

Moray's Operational Guide to Adult Support and Protection



MORAY OPERATIONAL ADULT SUPPORT AND PROTECTION PROCESS

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1. Adult Support & Protection in Moray

Social Work have worked hard over the years to establish Adult Support and Protection within Moray.

Much of the operational workings of Adult Support and Protection has been person dependent within Social Work until the last few years, and we are keen for our Social Work Teams to embrace and work with individuals in our communities proactively and with care, to ensure that Adult Support and Protection matters are at the forefront of discussion, interaction and work between professionals and individuals.

We know it is important to have clear and robust processes in place to ensure we can achieve good outcomes for individuals in our communities, but also to ensure that we are clear in our roles moving forward, and we are consistent in our approach to support those at risk of harm.

In this Guidance you will find documented processes for Adult Support and Protection. Not all of the guidance is relevant for all staff, however, it is important you have oversight of this and you read and understand what is expected of you and your colleagues with regard to Adult Support and Protection matters.

2. ASP Legislation and Multi Agency Policies

This Operational Guidance should be read in conjunction with:

Grampian Interagency Policy and Procedures for Support and Protection of Adults at Risk of Harm

Adult Support and Protection (Scotland) Act 2007

Adult Support and Protection Revised Code of Practice

<u>Grampian Multi-Agency Adult Protection Initial Referral Discussion (IRD) Protocol –</u> June 2021

Multi-Agency Policy and Procedure for the Support and Protection of Adults at Risk of Harm in Moray (currently in draft)

This guidance has been developed as a working guide for all practitioners – including Council Officers, Social Workers, Team Managers, Consultant Practitioners and Administration Support.

Locality Managers should have oversight and understanding of this Guidance, and ensure that this is accessible to NHSG colleagues within Moray. This document will also be shared with Police Colleagues for their reference.

3. Access Team

The Access Team is the single point of contact for Adult Support and Protection Referrals.

The Access Team also receives Police Concern Reports, Scottish Fire and Rescue (SFRS) Referrals, NHS24 Concerns and Ambulance Service Referrals.

Should a Police Concern Report be received to the Access Team and documents 'Y – person at risk of harm' further screening will take place using the Adult Support and Protection Screening Tool. It may be that this is not required following further consultation by the Screening or Allocated Social Worker as

- The Adult may already be known to Adult Support and Protection
- The Concern Report is an update of information (for example from a case conference, IRD or other meeting taking place).

In these cases this will be clearly documented within the screening tool event as to why the Screening Tool is not completed.

Should an NHS 24, SFRS or Scottish Ambulance Service Referral be received to a Social Work Team and it is thought that further screening is required in relation to Adult Support and Protection – this is discussed directly with the Social Worker's Team Manager who will give further advice and guidance. Should further screening be required an Adult Support and Protection Referral will be populated on Carefirst, and the screening stage commenced.

4. Moray Screening Tool

A Moray-specific Adult Support and Protection Screening Tool (ASP Documents) has been developed to assist Social Work in making further inquiries. The aim of the Tool is to assist Social Work in gathering information and provide evidence of decision making and any further action to ascertain if an individual could be at Risk of Harm (Adult Support and Protection, revised code of practice). Social Work are the Lead Agency for Adult Support and Protection and it is important that we are seen as such by having a robust, measured and evidence based response to Adult Support and Protection matters.

4.1 Screening Tool Development

The Screening Tool was first introduced in December 2020, with an updated version in August 2021. The Access Team piloted the Screening Tool for a number of months and changes were incorporated following consultation with those who used the Tool. From feedback provided to the Adult Protection Team it is clear that the Tool has helped Social Workers to focus the inquiry stage, and to ensure relevant information is recorded in a way that documents the Adults journey within Adult Support and Protection. During consultation sessions the Social Workers of the Access Team have reported an increase in confidence and ability to analyse information – building on their knowledge of Adult Support and Protection.

4.2 Accessibility

To Social Workers, Council Officers, Team Managers and Administration Staff this Guidance has been developed to ensure continuity and consistency in your role. It is recommended that all Social Work Teams ensure that this Guidance is available to all staff, and stored electronically within Team Folders and Sharepoint to ensure accessibility. The Guidance will document the process at each stage of the Adult Support and Protection journey and the roles of each individual.

4.3 Screening

As stated previously, not all Adult Support and Protection Referrals will lead to further Adult Support and Protection interventions. However, they will all lead to completion of the Adult Protection Screening Tool. The only exception to the rule is when the Referral is in relation to an individual who already meets the three point test and has a classification on Carefirst as an 'Adult at Risk of Harm.' This can be viewed on the

Adults Carefirst Desktop. In these cases the Social Worker will be responsible in documenting the reason for not proceeding to the Screening Tool completion clearly within the Screening Event.

Screening can take place by a Social Worker and does not necessarily need to take place by a trained Council Officer. It is expected that the Advanced Practitioner for the allocated team has oversight of the Adult Support and Protection Referral received, and will be available to provide additional support. Should the Advanced Practitioner be unavailable the Screening Social Worker should defer to their Team Manager, Advanced Practitioner for ASP, or Consultant Practitioner for ASP.

It is imperative that Social Workers undertaking the Screening Tool are not completing the tool in isolation. Making decisions in Adult Protection is about consultation, exploration and building evidence. No worker should feel they are making decisions in isolation at any point in the process. We want to move away from person dependency in Moray, and it is important that this is embraced moving forward to ensure we build robust systems.

As part of the Screening Tool Social Workers are required to make contact with other organisations involved in supporting the Adult. This helps to build the 'bigger picture' and provides an evidence base for decision making. It is important that local organisation have awareness of our Statutory Duties, and they are responsive to our communication and contact with them.

5. Adult Support and Protection for Young People (16-21 year olds)

The cross over between Adult and Children's Services can be complex, but in Moray we ensure that we are working together to get care and protection right for our children and young people.

Should the Access Team (Adults) receive an Adult Support and Protection referral for a young person, formal screening processes will be undertaken in discussion with Children Services. Where it is concluded that the young person may be in need of protective measures under Adult Support and Protection (Scotland) Act 2007 or that they are at Risk of Harm as defined within the National Child Protection Guidance 2021 an Initial Referral Discussion (IRD) will take place with representation from

Children and/or Adult Services. It is important that the right people are brought together and that the young person is in the centre of discussion, as this will inform our next steps. A safety plan for the young person will be completed as per whichever procedures are appropriate and Children and Adult Services will work together to ensure the young person receives the right support and protection to meet their needs as directed by the IRD.

Where a decision is taken to not hold an IRD, Children and Adult Services will discuss which service is best placed to offer support to the young person where appropriate.

We recognise that young people can be particularly vulnerable and we are working jointly with our Children Services colleagues and partners on an implementation plan for our draft Vulnerable Young Person's Protocol, as evidenced within our Adult Support and Protection Improvement Plan. The protocol will not supersede Child or Adult Protection processes but will compliment them when working with vulnerable young people who may be at risk of certain harms. The protocol ensures that Children and Adult Services work closely together to ensure the care and protection of all children and young people who need our support.

6. ASP Training Modules

We have ensured our Adult Support and Protection Module 2 training incorporates information regarding our Screening activities, and we communicate the necessity for response to our inquiries in a timely manner. Module 2 training in Adult Support and Protection and other bespoke Adult Protection training activities are available all year round, and it is expected all Care Providers within Moray, Care Homes, Day Centres and other support organisations take part to ensure awareness of Adult Protection and our Local process.

We know informing referrers of Adult Support and Protection Referrals has been a weak point for us in Moray. This has been highlighted to us from referring Agencies in the past, and we are working on ways in which information can be shared appropriately and in a timely fashion following each referral received. The introduction of our Advanced Practitioner for Adult Support and Protection will work to build awareness of this necessity and feedback to our Operational Meetings on a regular basis. We have also incorporated this task into our Screening Tool – to encourage Social

Workers to communicate the outcome of their referrals. We will continue to monitor this process, and can analyse the data input to note any progress on the matter.

A Training for Adult Support and Protection Guide is available (<u>ASP Documents</u>), which outlines the training modules available, and aligns this to our workforce giving the reader a clear insight into the training they will be expected to undertake.

7. Initial Referral Discussions (IRD)

Part of our duty to Inquire now includes Initial Referral Discussions (IRD) within Moray. IRDs have been in place since December 2021 and will evidence our ability to have a clear multi-disciplinary approach to supporting Adults at Risk of Harm.

An IRD is a process to allow professionals to discuss concerns and to agree any actions. IRDs are embedded into Child Protection Services, and their purpose has proved invaluable (Moray's Child Protection Guidance) to assist in keeping children safe and to ensure information is shared in a timely manner between professionals.

We want to have good outcomes for Adult Support and Protection in Moray. We want Moray to do all we can to assist in keeping adults safe from harm. We need to ensure that we work collaboratively and in partnership with other Agencies in discussion and supporting Adults who may be at risk of harm in Moray.

7.1 Purpose of IRD

As stated the purpose of an IRD is to allow professionals to discuss concerns and agree actions. It is not a one-off discussion, it is a *process*. The Adult Support and Protection IRD in Moray is the fundamental route to good practice in protecting Adults at Risk of Harm, involving only those relevant professionals who have a contribution to make to allow sharing of information to protect an Adult from Harm.

We see a future where Moray's Adult Support and Protection IRD Process mirrors that of our Child Protection IRD Process in as much as it will:

- Share Information about an Adult for whom they are concerned
- Asses and analyse the significance of the information
- Determine if an Adult may be of need of protection or in need of other supports
- Plan what will be done in order to assess or investigate harm to the Adult.

An IRD is not a one off event. It allows for the assessment and planning to develop as agencies and organisations share and evaluate information. The IRD will determine the action required to reduce risk for an individual who is at risk of harm.

The IRD will consider:

- Any immediate action required to protect the Adult
- Whether a criminal offence has taken place
- If ASP interview, or any other intervention is required consideration of assessment, banning, removal order or warrant for entry
- Further Social Work, or other organisational supports which would be of benefit to the Adult should ASP measures not be required
- Allocation of Advocacy to offer further supports to the Adult
- Allocation of Council Officer to proceed to Investigation
- Decision if the Adult may meet the 3 point test in relation to Adult Support and Protection

The decision to proceed to an IRD will be made following completion of the Screening Tool. However, it is recognised that an IRD will also take place:

- Where 5 separate Adult Support and Protection referrals have been received in a two year period - this will give an opportunity for the IRD to consider the separate referrals together, to form a robust response to any further support or protection the Adult may require.
- A decision is made to progress to Large Scale Investigation. In this case an LSI consideration/IRD will take place.
- Complex cases transitioning from Children Services/Through Care and After Care in which careful consideration to Adult Support and Protection measures should be made.

With regard to transition cases the decision to proceed to IRD will be made following consultation with relevant case holders and managers within Children Services, Commissioning (should they be involved) and the ASP Consultant Practitioner.

7.2 Council Officer Duties

Following agreement that the Adult may be at Risk of Harm the Investigation stage is initiated. This involves the Council Officer undertaking further Investigation. This process takes place within 21 working days.

In Moray, Council Officers are specially trained Social Workers who have had at least 1 year of post qualifying experience.

Council Officers will be expected to gather further information and undertake assessments as to the Adults circumstances. Council Officers will be required to analyse the information gathered and form the basis of identifying the risks which the Adult may be subject to.

This information will be documented within the ASP Investigation Assessment (ASP Documents) and Council Officers will be required to provide an update at Initial Adult Support and Protection Case Conference (ASPCC) if necessary to talk through the actions in order to assist the multi-disciplinary group in reaching decisions regarding the support and protection the Adult may require.

Council Officers will also be required to update and input the Chronology of Events (ASP Documents).

A Chronology report will be requested by the Council Officer to Carefirst systems when commencing the Investigation. The Chronology will be shared with the Council Officer in Excel Form. The Council Officer will then be responsible for populating the Chronology of the significant events in which have taken place. This information will be shared with all other professionals prior to ASPCC and it is expected that other disciplines will then assist in providing information to populate the report. This will allow for further discussion and analysis of information available to the multi-disciplinary group. The significance of a Chronology should not be underestimated, and its value in assessing and managing risk is imperative to group working. The ASPCC Chair will ensure full MDT involvement in Chronology population.

Further guidance with regard to the Investigation Process can be found in the Moray Interagency Adult Support and Protection Procedures (ASP Documents) in which will provide you with a more in depth look at the role of the Council Officer.

7.3 Case Conferences

You will note we no longer have Adult Support and Protection Professionals Meetings. This does not form part of the Adult Protection Process. We recognise the importance of involving the Adult at Risk of Harm in our processes in Moray, and it is expected that any meeting arranged is done so with involvement from the Adult.

We know that coming to a Case Conference can be anxiety provoking for any professional, let alone an individual who is not familiar with our workings. Therefore, the role of the Chair, Council Officer, Allocated Social Worker, Advocate, and any other professional is to encourage involvement and feedback of the Adult to the process. We cannot improve our processes without the involvement of the Adult.

We have partnered with Advocacy to devise an engagement process. This is a feedback document which will be used when in contact with the Adult to ensure they are consulted at each avenue, and their view heard, considered and actioned. We have designed a feedback guidance alongside our Advocacy partners 'Adult at Risk of Harm and the Significant People in their life: Engagement and Communication Plan' (ASP Documents) this will commence in April 2022 and will allow us to ensure we are formally capturing, listening to and taking action to improve our service moving forward.

We recognise that sometimes the Adult will not want an Advocate to assist in understanding. Therefore, the engagement process will fall to the most relevant person – being the allocated Social Worker or Council Officer. This will help us to evaluate our service, and to improve on a continual basis. The Chair of the ASPCC and RASPCC will be responsible in ensuring that every effort is made to involve the Adult within this process and that their views are actively sought.

7.4 Risk Assessment

The formation of a Risk Assessment is imperative to Adult Support and Protection Work – we use the Grampian Risk Assessment (ASP Documents) and it is expected that this is formulated as part of the ASPCC and updated at each RASPCC. The population of the Risk Assessment will fall to the Chair and Social Work at each meeting – in conjunction with all participants. This is not a task in which can be done in isolation. It is recognised that an ASPCC can take time – therefore, it may be that a separate meeting will take place to populate the Risk Assessment. This will be the decision of

the Chair of the ASPCC. It is expected that a multi-agency representation is present during this time.

7.5 Protection Plan

Within the ASPCC the formulation of a protection plan is discussed within the body of the meeting. It is recognised that in the past the protection plan is often communicated as part of the minutes of the meeting. At times this has led to confusion, and failure to progress matters. Therefore, a separate Protection and Action Plan document (ASP Documents) will be sent to all participants immediately following an ASPCC (within 48 hours). This will document tasks and professionals responsible to progress. It is expected that this document will form the basis of discussion within Core Group Meetings.

7.6 Core Group Meetings.

The formation of a Core Group will be agreed at ASPCC. The Core Group will be responsible for progressing the Protection Plan and will include the 'key players' who will be delivering the support to the Adult. It is expected that this group will meet at timely intervals in between RASPCC's. This group will feedback directly to the Chair of the meeting, who may decide to bring forward RASPCC's at any point should this be necessary. It is expected that the Chair will be given an update from the Core Group progress made following each meeting. The frequency of these meetings will be delegated by the Chair of the ASPCC. The Council Officer or allocated Social Worker will facilitate these meetings. The Council Officer or allocated Social Worker will be responsible for updating the Protection Plan and communicating to the Chair any matters which have been difficult to progress.

7.7 Review Case Conference

A Review Case Conference (Rraspcc) takes place no later than 6 months following ASPCC, and can be brought forward at any time should it become clear that matters are not progressing.

The purpose of the RASPCC is to update the professional group of any actions, and to further consider if the Adult continues to meet the three point test. RASPCCs will continue at regular intervals until the Adult is no longer subject to ASP processes.

Documentation updated at RASPCC incudes Risk Assessment, Chronology and Protection Plan. To assist in this process the Adult Support and Protection Consultant

Practitioner is on hand to offer any advice and guidance to the Chair of the RASPCC as necessary.

7.8 Case Recording

It is imperative accurate recordings are maintained of all interventions in relation to Adult Support and Protection. By doing this we ensure relevant information regarding the Adult is stored correctly, and available to those who require it. Should it not be, this could lead to prolonged or increased risk of harm, increased distress and poorer outcomes for the Adults we are trying to support.

In Moray, Carefirst is our main recording system used by Social Work. We have ensured as many documents and assessments as possible are available within Carefirst to reduce confusion and evidence the Adults journey through our service. This in turn supports our Out of Hours Social Work Team in finding our more about the Adult should they come across their case during their work.

Documents available on Carefirst in relation to Adult Support and Protection include:

- The Adult Support and Protection Referral
- The Adult Support and Protection Screening Tool Assessment
- The Adult Support and Protection IRD Summary
- The Adult Support and Protection Assessment Document
- Adult Support and Protection Case Conference minutes
- Review Adult Support and Protection Case Conference minutes

Unfortunately, we were unable to incorporate all of our documents onto this system due to incompatibility. It is therefore important that the documents below are stored within Every Client Documents using the correct naming convention (ASP Documents). These documents are:

- Adult Support and Protection Action and Protection Plan
- Adult Support and Protection Multi Agency Chronology
- Adult Support and Protection Complex Risk Assessment

It is the responsibility of the Council Officer and Allocated Social Worker to ensure these documents are available and kept up to date following Adult Support and Protection Case Conference. Ongoing support and guidance is available from the Adult Support and Protection Advanced Practitioner and Consultant Practitioner. The designated Chair for the Adult Support and Protection Case Conference is available to assist in co-ordinating the multi-disciplinary team to ensure a joint response to documenting the information required takes place. The Chair will have overall oversight of the work undertaken, ensuring that the Council Officer is not completing required documentation in isolation.

8. Adult Support and Protection Timescales

Timescales are important within Adult Support and Protection interventions to ensure we provide a consistent and timely response to all concerns.

It is important timescales are adhered to, and should any delay be apparent this is reported immediately to Adult Protection.

Adult Protection monitor timescales on a weekly basis and these are discussed at our fortnightly Operational Meetings. We want to ensure our timescales provide an effective response to Adult Support and Protection referrals, but realise they also require to be realistic and tangible.

The impact of Covid19 on Social Work and Social Care Services has been immense. The pressure Social Work is experiencing is like nothing we have experienced before. We have never worked throughout a Pandemic, and we know the after effects of Covid19 are with us for many years to come. The introduction of this Guidance has had to balance the need for a robust and timely process to be in place to protect individuals at Risk of Harm with the current pressure we are all experiencing in our working and personal lives.

We know the introduction of timescales for Adult Support and Protection will initially be difficult to achieve, and we know it will take time for us to embed this Guidance into our operational practice.

As stated, support is available from Adult Protection, Team Managers and Advanced Practitioners and we will strive to have regular feedback sessions in which any concerns regarding timescales can be discussed.

We will monitor the timescales on a continual basis. In order to evidence how we are performing, we will:

- Receive monthly Carefirst reports
- Write quarterly Adult Support and Protection Reports and present to Practice Governance and Moray Adult Protection Committee
- Conduct fortnightly Operational Meetings to discuss delays and meeting of targets
- Host Council Officer Forums
- Host regular training events
- Provide ongoing support and guidance
- Listen and action

8.1 Immediate Actions

In order for us to achieve this. We will require Council Officers to:

- Highlight any delays immediately
- Support and engage with Adult Support and Protection training events
- Attend Adult Support and Protection Council Officer Forums
- Talk to us

Activity	Timescale for	'Clock Starts'	'Clock Stops'
	Completion		
Screening and	5 working days	From receipt of	When IRD has
IRD		the ASP Referral	taken place
		to your inbox	
		from Access	
IRD Summary	2 working days	When IRD takes	When IRD
available		place	Summary is
			sent to
			participants
Investigation	21 Working Days	From next	When
		working day after	Assessment
		IRD	Documentation
			is completed
			and passed to

			Adult
			Protection
			Team
Initial Case	28 working days	Date of IRD	Date of Case
Conference Held			Conference
Review Case	Within 6 months of	Date of previous	Date of
Conference Held	the previous Case	Case	Review Case
	Conference	Conference or	Conference
		Review Case	
		Conference	
Case Conference	Within 14 working	Date of Case	Date signed off
Minutes	days	Conference	minutes are
Completed,			distributed
Signed off, and			
Distributed			

9. Supervision

The Moray Councils Supervision for Social Workers Policy is available from your Team Manager.

It is expected Social Workers will receive Supervision on a regular basis and will have the opportunity to discuss cases open to Adult Support and Protection Interventions. Supervision should be structured and offer the opportunity to receive support, guidance and to plan work. It is important Social Workers are able to discuss all active Adult Support and Protection cases on their allocation. This promotes a culture of good practice and good management and offers the opportunity to 'de-brief,' raise any concerns and discuss and receive support due to the demand of the work undertaken Stress is a natural reaction to working with risk. It is the responsibility of the Team Manager to ensure Social Workers receive Supervision and that they are able to discuss matters in relation to Adult Support and Protection cases which may result in causing additional stress.

As well as professional supervision Adult Protection offers the opportunity to 'de brief.' Should you require to talk, we can listen, and provide advice and guidance, you are welcome to approach at any time.

We also host Council Officer Forums where you can receive support from your peers and engage in discussion regarding complex cases, gain further training and build confidence and knowledge in your role.

10. ASP Stages

The Adult Support and Protection process consists of three key stages.

Stage 1 Screening and IRD

Stage 2 Investigation

Stage 3 Case Conference and Review

Stage 1 Screening and Initial Referral Discussion

This stage involves the initial receipt of an adult support and protection referral, and the activity undertaken to immediately safeguard an individual; engage with other agencies to gather initial information and agree actions; making an initial determination whether an ASP Investigation is required.

Stage 2 <u>Investigation</u>

This stage involves the investigation process to determine whether the individual reported is potentially an 'adult at risk' under the terms of the 2007 Act. This will involve allocation of a Council Officer. This stage may also involve conducting an interview with a designated 2nd person. The Council Officer will be expected to document their Investigation using the ASP Investigation Assessment

Stage 3 <u>Case Conference and Review</u>

This stage involves an Adult Protection Case Conference. This is a multi-agency meeting in which the Investigation conducted is discussed with all relevant agencies and the person at risk. Appropriate actions following discussion are agreed. Should it be decided that the Adult meets the 3 point test further Review Case Conferences will take place, as well as designated core groups set to ensure delivery of the Adult's protection plan

11. Stage 1 - Screening and Initial Referral Discussion

11.1 ASP Referral

The below table sets out tasks and who is responsible for completing them.

Adult Support and Protection Referral received (ASP Referral - ASP Documents)	
Save ASP Referral (original copy) on every client documents (using the approved naming convention)	Access Admin
Open referral and trace individual on CF system. Should individual not have a CF record – create record.	Access Admin
Input data from ASP Referral verbatim onto Adult Support and Protection Referral Document on CF	Access Admin
Finish and Save Document	Access Admin
Create Event – ASP Screening and IRD Event on individuals CF record assigning to AP TEAM	Access Admin
Add activity under ASP Screening – ASP referral received (date) and assign activity to Access Team (01AC) OR if an Allocated Social Worker is identified assign to the associated Team (East (01ET); West (01WT); MHSW (0192); CLDT (0179); HFHT (0122). Should the referral relate to an individual open to Children or Criminal Justice Service this will be undertaken by Access Team (01AC)	Access Admin
Alert allocated worker, and team inbox via email to referral. Please use template email provided. Please ensure that the Advanced Practitioner and Team Manager for the designated team is cc'd into this email for their awareness, as well as the Team emails. Team emails Westmorayccteam@moray.gov.uk Eastmorayccteam@moray.gov.uk Accessccteam@moray.gov.uk Learning.disability@moray.gov.uk MentalhealthSW@moray.gov.uk hfht@moray.gov.uk Should the ASP Referral indicate concerns regarding a Care Home resident please include Adultprotection@moray.gov.uk	Access Admin
Care Home resident ASP referral to be saved appropriately using named convention	ASP Admin

11.2 ASP Screening

Assign CF activity to self and complete	Screening Social Worker
Open individuals CF record and read ASP Referral on CF.	Screening Social Worker
It is recognised Allocated Social Workers may highlight Adult Support and Protection concerns within their own caseload – it is important this is initially discussed with their Team Manager in the first instance. Should the outcome of this discussion be that Adult Support and Protection interventions should be considered the Allocated Worker should then	
Complete ASP referral on Carefirst (please note should the allocated worker be CJSW or OOHSW these workers should then highlight ASP referral direct to Access Team via email (Accessteam @moray.gov.uk) reassigning the ASP Referral to 01AC (Access). Involvement will then cease. Further screening will be undertaken by Access).	Allocated Worker
Finish and save document	Allocated Worker
Proceed to Screening Tool and open Screening Event	Allocated Worker
Should individual already be known to Adult Support and Protection (existing classification) no requirement to progress Screening Tool. Email to Adultprotection@moray.gov.uk to alert of ASP referral received and any related team (Criminal Justice, Children Service for example) and that individual is already open to ASP process. Record email sent in existing ASP Event open within observations	Screening Social Worker/Allocated Worker
Screening Process then ends. It would be expected that Adult Protection would then alert all members of the MDT linked to the individual	Adult Protection /ASP Admin
Open Screening Tool Assessment	Screening Social Worker/Allocated Worker
Undertake screening tool	Screening Social Worker/Allocated Worker
Ensure all correspondence and discussion is recorded on Screening Tool and any observations and activities are recorded on Screening Event	Screening Social Worker/Allocated Worker
Discuss findings with Advanced Practitioner or Team Manager for Team. Should any issues be apparent in the gathering of information or delays in screening become evident please log these within Issue Logs (ASP Documents)	Screening Social Worker/Allocated Worker /Advanced Practitioner/ASP Advanced Practitioner

Record any consultation with Senior clearly on Screening Tool Assessment and additional information on Screening Event – using Activities/Observations	Screening Social Worker/Allocated Worker
Document Outcome of the Screening Undertaken clearly within the Tool using the drop down menu available; Further Social Work Intervention No Support Required Proceed to IRD Referral to External Agencies Social Work Team Referral	Screening Social Worker/Allocated Worker
Document outcome of Screening into individual Team ASP Spreadsheet. It is important that this spreadsheet is utilised to ensure Advanced Practitioners and Team Managers can have a clear oversight of ASP activity within Team. This information is further discussed within ASP Operational Meetings The Screening Process now ends for all cases (Screening Event can now be closed and Screening Tool Finished and Closed) except those proceeding to IRD.	Screening Social Worker/Allocated Worker/Team Admin

11.3 IRD Process

Create activity under Screening Event, assigning to APTEAM	Screening Social Worker/Allocated
Class – Referral	worker
Type - Adult Support and Protection	
Document in text box – proceed to IRD	
Leave activity open – DO NOT complete	
Email Adult Protection Team attaching the completed	Screening Social
Screening Tool - Adultprotection@moray.gov.uk alerting of	Worker/Allocated
IRD requirement. Please tag the email as High Priority and	worker
write clearly in the subject heading IRD REQUIRED. Please	
ensure that contacts details and emails of invitees are	
clearly documented in screening tool	
Please cc in Commissioning	
(commissioning@moray.gov.uk) for all Screening	
undertaken in relation to Care Home residents or concerns	
involving Care Providers	
Commissioning to respond to email directly to Adult	Commissioning
Protection Team (<u>Adultprotection@moray.gov.uk</u>) should	Team
they feel important to be involved in IRD	
Confirm receipt of referral and intent to progress to IRD	ASP Admin/ASP CP
Notification for IRD received to allocated Team	ASP Admin
Manager/ASP CP and Advanced Practitioner and request	/ Ci / Cillin
Chair is identified Chair Identification	
Should the IRD be required for an open individual the	
Area Team Manager or Advanced Practitioner will be	
responsible to Chair the IRD. Should the Adult not be	

anon to an Area Toom the Chair will be the ACD AD ar	
open to an Area Team the Chair will be the ASP AP or Access Team AP.	
Alert Health single point of contact (SPoC), Allocated Team	ASP Admin
	ASP Admin
Manager and Advanced Practitioner to IRD, attaching	
Screening Tool Assessment (using dedicated email	
address)	Alla anto di Tanno
Response to confirm ability to Chair meeting.	Allocated Team
Should the allocated team manager and advanced	Manager/Advanced
practitioner be unavailable to undertake the role of Chair –	Practitioner/ASP
please escalate to ASP CP for further discussion –	CP
Adultprotection@moray.gov.uk	NII 10 0D 0
Await date and time confirmation and contact details of	NHS SPoC
Health Representative from Health SPoC	
Notification sent to Council Officer to attend IRD (please	IRD Chair/Team
defer to Council Officer Team Duty Rota)	Admin
Once date confirmed send invites to all relevant parties	ASP Admin
(Health representative, Police, Social Worker, Council	
Officer, Care Provider, Housing and any other relevant	
party) – ensuring that Screening Tool, IRD Agenda and any	
other relevant documents are attached	
Meet to take place between IRD Chair, Council Officer and	IRD Chair/Council
Allocated Social Worker regarding case and to gather any	Officer/Allocated
further information required in preparation for IRD.	Social worker
Should there be apologies noted for IRD please encourage	ASP Admin
use of IRD Update Form	
Record any correspondence in every client files using	ASP Admin
appropriate naming convention and CF activity under	
Screening Event	
IRD takes place - IRD Summary document completed (ASP	ASP Admin
<u>Documents</u>)	
Next Steps to be discussed during IRD – including	IRD Chair
requirement for any orders (banning, assessment, removal)	
and interviews – 2 nd person to be discussed and allocated if	
appropriate	
Save and close IRD Summary – ensuring all points are	ASP Admin
answered within document – setting activity (date) for Case	
Conference within IRD Summary should this be required	
Notice sent to ASP CP and ASP AP of proposed date of	ASP Admin
ASPCC (ASP AP or ASP CP will chair all initial ASPCC	
meetings).	
IRD Summary Document complete (within 48 hours) and	ASP Admin
sent to Chair for any further amendment	
Chair to receive IRD Summary from ASP Admin and to	ASP Admin/IRD
amend if required (this should be done as soon as possible	Chair
following receipt)	
ASP Admin to await response from Chair with any	IRD Chair
amendments	
Once amendments completed finish and save document.	ASP Admin
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Download document to PDF from CF and save in every	ASP Admin
client documents in appropriate folder using appropriate	
naming convention	
Send IRD Summary to all invited along with professionals	ASP Admin
feedback form	
Close Screening Event indicating outcome – ASP	ASP Admin
involvement process ends or proceed to Investigation	

11.3 ASP Investigation Event

ASP Investigation Event to be opened – assigning to APTEAM	ASP Admin
The Council Officer present at IRD will be the Council Officer proceeding to Investigation.	
Council Officer and allocated 2 nd person to liaise with IRD Chair to talk through next steps as discussed at IRD (Should 2 nd person not have been identified at IRD – this will be appointed in discussion with the ASP CP).	Council Officer/2 nd person/IRD Chair
Council Officer to open Investigation Assessment on CF	Council officer
Council Officer to complete Investigation and to use Investigation Assessment to document findings	Council Officer
Provide feedback to Team Manager or Advanced Practitioner of Investigation at regular intervals and to ensure that these consultations are recorded in CF	Council Officer
Further consultation and guidance can be requested at any time during the process.	Council Officer/ASP AP
Complete Investigation Paperwork and document recommendations. As stated, the Investigation is required to take place within 21 working days. Should this be delayed please alert Adultprotection@moray.gov.uk as soon as possible, so that this can be formally recorded by ASP Admin	Council Officer
Clearly document recommendations of Investigation and whether the Individual may be an Adult at Risk of Harm and requirement for ASPCC	Council Officer
Alert Adultprotection@moray.gov.uk when Investigation paperwork is complete to give oversight of recommendations	Council Officer
 Discussion to take place with ASP CP/AP and Council Officer regarding Investigation and findings Discussion will include If further interventions are required under ASP – is a Case Conference required? Confirm professionals to invite to ASPCC (this would have been provisionally discussed at IRD) Discussion to take place regarding Advocacy involvement Discussion to take place to ensure Adult at Risk involvement at ASPCC 	ASP CP/AP/Council Officer

Create referral activity under ASP Investigation event and	Council Officer
assign to APTEAM – proceed to case conference	

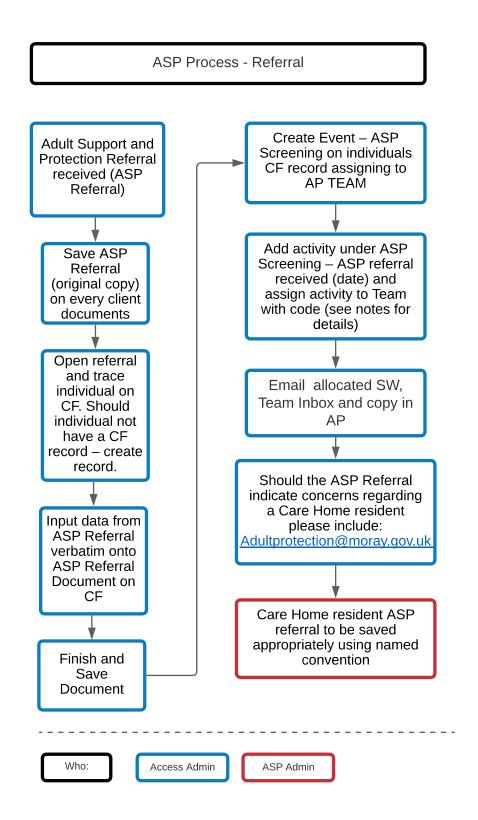
11.4 Case Conference

Complete APTEAM referral as received Liaise with Council Officer to ensure all professionals to attend are invited and that all relevant documents are sent (including Chronology) Responsibility to the Council Officer to ensure the Individual at possible Risk of Harm is invited and provide easy read ASPCC invite to support understanding should this be required. Please contact the Adult Protection Team should you require bespoke easy-read documentation. The allocated Social Worker may assist with this Arrange venue to attend for Adult at Risk and who will be accompanying them to the venue to participate in the ASPCC invites are sent and apologies noted ASP Admin to email those who cannot attend with template to complete update of their involvement ASP Admin to email those who cannot attend with template to complete update of their involvement ASPC to take place Add classification on CF if Adult is At Risk Case Conference Meeting screens to be completed on Carefirst Minute of ASPCC – using Minute template on CF Close Investigation Event and open ASP Review Event if required Update Adult at Risk information on ASP Register Share minutes with Chair within 10days of ASPCC for any amendments Finish and save minute template and to download to PDF Share minutes with all participants within 14 days of ASPCC Review ASPCC to take place within 6 months of ASPCC Review ASPCC to take place within 6 months of ASPCC Review ASPCC to take place within 6 months of ASPCC Review ASPCC to take place within 6 months of ASPCC Review ASPCC to take place with the CP ASP and ASP AP – it may be agreed that the Chair continues to be the ASP CP. This will be decided upon which Team is allocated to the Adult) Should the Adults circumstances be particularly complex further discussion to take place between Chair of ASPCC and Allocated Team Manager and Areas and Aspect Chair Discussion and update to take place between Chair of ASPCC and Allocated Team Manager and Areas and Aspect Chair of Laprace and Aspect Chair of Laprace and Aspect Chair	11.1 Cddc Collici Clide	
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Advanced Practitioner		Advanced Practitioner

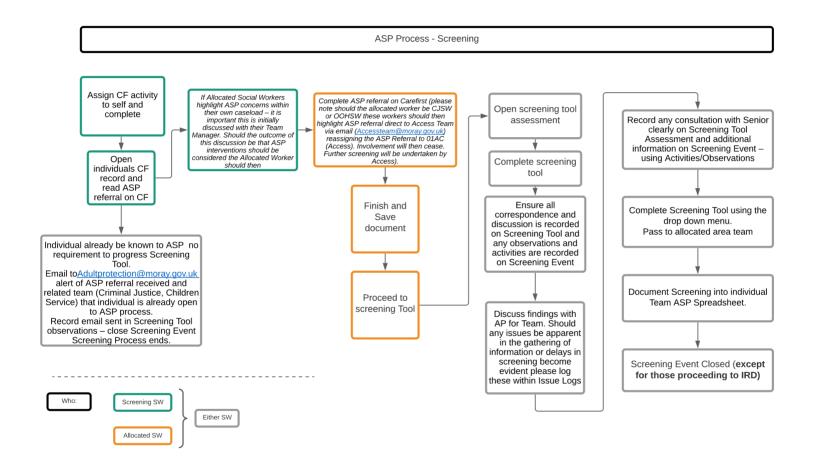
	ASP Admin/Team Admin
Future RASPCC to be chaired by Allocated Team	Allocated Team
Manager or Advanced Practitioners and minuted by Area	Manager/Advanced
Team Administrator, including use of Carefirst Case	Practitioner/Team
Conference Screens	Admin
Cases to be discussed at Operational ASP Meetings on a regular basis for update	Allocated Team Manager/Advanced Practitioner
Updates to be provided to ASP Advanced Practitioner to inform ASP Register	Allocated Team Manager/Advanced Practitioner
Core group to be facilitated in between RASPCC and to	Allocated Social
ensure Protection Plan is actioned	Worker/Team
	Manager
Notification of change of classification to be shared	Allocated Team
immediately with CP ASP and ASP Admin to ensure ASP	Manager/Advanced
Register is continually updated	Practitioner/CP ASP/ASP Admin
Review ASPCC process continues until the Adult no longer meets the 3 point test.	

12. Quick Reference Process Maps

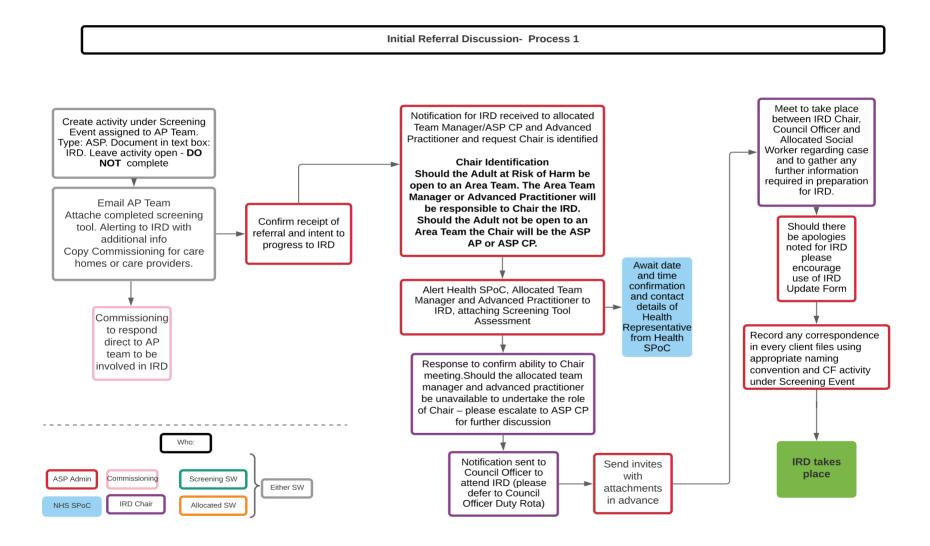
12.1 ASP Process – Referral



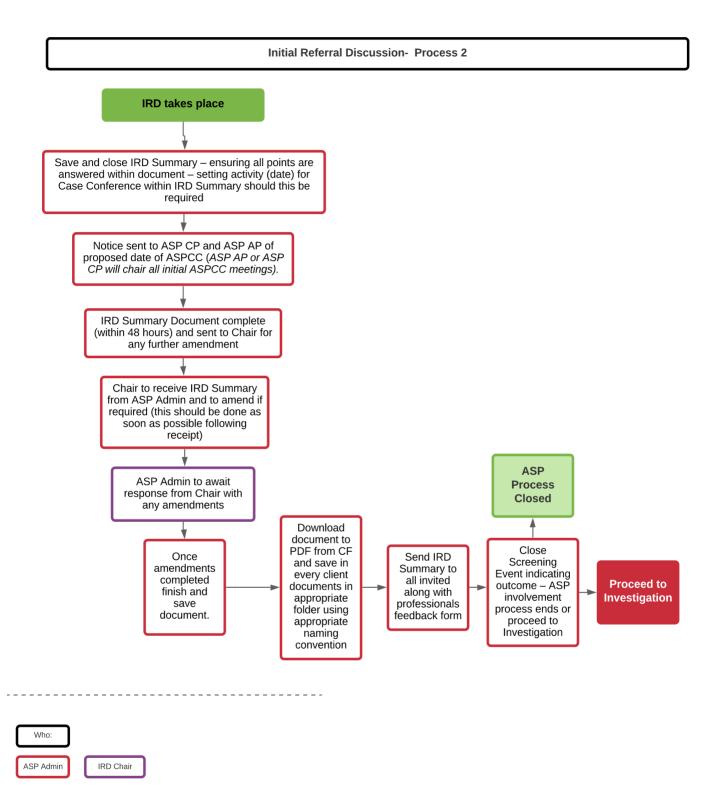
12.2 ASP Screen



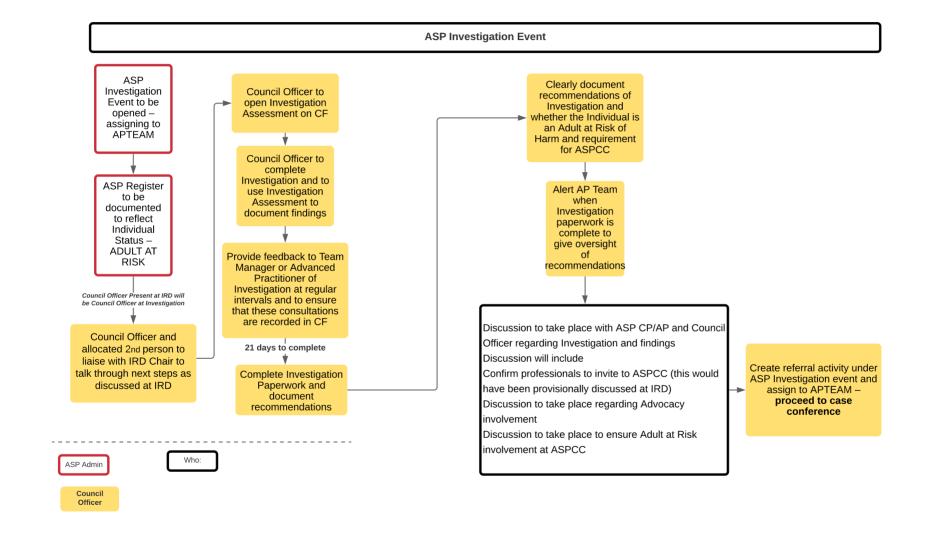
12.3 IRD -Process 1



12.4 IRD Process 2



12.5 ASP Investigation Event



12.6 Case Conference

CO / SW

