2 Adult Social Care - High Risk Protocol

## 7. Making Safeguarding Personal Toolkit

### 7.1 Local Government Association Making Safeguarding Personal Toolkit

## 8. Serious Incident and Safeguarding Adult Review Policy

### 8.1 MCC Serious Incident and Safeguarding Adult Review Policy

## **9. Forced Marriage Protocol**

9.1 Adult Social Care - Forced Marriage Protocol

## **10. People in Positions of Trust Policy**

10.1 MSP PiPoT Policy

## **11. Safeguarding Adult Reviews**

11.1 MSP Learning from safeguarding adult reviews

## **12. Safeguarding Adults Audit**

12.1 Adult Social Care Quality Assurance Framework

## **13. Advocacy**

13.1 Voiceability Advocacy Service

## **14. Domestic Abuse Risk Assessment (previously known as RIC)**

14.1 DASH - Domestic Abuse, Stalking and Harrassment Checklist

## **15. Manchester Safeguarding Partnership - Escalation and Resolution Protocol**

15.1 MSP Escalation and Resolution Protocol

## **16. Version control, communication and cascading**

16.1 It is important that version control is managed and maintained by those writing or reviewing policy documents to ensure that adult social care staff are consistently using the most up to date version of policy.

16.2 Any amendment to the original policy should be recorded in the version control table on the front page. It should state the version of the document being amended, provide a description of the change, by who and on what date, with the revised version being made explicit on the original front-page table.

16.3 Once a new policy has been completed and signed off by DMT or a review of policy has been finalized, this should be communicated effectively to all adult social care staff. The Policy Assurance Group will forward a copy to the Business Improvement Team who will ensure it is included in the prospective adult social care broadcast.

Business Improvement Team - [cfmessage@manchester.gov.uk](mailto:cfmessage@manchester.gov.uk)

## 17. Storage and access to policy

17.1 All adult social care policies will be stored on the Adult Policy Procedure and Practice Portal (APPP) which can be accessed here  
<https://www.manchesterapppp.co.uk/>

APPP will maintain a spreadsheet on behalf of MCC (Manchester City Council) adult social care that will list local active policies and the dates in which they are due for review.

17.2 The Policy Assurance Group (PAG) will be notified by our partners at APPP when a particular policy is due for review, who will contact the owner of the policy to prompt review.

## 18. Useful links

Office of Public Guardian: [How we deal with concerns](#)

Care Quality Commission: [Safeguarding People](#)

Manchester Safeguarding Partnership: [Adults Policy and Procedures](#)

## Appendix A – Minute Taker Request Form

### Minute Taker Request Form for Section 42 Safeguarding Planning & Outcomes Meetings

**Please ensure you read all this form**

#### **Section 42 Planning Meeting Purpose:**

This meeting is to plan a formal safeguarding enquiry into allegations of abuse and to establish the facts and actions required to protect/safeguard the individual or others. It includes

- agreeing the confidentiality statement
- ensuring record of attendance and contact details are recorded
- sharing information about the safeguarding concern/allegation
- identify individuals desired outcomes from the safeguarding activity
- agree actions and action owners

#### **Outcomes Meeting Purpose:**

This meeting is to formally conclude the safeguarding S42 enquiry so that the safeguarding activity can be closed:

It includes

- agreeing the confidentiality statement
- ensuring record of attendance and contact details are recorded
- sharing the findings of the S42 enquiry
- identifying any ongoing risks to individuals or others
- agreeing a safeguarding protection plan if required
- considering if individuals desired outcomes have been met
- considering if any further action is required, by whom and by when

ALL Minute taker requests for Section 42 safeguarding planning or outcomes meetings are sent to - [qualityassurance@manchester.gov.uk](mailto:qualityassurance@manchester.gov.uk).

**Please be mindful of the Business Rules below.**

Minute takers are **available from 10.00am** and meetings should finish no later than 4.00pm. Whilst we will try to accommodate every request, we do ask for a **full five days** notice prior to your meeting.

Minutes will be written as a record of the meeting and will not be verbatim. On completion minutes will be sent back to the Enquiry Lead of the safeguarding meeting to check they are correct.

**Business support will only distribute minutes** once confirmed correct by the Enquiry Lead and **if they have all the necessary attendee details and contacts**. It is the responsibility of the Chair/Enquiry Lead to ensure these details are obtained at the meeting.

<p><b>Business Rules when requesting a minute taker</b></p>	<p><b><u>When it has been confirmed that a minute taker is available the Enquiry Lead must:</u></b></p> <ul style="list-style-type: none"> <li>▪ advise the minute taker if they are required for a <b>S42 planning meeting or an outcomes meeting</b>. This helps them understand the purpose of the meeting.</li> <li>▪ Provide the <b>minute taker with a summary</b> of the nature of the concerns <b>in advance of the planning meeting</b>.</li> <li>▪ Provide the minute taker with <b>an agenda and attendance list in advance of the meeting</b> – this provides clarity and structure of the meeting and enables the minute taker to capture salient information, including actions agreed and the action owners.</li> <li>▪ If <b>a minute taker is no longer required</b> i.e. change in circumstances <b>the enquiry lead <u>MUST cancel</u></b> the request by emailing the team email - <a href="mailto:qualityassurance@manchester.gov.uk">qualityassurance@manchester.gov.uk</a>.</li> </ul>
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Name of person requesting Minute taker, please include all contact details:	
The Enquiry Lead & Chair details:	
Name of citizen: <b>Please use separate forms if you are booking separate meetings.</b>	
Citizen's Liquid logic ID:	
Date & Time:	
Outline reason for the meeting (see business rules above):	
Please provide the details of how the Minute taker will join the meeting virtually.	

<b>We are unable to book any minute takers without this information.</b>	
--	--

Thank you in advance for your support.

## Appendix B – Safeguarding Planning Meeting Template



MANCHESTER  
CITY COUNCIL

### CONFIDENTIAL

#### Planning Meeting Minutes

#### Safeguarding Vulnerable Adults

**Date:**

**Venue:**

**Customer Details:**

**LL ID:**

#### Confidentiality statement:

This meeting is held in accordance with the Manchester Multi-agency Safeguarding Policy.

The issues discussed are confidential to the members of the meeting/conference and the agencies they represent. They will only be shared in the best interests of the vulnerable adult or in the wider public interest.

Minutes of the meeting are circulated on the strict understanding that they will be kept confidential and stored securely according to the procedures of the receiving agency.

In certain circumstances it may be necessary to make the minutes of the meeting available to the courts, solicitors, or other professionals involved in the support of the vulnerable adult.

#### Attendance

Name	Designation and Agency	Contact Details (address or e-mail)

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### Apologies

Name	Agency

### Outline of allegation or concerns

--

### Information sharing within meeting

--

### Risk assessment (of individual and other vulnerable adults)

--

### Any immediate action to be taken/already taken

--

### What are the customer's views? What do they want to happen?

--

### Actions from meeting

Name	Agency	Role in Enquiry	Completion date
<i>e.g: A.N.Other</i>	<i>Adult Social Care</i>	<i>Feedback to referrer</i>	<i>DD/MM/YYYY</i>




**Additional Comments**

--

**Date and time of next meeting**

--

**Please report any important omissions or inaccuracies in these minutes to the Lead Enquiry Officer or Chair within 7 days of receipt otherwise it will be assumed that the minutes are agreed.**

**Name of Chair:**

**Signature:**

**Date:**

## Appendix C – Safeguarding Outcomes Meeting Template



MANCHESTER  
CITY COUNCIL

### CONFIDENTIAL

#### Outcomes Meeting Minutes

#### Safeguarding Vulnerable Adults

**Date:**

**Venue:**

**Customer Details:**

**LL ID:**

#### Confidentiality statement:

This meeting is held in accordance with the Manchester Multi-agency Safeguarding Policy.

The issues discussed are confidential to the members of the meeting/conference and the agencies they represent. They will only be shared in the best interests of the vulnerable adult or in the wider public interest.

Minutes of the meeting are circulated on the strict understanding that they will be kept confidential and stored securely according to the procedures of the receiving agency.

In certain circumstances it may be necessary to make the minutes of the meeting available to the courts, solicitors, or other professionals involved in the support of the vulnerable adult.

#### Attendance

Name	Designation and Agency	Contact Details (address or e-mail)


### Apologies

Name	Agency

### Outline of allegation or concerns

--

### Information sharing within meeting

--

### Risk assessment (of individual and other vulnerable adults)

--

### Any immediate action to be taken/already taken

--

### What are the customer's views? What do they want to happen?

--

### Actions from meeting

Name	Agency	Role in Enquiry	Completion date
<i>e.g: A.N.Other</i>	<i>Adult Social Care</i>	<i>Feedback to referrer</i>	<i>DD/MM/YYYY</i>


**Additional Comments**

--

**Date and time of next meeting**

--

**Please report any important omissions or inaccuracies in these minutes to the Lead Enquiry Officer or Chair within 7 days of receipt otherwise it will be assumed that the minutes are agreed.**

**Name of Chair:**

**Signature:**

**Date:**

## Appendix D – Safeguarding Adults Meeting Minutes Template



MANCHESTER  
CITY COUNCIL

### CONFIDENTIAL

#### Adults Meeting Minutes Safeguarding Vulnerable Adults

**Date:**

**Venue:**

**Customer Details:**

**LL ID:**

#### Confidentiality statement:

This meeting is held in accordance with the Manchester Multi-agency Safeguarding Policy.

The issues discussed are confidential to the members of the meeting/conference and the agencies they represent. They will only be shared in the best interests of the vulnerable adult or in the wider public interest.

Minutes of the meeting are circulated on the strict understanding that they will be kept confidential and stored securely according to the procedures of the receiving agency.

In certain circumstances it may be necessary to make the minutes of the meeting available to the courts, solicitors, or other professionals involved in the support of the vulnerable adult.

#### Attendance

Name	Designation and Agency	Contact Details (address or e-mail)


### **Apologies**

<b>Name</b>	<b>Designation and Agency</b>	<b>Contact Details (address or e-mail)</b>

### **Outline of Allegation or Concerns**

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### **Information Sharing Within Meeting**

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### **Outstanding Concerns**

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### **General Discussion and Queries**

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### **Summary**

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### **Actions From Meeting**

<b>Name</b>	<b>Agency</b>	<b>Role in Enquiry</b>	<b>Completion date</b>
<i>e.g: A.N.Other</i>	<i>Adult Social Care</i>	<i>Feedback to referrer</i>	<i>DD/MM/YYYY</i>

### **Additional Comments**

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### **Date and time of next meeting**

--

**Please report any important omissions or inaccuracies in these minutes to the Lead Enquiry Officer or Chair within 7 days of receipt otherwise it will be assumed that the minutes are agreed.**

**Name of Chair:**

**Signature:**

**Date:**

## Appendix E – Safeguarding Adults Practitioner Checklist

### Safeguarding Adults Practitioners Checklist – v3

<b>Name of Person</b>	
<b>LL ID</b>	
<b>Date of referral</b>	

Safeguarding Task	Tick when complete	Date
<b>Check referral details</b> - basic demographics, GP, key contacts, involved agencies. Are they up to date?		
<b>Risk assessment: it is important to note that risk can be fluid.</b> Initial checks are required to establish if the person is in immediate danger? If yes, discuss a plan to safeguard with a manager/other relevant professional (i.e. police, ambulance).  If this is a provider - explore if an immediate safeguarding plan/ risk management assessment has been put in place and request a copy - to be uploaded in the safeguarding area.  If the referral has been received via Adult MASH or raised by allocated worker, what level of response has been indicated within the recommendation form:  <b>Red</b> - respond within 4 hours.  <b>Amber</b> - respond within 24 hours.  <b>Green</b> - respond within 24 hours		
<b>Discuss concerns with the referrer</b> - confirm receipt of referral. Obtain further information if required. Advise the referrer what you are going to do in response and record this. If unable to speak with the referrer, record this and the reason.		
<b>Initial planning discussion with manager</b> – this must be recorded.  If the level of response indicated by Adult MASH changes following initial information gathering and discussion with your manager, you must record this.		



<p>A formal Sec 42 enquiry should be allocated to a qualified and experienced professional within 48 hrs of the decision being made. If it is not possible the reasons must be recorded.</p>		
<p><b>Prior to person contact - consider SAFE enquiries</b></p> <p>Is the referral in relation to domestic abuse? Could the perpetrator be present when you call? How will you manage this?</p> <p>Do you need to complete a Domestic Abuse referral form?</p> <p><a href="#">Domestic Abuse Referral Form</a></p>		
<p><b>Making Safeguarding Personal</b> - discuss the concerns raised with the person. Consider communication needs, language and culture. Ensure the person is provided with appropriate and relevant information.</p> <p><b>Consider mental capacity</b> – does the person have the capacity to consent to the safeguarding activity?</p> <p>If unable to speak directly to the person, record the reason why.</p> <p>Ensure that the persons' views and wishes are recorded – what do they want to happen? Is there anyone that the person does not wish you to speak to or share information with?</p> <p>Record details of capacity</p>		
<p><b>Does the person require an advocate? If so, make a referral.</b></p> <p>This may also be appropriate for persons with capacity if they have 'substantial difficulties' and have no-one appropriate to support them.</p> <p><a href="#">Voiceability Advocacy Service</a></p>		
<p><b>Is there a need for police involvement?</b> Is a criminal offence suspected? Has it been reported to the police?</p> <p>This is the person's decision unless they lack capacity or there is risk to others. If required, refer to the police using the required referral form to the District Safeguarding team for your area.</p> <p>Ensure you obtain incident number and record any advice given.</p>		
<p><b>Has the provider involved notified the CQC?</b> This is the provider's responsibility, unless you have concerns that they</p>		

may be implicit in the safeguarding concerns and may neglect to do so.		
<b>Do you need to notify the Performance, Quality and Improvement Team?</b>  Email: <a href="mailto:j.gavin@manchester.gov.uk">j.gavin@manchester.gov.uk</a>  (In the absence of j.gavin - email: <a href="mailto:paul.bickerton@manchester.gov.uk">paul.bickerton@manchester.gov.uk</a> )		
<b>Is the person funded by another local authority?</b> If so, notify the funding authority (placing authority); invite a representative to any safeguarding meetings; keep the funding authority informed of progress and record all contacts.		
<b>Check records:</b> Are there previous safeguarding concerns (risk history)? Are they of the same nature? Record actions explored previously to aim to minimise risks.  Record if there are any changes in terms of appearance of need for care and support, risks, ability to make informed and valid decisions, in relation to the nature of the concern - i.e. self-neglect? Record on safeguarding episode.  If the allegation involves a 'provider' - how can their records be accessed? Do the records support/refute the allegation (remember acts of neglect/ omission do not need to be intentional and are based on a balance of probability)?  Safeguarding planning - has the provider identified any areas of learning? If so record and identify responses to be taken to prevent future harm occurring.  Ensure any information obtained is uploaded within the safeguarding episode.		
<b>Is a planning meeting required:</b>  Prepare for planning meeting using the Safeguarding Planning Meeting Template.  For minute taker email request to; <a href="mailto:quality.assurance@manchester.gov.uk">quality.assurance@manchester.gov.uk</a>  5 working days notice is required, but can be negotiated depending on urgency.  Ensure all parties are clear on any actions agreed		

<p>Will you need to reconvene?</p> <p>Ensure minutes are checked by the Chair for accuracy.</p> <p>Once agreed as final, upload in the safeguarding area and send to all attendees.</p>		
<p><b>Is an outcomes meeting required:</b></p> <p>Prepare for outcomes meeting using the Safeguarding Outcomes Meeting Template.</p> <p>Have all the actions agreed been completed?</p> <p>Record final outcome, on the balance of probabilities, is abuse/mistreatment indicated or not?</p>		
<p><b>Safeguarding plan:</b> Is one required? Do all relevant parties have a copy? When will it need to be reviewed? By who?</p>		
<p><b>Feedback to person.</b></p> <p>Have you given feedback on the outcomes to the person/representative and other involved agencies?</p> <p>It is important to ensure feedback is provided to the person/representative, referrer(s) and involved agencies regarding outcomes, whether this is agreed at the conclusion of the enquiry, during the enquiry or at the point of initial decision making.</p>		
<p><b>Closure and send for authorisation:</b></p> <p>Are you confident that there is nothing outstanding? Close the safeguarding enquiry but ensure where required that any safeguarding plan has a review date set.</p> <p>Ensure that a closing summary is recorded.</p>		

## Appendix F – Safeguarding Adults Managers Checklist

### Safeguarding Adults Managers Checklist v3

Person ID:	Tick	Date
<b>Decision making;</b> Was the decision to progress to S42 enquiry agreed between the Enquiry Lead and yourself? If not a S42, has an appropriate response been made and <b>preventative</b> measures considered?		
<b>MSP;</b> Is the person's voice heard throughout the safeguarding enquiry? Are their desired outcomes evident? Has the Enquiry Lead worked in <b>partnership</b> with the person/significant others?		
<b>Communication/Advocacy;</b> Are you satisfied that the person has been <b>empowered</b> to fully participate or that they have been appropriately advocated for?		
<b>MCA/Human Rights;</b> Are you satisfied that MCA and Human Rights have been considered and appropriately recorded where required?		
<b>Provider investigation standards;</b> If the initial enquiry was conducted by a provider, are you satisfied with the standard?		
<b>Multi-agency collaboration;</b> Has a "whole family" approach been applied? Have relevant agencies been consulted with?		
<b>Actions;</b> Are you satisfied that any actions taken have been <b>proportionate</b> to the circumstances? Can you confirm all necessary agreed actions have been completed, if not is there a reason recorded? Is the person adequately <b>protected</b> ?		
<b>Feedback;</b> Are you confident that the person/advocate/referrer has been fully informed of any outcomes from the safeguarding enquiry?		
<b>Escalation;</b> Did the case require escalation to consider SIR/SAR or HRP? If so, was this discussed with a Senior Manager and appropriate action taken?		
<b>Recording with Care;</b> Are you satisfied with the standard of recording? Does it demonstrate <b>accountability</b> ? Is the rationale for any decision making evident?		
<b>Timescales;</b> Are they met? If not, has a reason been recorded?		

Concern raised immediately or by the end of the working day		
Decision made and allocated within 48hours		
Enquiry planning within 7 days		
Enquiry complete within 28 days		
Outcomes and closure within 21 days (following enquiry)		

## Appendix G – Provider Led Enquiry Template



### Manchester City Council Provider Led Enquiry Report

Please note that this is not a safeguarding referral form. This document should only be used following prior discussion and agreement with a member of Manchester City Council's Adult Social Care Team.

Please ensure you refer to the guidance notes for care providers completing provider led enquiries document when completing this report.

We require return of this completed document within **5 working days** to ensure actions have been completed in a timely manner.

Please ensure you attach copies of the documents you have considered and reviewed as part of the enquiry.

If you have any questions or difficulties in completing this document, please contact the social worker who made the original request to you for completion of the document in order to seek clarification and support.

***NB: Parts 1 and 2 to be completed by Adult Social Care representative***

<b>Part 1: Provider details</b>	
Provider name	
Provider contact details	Address: Phone Number: E-mail:
Provider enquiry officer details	Name: Position:
Date provider enquiry report requested by Manchester City Council	
Date of completion of enquiry	
Manchester City Council social worker contact details	Name: Team: Manager: Phone Number: E-mail: Manager E-mail:
<b>Part 2: Personal details of the adult at risk</b>	
Name	
Date of birth	
Contact details	Address: Phone number: E- mail:

NHS number			
Gender			
Ethnicity			
GP details	Name of GP and practice: Address: Phone number: E-mail:		
LAS ID			
Is adult deceased	Yes		No
If yes date of death:			
Please provide details of any diagnosis/ long term health conditions of the adult at risk:			

**NB: Parts 3- 7 to be completed as fully as possible by the care provider.**

<b>Part 3: Communication</b>			
Does the adult have any communication difficulties <i>NB: Some examples of communication difficulties could include speech/ hearing/ sight loss, language barriers, impact of diagnosis such as dementia</i>	Yes		No
If yes please provide details of the communication difficulties and the impact upon the adult at risk. Please include identified aids/ adaptations/ other forms of support to aid communication:			
<i>NB: This could include use of relevant interpreter, technology enabled care (TEC), application of communication support plan</i>			
<b>Part 4: Views of adult at risk</b>			
Does the adult at risk have capacity to consent to safeguarding enquiries	Yes		No
Is the adult at risk subject to a DoLS	Yes		No
Please outline further information with regards to the adult at risks capacity to engage with the safeguarding enquiry process:			
If the adult at risk lacks capacity do they have a representative who is able to advocate on their behalf such as a family member, close friend or appointed advocate	Yes		No
If yes please provide contact details for identified representative	Name: Address: Phone number: E-mail:		

		Relationship to adult at risk:	
<b>If you are unable to identify a representative please contact the adult social care social worker who has requested completion of this provider enquiry form. They may need to arrange a referral for independent advocacy</b>			
Record below the views of the adult at risk or their representative following discussion with them about the allegation raised and the enquiry process.			
<i>NB: Are they aware of the concern? How do they feel about the alleged incident? What would they like to happen in their own words? Are they in agreement with the enquiry taking place?</i>			
<b>Has the completion of this enquiry triggered you to believe that the adult at risks needs may have changed and that they may benefit from reassessment? If yes please contact adult social care to make a referral.</b>			
<b>Part 5: Details of allegation</b>			
Date of alleged incident			
Did the alleged incident occur in Manchester	Yes		No
<b>If no please cease completion of this enquiry and ensure the safeguarding concern is reported to the local authority where the incident occurred, who will hold responsibility for completion of enquiries and any safeguarding response.</b>			
Details of alerter		Name: Position: Phone number: E-mail: Relationship to adult at risk:	
Type of abuse. Please record all that apply  <i>NB: physical, sexual, psychological/ emotional, financial/ material, neglect/ acts of omission, discriminatory, organisational/ institutional, self neglect, modern slavery</i>			
Details of the alleged incident. Please provide a clear account using facts, detailing who/ when/ where/ why/ how:			
Was the alleged incident witnessed		Yes	No
If yes please provide contact details for identified witness		Name: Address: Phone number: E-mail: Relationship to adult at risk:	
Was the adult at risk been injured/ suffered harm		Yes	No



If yes please provide details of any injury and harm sustained and the steps you have taken to address and manage this:

Details of alleged perpetrator	Name: Date of birth: Address: Phone number: E-mail:		
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Is the alleged perpetrator an employee	Yes		No	
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If yes please provide further details:  
 Position:  
 Length of service:  
 Any other relevant information:

Is the alleged perpetrator an agency worker	Yes		No	
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If yes please provide contact details for the agency	Name: Address: Phone number: E-mail:		
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Is the alleged perpetrator another resident or service user	Yes		No	
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If yes and the resident is known to other professionals please provide their details	Name: Address: Phone number: E-mail:		
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Is this the first allegation of abuse by this perpetrator	Yes		No	
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If no please provide further details of past incidents, outcomes and steps taken to remove, reduce and manage identified risks:

**Has the completion of this enquiry triggered you to believe that the alleged perpetrators needs may have changed and that they may benefit from reassessment? If yes please contact adult social care to make a referral.**

**Part 6: Enquiry/ Risk Assessment/ Safeguarding Planning**

Has a potential crime been identified during the course of completing this enquiry	Yes		No	
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**If yes please cease enquiry, report the incident to the police and discuss and refer back to the assigning social worker to determine appropriate next steps**

**Please record crime reference number from police referral:**

As a registered provider do you believe the threshold has been met to notify CQC	Yes		No	
If yes please provide the reference number and date of notification:				
If no please provide reason:				
Has the adult at risk's funding body/ authority been notified	Yes		No	
If yes please provide the funding body/ authority details and the date of notification:				
If no please provide reason:				
Has an incident report/ statement been undertaken	Yes		No	
If yes please provide the date that this was completed and by whom:				
If no please provide reason:				
Has a medical assessment been undertaken	Yes		No	
If yes please provide the date that this was completed and by whom:				
If no please provide reason:				
Has the adult at risk's family/ next of kin been notified	Yes		No	
If yes please provide the date that this was completed and by whom. Please also provide the contact details of the family member/ next of kin:				
If no please provide reason:				
Has the adult at risk's risk assessment and care plans been reviewed and updated	Yes		No	
If yes please provide the date that this was completed and by whom:				
If no please provide reason:				
Were any additional preventative measures undertaken/ put in place	Yes		No	
If yes please provide details of what these were and how these will be monitored and reviewed:				
If no please provide a reason:				
Please record the details of any other individuals you have spoken to as part of your enquiry				
Name:	Name:			
Agency:	Agency:			
Position:	Position:			

Phone number:	Phone number:	
E-mail:	E-mail:	
Date of contact:	Date of contact:	
Please record the details of any documents or other materials you have reviewed as part of your enquiry. <i>NB: This may include case notes/ CCTV/ incident forms/ referral forms/ your organisations policies and procedures etc</i>		
Document/ material reviewed:	Document/ material reviewed:	
Document date:	Document date:	
Date reviewed:	Date reviewed:	
Document/ material reviewed:	Document/ material reviewed:	
Document date:	Document date:	
Date reviewed:	Date reviewed:	
Please summarise your analysis/ findings of the alleged incident and what actually happened as determined from your enquiry work. What have you concluded and why:		
In your view please select from the following outcomes which you feel is the most likely with regards to the alleged incident following completion of your enquiry		
Fully upheld	Partially upheld	Not upheld
If the alleged perpetrator is a staff member or other person in a position of trust (PiPOT) has a referral been made to the DBS and other professional bodies	Yes	No
If yes please provide the date that this was completed and by whom and also provide any reference number provided:		
If no please provide reason:		
<b>Part 7: Outcomes</b>		
Once enquiries have been completed and actions taken to address the identified issues please discuss outcomes with the adult at risk or their representative to establish if they feel their previously identified preferred outcomes have been met. Following discussion please choose from the following outcomes		
Fully met	Partially met	Not met
Please document any further comments/ feedback from the adult at risk or their representative in their own words with regards to the outcomes of the enquiry:		

Please document any further comments/ feedback from the adult at risk or their representative in their own words with regards to their thoughts and feelings re their current and ongoing safety					
More safe		Less safe		Neither more or less safe	
Does the adult at risk or their representative wish to provide any further feedback/ comments with regards to any aspect of this enquiry? Please record any further feedback/ comments in the adult at risk or representatives own words:					
<p><i>NB: Did they feel included/ listened to/ did they feel they were treated with dignity and respect</i></p> <p>Please outline any lessons learnt for your organisation with actions/ timescales/ monitoring processes to address identified issues and embed positive change:</p>					
<p><i>NB: What could have been done differently and why/ how will learning and changes be effectively embedded across your organisation</i></p>					
<b>Part 8: Sign off</b>					
I am satisfied that I have undertaken this enquiry appropriately and ensured that proportionate safeguards have been put into place to mitigate and risks identified. I confirm I have attached copies of all documents considered as part of the enquiry and completed the document inventory in Part 9					
Signature					
Print name					
Position					
Date					
<b>Part 9: Document inventory</b>					
<b>Name of document/ other source</b>				<b>Dated</b>	

Please forward to referral to - [mcsreply@manchester.gov.uk](mailto:mcsreply@manchester.gov.uk) Tel - 01612345001

Please mark as Provider Led Enquiry, so that Contact Centre can prioritise this and send the referral to the Enquiry Lead Officer ASAP